

**MANAGING BARRIERS TO VISITATION TOGETHER:
A QUALITATIVE EXAMINATION OF FAMILY MEMBERS
ACTIVE IN SUPPORT GROUPS**

By

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ABSTRACT

MANAGING BARRIERS TO VISITATION TOGETHER: A QUALITATIVE EXAMINATION OF FAMILY MEMBERS ACTIVE IN SUPPORT GROUPS

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One of the many consequences of carceral populations expanding at unprecedented rates over the past thirty years is an increase in the number of families affected by incarceration, particularly with regard to visitation. Visitation is beneficial to inmates through improved social capital, institutional adjustment, and the decreased likelihood that they will recidivate post-release; however, family members of prisoners are the “forgotten victims” of the criminal justice system and should be included in correctional policy debates. This dissertation applies a qualitative research design to examine the visitation process and the various barriers that can impede family members, as well as how they attempt to address these barriers through their involvement in support groups. Data collection included approximately 100 hours of participant observation of support groups for family members of prisoners, as well as interviews with members ($N=31$). Results highlight how family members navigate and manage barriers to visitation together through their support group membership. In addition, I also examine the various institutional barriers encountered during visitation, as well as family members’ attitudes about current administrative rules and policy directives, and whether they are helpful or harmful to the visitation process. Findings demonstrate issues at the institutional level, at which barriers to visitation are inherently created by the very policies that are meant to facilitate the process. Aiming to include the voices of family members into current prison debates, results also provide practical policy solutions and suggestions for programming that would encourage visitation and

family connectedness directly from those active in support groups and who have also learned how to advocate for their incarcerated loved one through their involvement.

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This dissertation is dedicated to all the family members and friends of the incarcerated who were a part of this project. Whether you voluntarily agreed to be interviewed, allowed me to attend and observe support group meetings, or shared your knowledge and expertise with me – thank you. More importantly, thank you for your time, emotional labor and for doing the work.

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CHAPTER 1: INTRODUCTION

Statement of the Problem

Although prison populations have recently declined, an estimated 1.49 million individuals were held in state or federal custody at the end of 2017, the lowest the U.S. prison population has been since 2005 (Bronson & Carson, 2019). However, with carceral populations expanding at unprecedented rates over the past thirty years, some insist that the United States continues to suffer from the effects of imprisonment and collateral consequences of mass incarceration (Alexander, 2012; DeFina & Hannon, 2013). One consequence of prison population growth is an increase in the number of families affected by incarceration. With approximately 95 percent of inmates being held in state correctional facilities eventually returning to their communities, and typically within three years (Hughes, Wilson, & Beck, 2001), it is important to continue to examine the prisoner-family relationship and how social bonds are maintained during incarceration.

The study of visitation is significant, as forming social ties and maintaining social bonds can be key for prisoners during both their incarceration and post-release (Bales & Mears, 2008; Berg & Huebner, 2011; Cobbina, Huebner & Berg, 2012; Cochran, 2012; Hairston, 1991; Liu, Pickett & Baker, 2016; Mears, Cochran, Siennick, & Bales, 2011; Pleggenkuhle, Heubner & Summers, 2017; Wolff & Draine, 2004). As carceral populations have increased, offenders have had a difficult time maintaining social bonds and social support networks. Email is not always available to inmates, mailed letters are slow, and phone calls can be prohibitively expensive (La Vigne, Naser, Brooks, & Castro, 2005).

One method of maintenance that has garnered more attention in recent years is through inmate visitation (Bales & Mears, 2008; Cochran, 2012; Cochran, Bales & Mears, 2014; De

Claire & Dixon, 2017; Duwe & Clark, 2013; Mancini, Baker, Sainju, Golden, Bedard & Gertz, 2016; Mears et al., 2011; Siennick, Mears & Bales, 2013; Tartarto & Levy, 2017). Prisoners with social ties to family are more likely to maintain conventional social roles and are better able to cope with the strain and social isolation that some can experience during incarceration and upon reentry into the community (Bales & Mears, 2008; Christian, 2005; Duwe & Clark, 2013). For instance, in an earlier examination of family ties during imprisonment, Hairston (1991) discovered that maintenance of these relationships led to decreased recidivism, improved mental health, and increased family reunification after release. Social relationships are bridges between people (Wolff & Draine, 2004) and visitation offers the only opportunity inmates have for direct contact with outside social networks.

On the issue of prisoner well-being, inmates perceive the maintenance of social ties as especially important (Comfort 2003, 2008; Fishman, 1990) and it has been demonstrated how visitation can help reduce strain and help inmates cope with social isolation in prosocial ways, thus reducing prison disorder (Carlson & Cervera, 1991a, 1991b). Visitation has aided in other realms of prisoner well-being, such as mental health and depression (Monahan, Goldweber & Cauffman, 2011; Poehlmann, 2005) as well as stress related to parenting while incarcerated (Houck & Loper, 2002; Tuerk & Loper, 2006). In a similar vein, visitation can help reduce the likelihood of prisoner misconduct, rule-breaking behavior, and the probability of disciplinary infractions (Cochran, 2012; Jiang, Fisher-Giorlando & Mo, 2005; Jiang & Winfree, 2006; Siennick et al., 2013). Visitation during incarceration has also been shown to help reduce the likelihood that inmates will recidivate once released (Bales & Mears, 2008; Duwe & Clark, 2013; Mears et al., 2011). Prisoners who receive regular visitation are also better able to access social resources and thus social capital, which can help provide practical benefits on release such

as employment, financial well-being, dealing with the stigma of prison, as well as maintaining social bonds with family members once they return to the community (Berg & Huebner, 2011; Cobbina et al., 2012; Mancini et al., 2016).

In short, scholarship has primarily focused on documenting the benefits visitation can generally have on prisoners, especially for recidivism and reentry outcomes. Perhaps it is time to revisit this topic, as little is currently known about the factors that contribute to visitation (Cochran et al., 2014). If visitation produces positive effects and is beneficial for inmates, then why not examine these factors more closely, and from the perspective of the family member? During an era in which mass incarceration has led to increased attention to recidivism and efforts to reduce it, this research gap stands out (Cochran et al., 2014).

A lack of evidence remains as to how visitation affects family members of prisoners. This is relevant because it is overwhelmingly family members who face additional burdens of maintaining regular visits to prison (Girshick, 1996). Despite scholarly examinations over the past forty years, it remains unclear what it is like for families to bridge the gap between their lives “on the outside,” and the “inside lives” of their incarcerated loved ones (Braman, 2004). While several scholars have paved the way in examining visitation from the perspective of the family member (Arditti, 2003, 2005; Casey-Acevedo & Bakken, 2002; Christian, 2005; Christian & Kennedy, 2011; Christian, Mellow & Thomas, 2006; Comfort, 2003, 2008; Hairston, 1991; Homer, 1979; Jorgenson, Hernandez & Warren, 1986; Sack, Seidler & Thomas, 1976; Tasca, Mulvey & Rodriguez, 2016; Tartaro & Levy, 2017; Tewksbury & DeMichele, 2005), much more remains to be discovered as to how family members navigate and manage the visitation process. Based on current knowledge, staying connected to a prisoner is a time, resource, and labor-intensive process, which may create additional barriers to maintaining social bonds (Christian,

2005, Christian et al., 2006). It is specifically these additional barriers to visitation that must be further examined, as they could ultimately affect how the prisoner-family relationship is maintained.

Some barriers have been identified in the literature, such as the number of miles between family members and their incarcerated loved ones (*distance*); how long it takes to get to the prison (*time*); how much money the trip will require and other additional costs that may arise during the visit and to maintain communication in between visits (*cost*); what barriers they may face from administrative rules and/or prison staff (*institutional barriers*); and being emotionally and mentally prepared to visit in the first place, as well as dealing with the complexities of maintaining the prisoner-family relationship (*emotional barriers*). Various *other barriers* to visitation have also been recognized such as employment and work schedules, if transportation is available and/or reliable, as well as visiting with dependent children or finding childcare services when needed. Since these discoveries have been made, not enough attention has been paid to the prisoner-family relationship and how it is maintained, or at least attempted to be maintained, through visitation. Despite advancements in the prison visitation literature, we know relatively little about the familial processes that unfold during the visit itself (Tasca et al., 2016). Beyond what has already been uncovered, it is important to inquire what additional barriers may arise during the visitation process. Furthermore, it is also important to examine what kind of assistance or resources may be available to family members to help make the visitation process smoother.

Knowledge on this topic should be expanded. With evidence detailing the complexity of the prisoner-family relationship (Christian, 2005; Christian & Kennedy, 2011; Christian et al., 2006; Meyers, Wright, Young & Tasca, 2017; Pleggenkuhle et al., 2017), there is much more to discover about prisoners' families experiences surrounding. Our understanding of this issue can

also be enhanced through qualitative research design and additional methodological tools and settings previously unavailable or underutilized.

Scholars located in the United Kingdom have long recognized family members of prisoners as the “forgotten victims” of the criminal justice system (Codd, 1998; Light, 1993; Light & Campbell, 2007; Matthews, 1983). However, nearly forty years since Matthews (1983) coined this term, research studies have continued to show a lack of provision and responsibility for the needs of prisoners’ families (Lights & Campbell, 2007). As a response to their social exclusion from the general public and being continually ignored by correctional departments, as well as probation and parole services, family members of prisoners have created their own support groups and networks (Codd, 1998). Otherwise, they tend to navigate the visitation process alone and largely without the guidance of others.

Similar support networks have been recognized in at least one study conducted in the United States. In her ethnographic observation of family members traveling to prisons located in upstate New York, Christian (2005) reported how over time, and through the repeated shared experience of “riding the bus” together, family members of prisoners bonded through their shared experience and began providing emotional and moral support in times of need. However, the examination of support groups for family members of prisoners is a topic that has yet to be further explored in the U.S.

As UK scholars have recognized the need to include these “forgotten victims” into current prison debates, and especially ones concerning visitation policy (Light & Campbell, 2007), it is imperative that we do the same here in the United States. Previous examinations have reported public perception towards prisoners’ families is generally that of an “undeserving victim” (Matthews, 1983). This undeserving status is applied due to their presumed guilt by

association for simply having an incarcerated loved one (Roberts, 1994). Due to the continued neglect of prisoners' families (Codd, 1998), few prison visitation programs are actually designed to encourage visits (Duwe & Clark, 2013). For example, visitation hours are limited and can be changed or revoked by prison staff at any time (Hairston, 1991). The rude treatment of visitors by prison staff has also been reported (Arditti, 2003), as well as the criminalization of visitors and the restriction of their movement through the experience Comfort (2003) has conceptualized as *secondary prisonization*. This process involves family members being socialized into the culture of the prison, which expects them to follow the same strict rules and regulations as inmates and ultimately controls the way in which visitation occurs (Comfort, 2003).

Related to this, as the benefits of family visitation have largely been empirically supported, it is crucial to investigate how policy can act as an additional barrier to visitation. While some have previously examined this topic (Boudin, Stutz & Littman, 2013; Hoffman, Dickinson & Dunn, 2007; Jorgenson, et al., 1986; Schafer, 1991; Shay, 2013; Sturges, 2002;), further evidence is needed from the perspective of the family member and other potential visitors to help corroborate evidence already gathered from inmates, wardens and other criminal justice stakeholders captured in earlier studies.

Significance of the Study

This study addresses four gaps in existing prisoner-family research. First, it focuses on family members of prisoners, a group that remains overlooked in the research and largely “forgotten” by criminal justice stakeholders. Second, it continues to examine the strategies they use to navigate and manage the visitation process, which helps confirm some of the barriers that have been previously recognized in the literature. Third, it introduces original data to examine how being active in support groups for prisoners' families can aid addressing barriers to

visitation. Finally, it also investigates how support group membership can aid in addressing these barriers by identifying visitation policies that can strengthen the prisoner-family relationship.

CHAPTER 2: REVIEW OF THE LITERATURE

When attention has been paid to family members of prisoners, it typically has been through identification of the collateral consequences of incarceration (Hagan & Dinovitzer, 1999; Rose & Clear, 2003). One example of a collateral consequence is the removal of a parent from the household, which causes significant loss in human and social capital for the offender, their family, their community, and the local economy (Clear, Rose & Ryder, 2001; Hagan & Dinovitzer; Rose & Clear, 2003). Considering the vital role families can play in successful reentry, we know relatively little about family life during imprisonment (Tasca et al., 2016). Prisoners' families remain understudied and the effects of imprisonment on families and children of prisoners tend to be neglected in academic research, prison statistics, public policy, and media coverage (Murray, 2008). Some have even made the case that family interactions during incarceration are important dimensions of the collateral consequences of incarceration and should be included in the literature (LaVigne et al., 2005).

The research that has been conducted suggests the impact on a prisoner's spouse is generally more severe than on parents (Ferraro, Johnson, Jorgensen & Bolton, 1983; Schneller, 1975; Schwartz & Weintraub, 1974) although parents and other family members can also suffer both everyday practical difficulties and psychological difficulties (Murray, 2008; for review see Arditti, 2003; Casey-Acevedo & Bakken, 2002; Christian, 2005; Christian & Kennedy, 2011; Christian et al., 2006; Comfort, 2003, 2008; Homer, 1979; Jorgenson et al., 1986; Sack et al., 1976; Tasca et al., 2016; Tewksbury & DeMichele, 2005). It is important to note that while these interactions remain understudied, scholars have long been interested in family members of prisoners, with examinations being conducted for nearly a century (Bloodgood, 1928; Sacks, 1938).

Earlier Examinations of Family Members of Prisoners

Understanding the historical context, in addition to the criminological context, is vital when reviewing the early studies of prisoners' families given changes in how "family" is defined. This study has identified three waves of research on family members of prisoners: 1) a focus on prisoner's wives and the relationship between incarcerated parents and their children (1930s –1990s); 2) a focus on some of the collateral consequences mass incarceration can have on the family, and how visitation fits into the equation (1990s – 2010s); and 3) which challenges remain for prisoners' families trying to continue their visits in the aftermath of mass incarceration (2010s – Present). Each of these scholarly contributions have been significant for the development of this topic and for the recognition of some of the barriers family members of prisoners tend to experience.

Prisoners' Wives and Their Children (1930s – 1990s)

Some of the earliest studies on prisoners' families were conducted by Bloodgood (1928), Sacks (1938), and Blackwell (1959). Each concentrated on the financial problems incurred and the adjustment of families during incarceration (Murray, 2008). For instance, Blackwell (1959) found that families' adjustment was related to socio-economic variables such as household income or level of education obtained, but related to socio-psychological variables as well. In short, family adjustment depended largely on conditions that existed in the marital relationship before separation due to incarceration. However, Blackwell (1959) discovered that demoralization occurred when a husband is imprisoned that did not occur in other types of separation, such as divorce.

Pauline Morris (1965) is typically credited as conducting the "first systematic study of prisoners' families" (Light & Campbell, 2007, pg. 298), and has been considered "the most

comprehensive study of prisoners' wives" by others (Ferraro et al., 1983, pg. 576). Advancing concepts related to financial problems and family adjustment, Morris (1965) concentrated on other issues affecting family members of prisoners by interviewing 825 imprisoned men and 469 of their wives in England. She discovered that in addition to financial problems, participants experienced a vast amount of loneliness, stigmatization from their neighbors, issues related to child management, and difficulty in visiting the inmate (Morris, 1965). Since Morris' foundational research, other studies of prisoner's partners and wives have reported similar results across the United Kingdom (UK), United States, Ireland, and Australia (Murray, 2008).

Moving into the 1970s and 1980s, scholars continued to fixate on the impact of incarceration on prisoners' wives (Baker, Morris & Janus, 1978; Schwartz & Weintraub, 1974). Interviewing the wives and girlfriends of prisoners, Schwartz and Weintraub (1974) aimed to make family members visible and describe "the complex pressures with which they must deal" (pg. 20). They did this by demonstrating how the incarceration of a family member produces stressors that are similar to ones experienced during other times of loss. Examining the "hidden victims of crime" (pg. 143) from the wives' perspective, Baker and colleagues (1978) were concerned with what families of inmates go through from the moment their spouse is arrested to when they are sentenced, and eventually, incarcerated. In addition to facing complex pressures, such as a lack of money and difficulty in finding or retaining housing, participants largely reported difficulty in physically visiting loved ones and suggested that correctional departments provide transportation or travel expenses to and from prisons (Baker et al., 1978).

Curious about how prisoners' wives "do their time on the outside", Fishman (1990) was interested in the ways in which visitation and communication through phone calls and letters could affect the marital relationship during incarceration, and how wives responded to such

contact. When it comes to the visitation process, several constraints were found. Although maximizing prisoners' contacts with their families was a formal goal of the correctional department sampled, it was reported that each unit limited visitation through administrative rules and regulations that determined visiting days, length of visiting time, the degree of physical contact allowed, conduct of prisoners and visitors, and what provisions could be brought into the prison (Fishman, 1990). Wives summarized visits as "not an easy event" (pg. 158) and listed three important constraints they frequently experienced: lack of privacy, time restrictions, and lack of freedom of movement. Visitation was also deemed a privilege that prisoners earned, and thus, could be revoked producing further constraint in maintaining the prisoner-family relationship.

Studies were later extended to children of incarcerated parents to determine the effects on the parent-child relationship (Ferraro et al., 1983; Hannon, Martin & Martin, 1984; Homer, 1979; Sack et al., 1976). While there has been a great deal of discussion as to the stigmatizing and traumatizing effects imprisonment can have on a spouse and/or child, only a few of these studies discuss visitation and what barriers family members may face. Recognizing that the prisoner-family relationship is "desirable but difficult," Homer (1979) discussed the amount of distance between family members and prisoners due to the location of correctional facilities, as well as the expensive cost of traveling for most families. Interested in "the hidden costs of imprisonment" (pg. 575), Ferraro and colleagues (1983) discovered that both economic and emotional hardships were pervasive across their sample. Family members also reported difficulties in having fun or experiencing enjoyment, as well as problems with expressing and dealing with one's emotions (Ferraro et al., 1983).

While these examinations have proved to be foundational, it is important to recognize some of their shortcomings. For instance, most of these studies limited their definition of “prisoners’ families” to only the wives of incarcerated husbands (Baker et al., 1978; Blackwell, 1959; Bloodgood, 1928; Fishman, 1990; Morris, 1965; Sacks, 1938; Schwartz & Weintraub, 1974); single mothers who are the sole caregivers of children with an incarcerated father (Hannon et al., 1984; Homer, 1979; Sack et al., 1976); and caregivers of children with incarcerated mothers (Fuller, 1993). Notably, there have been few studies on the husbands and significant others of incarcerated women, or what the visitation experience is like specifically for women who are in prison (Bedard & Helland, 2004; Casey-Acevedo & Bakken, 2002; Celinska & Siegel, 2010; Girshick, 1996). It is important to point out that although prisoners’ families often experience similar stresses, there is growing appreciation that families of prisoners, including partners and friends, are not a homogenous group (Murray, 2008). More knowledge is needed on how family members of prisoners are defined, the type of relationships that are garnered between them, and the overall unique lived experiences surrounding the prisoner-family relationship before, during, and after incarceration.

The 1990s witnessed the proliferation of “get tough” policies such as mandatory minimum sentences, determinate sentencing, and more punitive attitudes towards offenders (Tewksbury & DeMichele, 2005). Thus, many prisons were forced to omit programs once deemed beneficial in achieving institutional goals, and visitation programs were some of the first to experience these cutbacks (Tewksbury & DeMichele, 2005). This movement also helped to control visits and monitor visitor movement more closely (Tewksbury & DeMichele, 2005), giving way for scholars to address issues surrounding prison visitation during an era of mass incarceration.

Visitation During Mass Incarceration (1990s – 2010s)

The number of families affected by incarceration drastically increased as a result of “get tough” policies and the explosion of prison populations. During this era, even more adults and children were affected by incarceration and attempts to maintain social ties with their incarcerated loved one became more difficult. It was also during this time that a crucial and unanimously decided Supreme Court decision was handed down directly affecting institutional policies surrounding visitation: *Overton v. Bazzetta* (2003). This decision addressed three specific legal questions pertaining to prison visitation policies: 1) whether inmates possessed the right to noncontact visits under the First and Fourteenth amendments; 2) whether strict restrictions imposed on noncontact prison visits were reasonably related to legitimate correctional goals; and 3) whether these restrictions amounted to a violation of the Eighth Amendment (Tewskbury & DeMichele, 2005).

Notably, this case was originally brought before the United States District Court for the Eastern District of Michigan. The population of Michigan’s prisons increased in the early 1990s (*Overton v. Bazzetta*, 2003). An increase in the inmate populations ultimately meant an increase in the number of visitors, which had the unintended consequence of placing strain on the resources available for prison supervision. Prison officials now found it more difficult to maintain order and control during visitation, as well as difficulty in preventing visitors from smuggling or trafficking drugs into correctional facilities (*Overton v. Bazzetta*, 2003). This led the Michigan Department of Corrections (MDOC) to encounter special problems and concerns related to an increase in the number of children coming to visit their incarcerated parent or family member. The MDOC claimed that children, “who are at risk of seeing or hearing harmful

conduct during visits,” would require special care and additional supervision by prison staff to better ensure their safety (*Overton v. Bazzetta*, 2003, 129).

The incidence of substance abuse in Michigan prisons also increased during this period and in response, the Department revised its prison visitation policies in 1995 (*Overton v. Bazzetta*, 2003). One of the approaches taken by MDOC was to limit the type and number of visitors a prisoner is eligible to receive in hopes of decreasing the total number of visitors and regain order and control within state facilities. This revised visitation policy currently remains in place and can be summarized as follows:

“... an inmate may receive visits only from individuals placed on an approved visitor list, except that qualified members of the clergy and attorneys on official business may visit without being listed. Mich. Admin. Code Rule 791.6609(2) (1999); Director's Office Mem. 1995-59 (effective date Aug. 25, 1995). The list may include an unlimited number of members of the prisoner's immediate family and 10 other individuals the prisoner designates, subject to some restrictions. Rule 791.6609(2). Minors under the age of 18 may not be placed on the list unless they are the children, stepchildren, grandchildren, or siblings of the inmate. Rule 791.6609(2)(b); Mich. Comp. Laws Ann. § 791.268a (West Supp. 2003). If an inmate's parental rights have been terminated, the child may not be a visitor. Rule 791.6609(6)(a) (1999). A child authorized to visit must be accompanied by an adult who is an immediate family member of the child or of the inmate or who is the legal guardian of the child. Rule 791.6609(5); Mich. Dept. of Corrections Procedure OP-SLF/STF-05.03.140, p. 9 (effective date Sept. 15, 1999). An inmate may not place a former prisoner on the visitor list unless the former prisoner is a member of the inmate's immediate family and the warden has given prior approval. Rule 791.6609(7) (*Overton v. Bazzetta*, 2003).

While allowing up to ten visitors appears to at least demonstrate that MDOC recognizes the importance in both facilitating and maintaining the prisoner-family relationship, these policy changes are restrictive. One issue lies in how “immediate family” is defined. For instance, aunts and uncles are currently not permitted on prisoner’s visitor lists unless adequate verification is provided that they served as a surrogate parent (Michigan Department of Corrections, 2019a). Furthermore, minor children must be accompanied by the child’s legal guardian or by an adult immediate family member, and this adult must also be approved, and the name displayed on the

prisoner's approved list. "Visitors under the age of 18 must also present an original or certified copy of a birth certificate, certificate of adoption, a court order establishing paternity, or a valid picture identification ... if they have one, each time they visit" (Michigan Department of Corrections, Memorandum, 2017). For extended family or friends that wish to visit or assist in accompanying minor children to visit their incarcerated parent or relative, these rules make it nearly impossible to become an approved visitor in the first place.

In order to address the substance abuse problem that has now become prevalent in MDOC facilities, the following policy was also initiated: "Prisoners who commit multiple substance-abuse violations are not permitted to receive any visitors except attorneys and members of the clergy. Rule 791.6609(11)(d). An inmate subject to this restriction may apply for reinstatement of visitation privileges after two years. Rule 791.6609(12). Reinstatement is within the warden's discretion" (*Overton v. Bazzetta*, 2003). Loss of visits due to substance abuse tickets are still common practice in MDOC facilities, however, the length of time restricting visits for two or more substance abuse violations has been lessened from two years to one year. Although the primary reason for implementing this policy was to ensure the safety and security of people in prison, it ultimately utilizes visitation as a form of punishment.

Despite respondents filing a lawsuit alleging that these restrictions upon visitation violate the First, Eighth, and Fourteenth Amendments, the Supreme Court upheld MDOC's revised policies, which severely restricted visitation, including those from children of incarcerated parents and noncontact visits (Boudin et al., 2013). Nearly fifteen years later, *Overton v. Bazzetta* (2003) has been widely cited for the proposition that "freedom of association is among the rights least compatible with incarceration" (Boudin et al., 2013, pg. 131). While the Supreme Court has

affirmed that prisoners have a right to visitation, it is nonetheless the case that correctional facilities have the authority to restrict visitation (Monahan et al., 2011).

Recognizing this shift in institutional policy, several studies aimed to document visitation during the era of mass incarceration and recognize new challenges faced by family members (Braman, 2004; Casey-Acevedo & Bakken, 2002; Christian, 2005; Christian & Kennedy, 2011; Christian et al., 2006; Comfort, 2003, 2008; Tewksbury & DeMichele, 2005). Reminiscent of Fishman's (1990) ethnographic study of prisoners' wives, Braman (2004) provided a deeper look into the prisoner-family relationship and the experience of "doing time on the outside" alongside their incarcerated loved one. In short, the central goal of her study was to describe the effects of incarceration on family and community life (Braman, 2004). Their findings validated early examinations of prisoners' wives and concluded that negative effects of incarceration reach far beyond just the prisoner but also extend to their immediate family, extended family, friends, and neighborly ties in the communities they returned to.

Concerned with capturing the environmental factors that can affect visitation, Tewksbury and DeMichele (2005) discovered several barriers family members can experience including issues related to prison staff, conditions of visitation areas, the reasonableness of rules, the ability to pass through security, and the lack of prison services available for visitors. They also found that the visitor's age, race, education, and the frequency of visits were significantly related to overall perceptions of the visitation experience and environment (Tewksbury & DeMichele, 2005). For example, visitors with higher levels of education tended to expect more from social institutions, did not view getting through security as an easy process, and held lower perceptions towards the friendliness of the prison staff and the reasonableness of the prison rules. This

demonstrates exactly what Murray (2008) was referring to when he stated that families and partners of prisoners are not a homogenous group and that a variety of responses are needed.

Knowing that geographic separation from family is one consequence of imprisonment, Christian (2005) filled in some of the missing gaps of whether distance from prison facilities is in fact an impediment to visitation and how family members of prisoners attempt to manage this particular barrier. Notably, she developed a timeline utilizing ethnographic observation of family members traveling by bus to two prisons in upstate New York. Beginning at approximately 9:00pm on a Friday night and ending 24 hours later at 9:00pm on Saturday evening, Christian (2005) details just how much time is spent to complete a single visit. In addition of time spent traveling to prison, she observed how much *more* time family members devoted to their incarcerated loved ones in general.

Discovering additional barriers to visitation such as time, cost, and administrative rules and regulations, Christian then extended her original analysis to further examine the social and economic implications of families' connections to prisoners (Christian et al. 2006). The authors presented some of the potential costs and benefits to family members who attempted to maintain social ties with prisoners. Similar to some of the costs discovered during early examinations of prisoners' wives (Blackwell, 1959), results suggested that there were significant economic and social costs to a prisoner's family should they desire to maintain even the most basic level of contact (Christian et al., 2006). Furthermore, because it was suggested that family members of prisoners were put in a position of "constant negotiation of competing interests", she also argued that families who try to maintain social ties with a prisoner may end up jeopardizing their own social and economic capital (Christian et al., 2006, pg. 443), validating her earlier findings that

those who spend most of their time facilitating the prisoner-family relationship may end up negatively impacting their community involvement (Christian, 2005).

Finally, work has also been done in the realm of defining family members' relationships with prisoners by examining multiple perspectives of what impact incarceration and its consequences can have for the prisoner, the family member, and their relationship (Christian & Kennedy, 2011). By interviewing several prisoner-family dyads, and through the exploration of secondary narratives of family members, Christian and Kennedy (2011) demonstrated the importance in defining the characteristics of these narratives because each has their own unique implications for the family member's willingness and capacity to maintain the relationship. This also includes the willingness and capacity to visit.

Examinations of family members of prisoners also shifted during this time to highlight the unique challenges faced by incarcerated women. For instance, Casey-Acevedo and Bakken (2002) reported that while 79% of women in a maximum-security correctional facility received at least one visit during their incarceration, they also found that 61% did not receive visits from any of their minor children during incarceration. A major impediment to visitation was the distance caregivers, and especially children, had to travel to reach the prison (Casey-Acevedo & Bakken, 2002). Nonetheless, as it is empirically known that visitation can help foster prison adjustment and lead to better societal adjustment after prison, they concluded that prison administration and state governments needed to expend resources to facilitate it simply "because families and friends of inmates do not have the means to visit" (Casey-Acevedo & Bakken, 2002, pg. 68). With legal restrictions currently placed on visitation in the aftermath of mass incarceration, it is crucial that knowledge toward barriers to visitation, and how families navigate and manage this process, continue to expand.

Struggling in the Aftermath of Mass Incarceration (2010s – Present)

Continuing recent theoretical and empirical work surrounding the benefits of maintaining the prisoner-family relationship, Liu and colleagues (2016) argued that prison visitation continues to operate as a “black box” (pg. 767) in which social and relational effects of prison visits have escaped empirical examination. They contended that an overreliance on official records has not included the measurement of inmates’ attitudes and perceptions towards visitation, or their social attachments with family members (Liu et al., 2016). Using official records also does not allow complexities of the prisoner-family relationship to be captured, as well as potentially confounding factors such as peer/family attachment or peer/family criminality (Liu et al., 2016; see also Christian, 2005; Christian & Kennedy, 2011; Christian et al., 2006). Looking to test the collateral pains of imprisonment, they surveyed male prisoners in a medium-security correctional facility and found that visitation contributed to the maintenance of inmates’ social capital and could therefore potentially shape their perceptions of some of the informal costs of reoffending during post-release (Liu et al., 2016). In other words, regular visitation during incarceration may play a crucial role in reentry as it has complex, but beneficial, psychological and relational effects (Liu et al., 2016).

While researchers have made great strides in understanding the collateral consequences of incarceration, we still know relatively little about family life during imprisonment (Tasca et al., 2016). In an effort to extend examinations of the prisoner-family relationship thus far, Tasca and colleagues (2016) observed family processes among caregivers, prisoners, and their children during visitation. Their analyses have helped reveal some of the complexities among interactions and interpersonal exchanges acknowledged by previous scholarship (Christian, 2005; Christian & Kennedy, 2011; Christian et al., 2006; Liu et al. 2016).

In addition to discovering universal engagement through the concept of *Family Time*, three familial processes were observed during visitation: *Attempts to Bond*, *Declarations of Family Responsibilities*, and *Messages of Reform*. Despite the number of challenges related to prison visitation, caregivers reported family time as being important and described how visitation provided an opportunity to simply “be together” (Tasca et al., 2016, pg. 466). While understanding of how family members of prisoners navigate and manage barriers to visitation has increased, Tasca and colleagues (2016) remind us that there needs to be a critical increase in the understanding of how families also navigate separation and reunification during incarceration. These examinations are crucial as “the specific nature of family interactions during prison visits have important implications for correctional policy as visitation is the sole opportunity families have to interact face-to-face, be reacquainted, and begin the laborious task of repairing the family unit” (Tasca et al., 2016, pg. 474).

Finally, prison visitation is a crisis not limited to the United States. England and Australia have continued to report barriers to visitation by sharing similar experiences of family members of prisoners. For instance, as Flynn’s (2014) findings from a women’s prison in Victoria, Australia strongly support what is already known about barriers to visitation, especially for children of incarcerated parents (Casey-Acevedo & Bakken, 2002), she extends this knowledge by calling attention to the need of engaging and incorporating children’s voices in visitation literature. With issues of children getting or being in prison remaining an impediment, yet another challenge to this topic is how to better address and meet the needs of children while they are visiting, or trying to visit a loved one in prison (Flynn, 2014).

In England, scholars examined the experiences of British Pakistani family members of prisoners (Abass, Reeves & Raikes, 2016). In addition to experiencing a lack of information,

feelings of stigma and shame, they discovered that British Pakistani family members of prisoners reported their experiences of the criminal justice system as culturally inappropriate and insensitive, raising issues related to direct, indirect, and institutional racism (Abass et al., 2016). Like many women in earlier examinations of prisoners' wives, British Pakistani women felt emotional distress over becoming both the provider and counselor for their imprisoned partner. However, described as "a vulnerable minority within a minority" (Abass et al., 2016 pg. 264), their ethnicity and dual nationality sparked unique challenges for these particular family members of color. Furthermore, their findings pointed out that while family members were more likely to access support if criminal justice and support services staff included the wider British Pakistani community, they felt hindered to do so if those staff were perceived to have any personal relationships to the families' own local communities (Abass et al., 2016).

One method of support services that has been introduced in the UK is the Offenders' Families Helpline, which is a free and confidential service that provides information and emotional support to family members and friends of offenders involved in any stage of the criminal justice system (Sharratt et al., 2014). Receiving a total of 10,000 telephone calls and 145,000 unique visitors to their website, the authors set out to evaluate the extent to which the Helpline met families' support needs, as well as the impacts and outcomes the Helpline had on family members. Results showed the Helpline to be a crucial service that was also highly effective in meeting families' support needs with four prominent themes emerging. First, a majority of respondents felt as if they had "... nowhere else to turn" and experienced relief and reassurance when they discovered the Helpline (Sharratt et al., 2014, pg. 33). A second theme that emerged was that by calling the Helpline, family members were able to have several of their questions pertaining to the criminal justice system answered, thus meeting their informational

needs. Third, the Helpline was found to help families cope by having their emotional needs recognized. Finally, the fourth theme discovered was that by simply knowing that Offenders' Families Helpline existed in the first place seemed to make a difference. Families reported that the Helpline team really listened to their concerns, and that they perceived the experience as refreshingly genuine and non-judgmental (Sharratt et al., 2014).

While the authors point out that the Helpline helped fill an important gap in support service and provision – particularly in terms of alleviating negative emotional consequences – this one method does not always guarantee success in meeting family support needs. Based on their modest sample size ($N=68$), their observations may not necessarily reflect the views of all family members accessing the Helpline and how they use it to emotionally cope with their situation or to meet their informational needs (Sharratt et al., 2014). While Sharratt and colleagues (2014) concluded further research was required to understand what impacts and outcomes the Helpline website has on family members, the overall importance of their findings demonstrate how support networks are built and utilized by family members of prisoners.

These more recent examinations of family members of prisoners only continue to highlight the need for research to extend its focus on how family members navigate and manage the visitation process, including what barriers they may face and what support services they may utilize. While this need should be extended on an international level, the U.S. criminal justice system is unique among these. In the aftermath of mass incarceration across the nation, it is crucial that policy makers and criminal justice practitioners devote greater attention to analyzing the different and potential ways to help increase visitation rates from both family and nonfamily visitors (Liu et al., 2016). Yet, before visitation rates can increase, policy makers and criminal

justice practitioners also need to understand and address the myriad of barriers to visitation that family members must face when attempting to make a visit.

Barriers to Visitation

Staying connected to a prisoner is a time, resource, and labor-intensive process (Christian, 2005). While connections can vary between individuals “doing time on the outside” and their incarcerated loved ones “doing time on the inside” (Braman, 2004), when family members do visit, they face significant barriers they must confront and manage. In addition to the collateral consequences of incarceration, another strain is the visit itself (Schwartz & Weintraub, 1974). Barriers associated with visitation may further undermine any therapeutic value of visiting for family members and could potentially worsen loss-related trauma, potentially leading to limited or lack of visitation (Arditti, 2005).

Thus, it is important to examine barriers to visitation more closely as some have suggested that a lack of visitation should also be viewed as a collateral consequence (Cochran et al., 2014). When considering some of the potential drawbacks for family members attempting to maintain their relationship with their incarcerated loved one, previous research has highlighted five major challenges to visitation: distance, cost, time, administrative rules and regulations (institutional barriers), and emotional barriers (Arditti, 2003; Braman & Wood, 2003; Christian, 2005; Fishman, 1990; Fuller, 1993).

Distance

Family members desiring to visit their incarcerated loved one must first overcome the barrier of geographic distance due to their remote location (Bedard & Helland, 2004; Casey-Acevedo & Bakken, 2002; Christian, 2005; Christian et al., 2006; Fuller, 1993; Hairston, 1991; Homer, 1979; Jackson, Templer, Reimer, & LeBaron, 1997; Nagel, 1973; Sack et al., 1976;

Tewksbury & DeMichele, 2005). An unintended consequence of building prisons in remote areas is that these isolated locations often make it difficult for family members to visit (Christian, 2005). For instance, people from large urban centers are routinely imprisoned in rural state prisons hundreds of miles away; federal inmates can be held at any federal prison within in the U.S.; and the District of Columbia, which has no prisons of its own, houses its inmates within federal prisons in other states. Thus, families are accustomed to traveling to see their loved ones (Hager & Kaneya, 2016). This is also particularly the case for incarcerated women, as in many states there are often only one or two prisons (Bedard & Helland, 2004).

Evidence examining distance to correctional facilities has previously found the closer the proximity of visitors' residence relative to the location of the prison, the higher number of visits completed (Bedard & Helland, 2004; Jackson, et al., 1997; Prison Policy Initiative, 2015). In other words, family members are more likely to visit their incarcerated loved ones, and more often, when correctional facilities are located closer to their home. Earlier studies of prison location have indicated, however, that modern correctional facilities (those built after 1967) were an average 172 miles from the state's largest city (Homer, 1979; Nagel, 1973). Today, this distance has not decreased. A majority of those incarcerated in state prisons (63%) continue to be located over 100 miles from their families (Prison Policy Initiative, 2015). In addition, Prison Policy Initiative (2015) reported among prisoners locked up less than 50 miles away from family members, only half received a visit within a month. Similar to Bedard and Helland (2004), as well as Jackson and colleagues (1997), the report also concluded the percentage of prisoners receiving visits dropped as the distance from home increases (Prison Policy Initiative, 2015). More recently, Clark and Duwe (2017) estimated the average distance traveled by family members for visitation was 130 miles. Because the distance between family members and

prisoners has been increasing, it may come as no surprise that distance makes visiting a costly and time-consuming process. Previous research suggests that the farther the distance between the prison and the visitor can inhibit visitation due to the increased costs for gasoline, food, and hotels (Pleggenkuhle, et al., 2017; see also Clark & Duwe, 2017; Cochran, Mears, Bales & Stewart, 2016; Tasca, 2015).

Cost

There are significant costs associated with visiting an inmate in prison (Braman, 2004; Christian, 2005; Christian et al., 2006; Grinstead, Faigeles, Bancroft & Zack, 2001; Hager & Kaneya, 2016; Homer, 1979; LeBlanc, 2003; Tewksbury & DeMichele, 2005). For instance, LeBlanc (2003) reported the cost of a bus ticket from New York City to the upstate prison facility for one Bronx family cost the mother \$60 round trip, with another \$20 added for the cost of food from the vending machine in the visiting room. More importantly, LeBlanc (2003) noted that making one single prison visit used a considerable amount of the family's monthly budget. Confirming LeBlanc's (2003) calculations, Christian (2005) also estimated the minimum cost of a single visit from New York City to prison to be \$80. This estimate could easily be twice this amount, however, as it does not include lost wages from having a family member incarcerated and other miscellaneous costs associated with maintaining social bonds (Christian, 2005). Other costs included transportation-related factors (gas, bus/train fare, carpooling) (Christian, 2005); the cost of maintaining social bonds through telephone calls, email correspondence, and receiving material goods such as money for commissary and care packagers (Braman, 2004; Christian, 2005; Christian et al., 2006; Fishman, 1990; Grinstead et al., 2001); the miscellaneous costs related to travel, such as overnight lodging, and the financial loss of taking time off of work or the need to obtain childcare (Fuller, 1993; Jackson et al., 1997; Tewksbury & DeMichele,

2005).

Christian and colleagues (2006) concluded that it would not be “unrealistic ... [for family members] to spend anywhere from \$200 to \$600 a month” to visit their loved ones in prison (pg. 449). Due to costs associated with prison visitation, families may go through visiting cycles that are partly determined by the strain put on the family’s economic and emotional resources (Arditti, 2003; Braman, 2004; Christian, 2005; Christian et al., 2006). Grinstead and colleagues (2001) reported similar findings with some respondents spending upwards of \$200 on a single visit. Based on their survey results, they concluded that respondents spent an average of \$85 a month on phone calls, \$27 on mailed packages, and \$18 on other visitation options such as picnics or overnight visits with family (Grinstead et al., 2001). The average cost of for a face-to-face visit in the visiting room came to be \$168 a month. It is important to note that these costs did not factor in the cost of visitors taking time off from work when needed (Grinstead et al., 2001). In addition to these monetary costs, the journey to visit is a tiring and time-consuming process.

Time

Beyond the distance and cost of the visit, another barrier to visiting an inmate is the amount of time required to complete a visit (Christian, 2005). This includes the travel to the prison (and back home); the time spent being processed by prison staff and waiting for the visit to start; and the time lost due to potential mismanagement or denial by prison staff (Arditti, 2003; Christian, 2005; Christian et al., 2006; Comfort, 2003; Fuller, 1993). With most prisons located in remote areas, and usually over 100 miles away from home, visitors thus spend more time traveling to the facility than time spent visiting with their incarcerated loved one (Gordon & McDonnell, 1999).

Notably, Christian (2005) developed a timeline utilizing ethnographic observation of family members traveling by bus to two prisons in upstate New York. Beginning at approximately 9:00pm on a Friday night and ending 24 hours later at 9:00pm on Saturday evening, Christian (2005) detailed just how much time was spent to complete a single visit. Outside of time spent traveling, she also observed how much time family members devoted to their incarcerated loved ones. As they engaged in this process, “other aspects of their lives, such as spending time with and supervising children, or involvement with community or neighborhood organizations necessarily suffer” (Christian, 2005, pg. 37).

Institutional Barriers

Among the primary barriers to an effective and smoothly operating program of inmate visitation are the expectations, experiences, and perceptions of visitors (Fishman, 1990; Fuller, 1993; Jackson et al., 1997; Peelo, Stewart, Stewart, & Prior, 1991; Schafer, 1989; Schwartz & Weintraub, 1974). Family members of prisoners are not only influenced by the actual process of talking with and seeing their incarcerated loved one, but also via their interactions with corrections staff and their experience relative to the environmental conditions and policies connected to a correctional setting (Arditti, 2003). “By nature, prisons are heavily regulated institutions characterized by a somewhat unwelcoming atmosphere” (Pleggenkuhle et al., 2017, pg. 4). Thus, it is inevitable that visitors can face institutional barriers, as the visitation process includes efforts by the prison to maintain institutional safety at all times (Pleggenkuhle et al., 2017). Due to safety and security being of the utmost concern, families tend to face difficulties from administrative rules and regulations, as they are entirely dependent upon the prison staff to help facilitate their visit. For instance, Duwe and Clark (2013) concluded that few prison visitation programs are designed to encourage visits. Relatedly, Hairston (1991) found that

visitation hours are limited and can be changed or revoked by prison staff at any moment. Visitors are also required to adhere to strict dress codes, pass through metal detectors, and continually conform to institutional rules and regulations of conduct that can be intimidating and vague (Pleggenkuhle et al., 2017; see also Arditti, 2003; Braman, 2004; Christian 2005; Comfort, 2003; Duwe & Clark, 2013; Fishman, 1990). Should visitors fail to adhere to institutional rules and regulations, they may be denied entrance (Pleggenkuhle et al., 2017). However, these rules, especially pertaining to visitation, can vary over time, vary by institution, and these changes may not always be communicated to visitors on a regular basis (Arditti, 2003; Comfort, 2003; Duwe & Clark, 2013; Pleggenkuhle et al., 2017).

The way that prison staff communicates to visitors is also a cause for concern. Earlier studies of visitation have documented the rude treatment of visitors by prison staff also being a concern (Arditti, 2003; Comfort, 2003). Applying Sykes's (1958) notion of the "pains of imprisonment" (pg. 63-83), Comfort (2003) demonstrated how family members of prisoners tend to experience the phenomena of *secondary prisonization*. Comfort makes the argument that family members, particularly *female* family members, "experience restricted rights, diminished resources, social marginalization, and other consequences of penal confinement, even though they are legally innocent and reside outside of the prison's boundaries," thus making them "quasi-inmates" (Comfort, 2003, pg. 79, 103). Recognizing the stigma and shame already felt by family members of prisoners, combined with a get-tough mindset that warily views visitation more as an offender privilege than right, Comfort (2003, 2008) demonstrated how their treatment from visitation arrival to departure, was analogous to the prisonization their incarcerated partners experience. Based on her findings, examples of secondary prisonization include strict dress code enforcement, the lack of basic information pertaining to visitation hours and procedures being

shared or regularly updated, neglect and indignity from correctional staff, as well as feelings of stigma and humiliation. How visitors internalize these institutional barriers, along with experiences of secondary prisonization can certainly influence their overall perception and feelings towards visitation thus, possibly creating emotional barriers. In turn, these emotional barriers may prevent family members in continuing their visits or result in them visiting less frequently due to the stress and trauma involved.

Emotional Barriers

Previous scholarship has recognized that incarceration can be a stressful and disruptive experience for all family members (Hairston & Lockett, 1987), which often forces them into a state of crisis (Sack et al., 1976; Schwartz & Weintraub, 1974). There are times when visitation experiences are not always perceived in a positive light and can thus be linked to increased levels of strain for both the inmate and the visitor (Arditti, 2003; Christian, 2005; Fishman, 1990, Pleggenkuhle et al., 2017). Furthermore, others have discussed varying levels of emotional hardship related to visitation through family members' personal descriptions of anxiety, worry, and mental exhaustion (Pleggenkuhle et al., 2017; see Christian, 2005; Comfort, 2003). Thus, it is crucial to highlight some of the emotional barriers that can affect visitation.

In her detailed account of prisoners and their families, Morris (1965) found nearly 67% of her sample of prisoner's wives divulged feelings of shame around the imprisonment of their spouse. Noticeably, these feelings of shame were not always apparent, and when they were present, they quickly disappeared. This led Morris (1965) to conclude that wives often feared gossip rather than experience actual hostility and were threatened more by feeling ashamed over what people would say. Others have confirmed similar findings and report women recalled community reaction to their spouse's offense as those of disgust, curiosity, pity, and fear (Daniel

& Barrett, 1981; Koenig & Geriepy, 1985). Schneller (1975) reported similar findings but argued that the extent to which prisoner's wives report feelings of shame and stigmatization largely depended on the communities in which they resided. Feelings of shame were primarily felt after the initial separation from their husband due to their imprisonment, but these feelings eventually subsided over time. Notably, it was their children that more often than not experienced feelings of shame over having an incarcerated parent (Morris, 1965). Fishman (1990) also reported similar findings. However, her sample of prisoner's wives revealed an additional dimension to feelings of shame and stigmatization. Their accounts provided a detailed picture of how feelings of shame and humiliation surrounding incarceration of their spouse tended to be the result of the stigmatization experienced within the prison system rather than from reactions from their community or social networks (Fishman, 1990), which is reminiscent of secondary prisonization as conceptualized by Comfort (2003).

Utilizing an ecologically grounded loss framework, Arditti (2003) continued examinations of parents and children visiting an incarcerated family member. Interviewing parent/caregivers at a local jail, visitation experiences were reported to be difficult at this particular facility, and specifically how the lack of physical contact with their incarcerated loved one affected children during "no contact" visits (Arditti, 2003). Consistent with prior literature recognizing barriers to visitation related to the distance of the facility, other issues emerged such as the harsh, disrespectful treatment by jail staff (Arditti, 2003). However, it was also discovered that the experience of visitation posed additional harm. The emotional energy that is "activated" during visitation could be positive or painful depending on the level of uncertainty surrounding the loved one's incarceration (Arditti, 2003). The same could be argued for the emotional energy before a visit begins, or after it is completed. Comments from parents and child caregivers

revealed that many found visiting to be emotionally painful and worried how the experience would affect their children (Arditti, 2003). These findings support the notion that families may go through cycles of visitation that are partially determined by the strain that visiting can put on the family's economic and emotional resources (Christian et al., 2006).

Emotional barriers are complex and can occur before, during, or after visitation is complete. Recognizing that emotional strain can be introduced during any time in the visitation process, others have pointed out that the end of a visit can introduce stress as “re-separation can be a reminder of the loss and estrangement caused by incarceration” (Pleggenkuhle et al., 2017, pg. 4; see also Christian et al., 2006; Fishman, 1990). However, these accounts have primarily been documented from the perspective of the visitor. In their recent article, Pleggenkuhle and colleagues (2017) raised the importance addressing emotional barriers from the perspective of the prisoner and introduced the role of identity, social capital, and agency in the visitation process. As inmates can also endure emotional strain, recent evidence demonstrates that they often make willful decisions when negotiating prison visits. These decisions tend to be guided by the inmate's sense of self and their perception of social and economic strain placed on their families, resulting in the frequent request that family members *do not* visit them (Pleggenkuhle et al., 2017). While their sample focused on a group of incarcerated men, similar results have been discovered among incarcerated mothers who report the difficulty in saying goodbye to their children once it is time for them to leave the prison and thus find it easier to ask that they stay away until their sentence is complete (Casey-Acevedo & Bakken, 2002).

Addressing Barriers to Visitation Through Support Groups

As this dissertation is concerned with how family members address barriers to visitation, it is important to examine how support groups and/or support group membership can aid in

challenging these barriers. While the role of self-help or support groups for family members of prisoners has been recognized across the UK (Codd, 1998, 2008; Condry, 2007; Light, 1993; Sharratt et al., 2014), examinations towards the benefits of membership to these groups remains scant, especially in the United States. It is important to introduce the concept of support groups and detail how family members of prisoners can address barriers to visitation through their membership. Notably, Christian (2005) observed how family members riding the bus together were able to form a makeshift support group during their trips to upstate New York prisons by providing emotional and moral support to one another by bonding over their shared experience with the visitation process. Thus, it is crucial to examine the benefits of support groups, particularly those created and operated by family members of prisoners themselves.

Benefits of Support Group Membership

Peer support groups can be typically found in the community for stressful life difficulties ranging from serious health conditions, such as cancer or diabetes, to major life transitions, such as the death of a loved one, divorce, and new parenthood (Hegelson & Gottlieb, 2000). Depending on the need, support groups function on the similarity among participants' stressful experiences to foster the process of mutual aid (Hegelson & Gottlieb, 2000). In short, Hegelson and Gottlieb (2000) recognized how support group serves as a temporary, personal community that supplements or compensates for deficiencies in the participants' natural networks. They also recognized that members of one's own social network may not offer the appropriate support because they lack the experience with the stressful life event, are immersed in their own distress because of the stressor, or are uncomfortable dealing with the stressor themselves (Hegelson & Gottlieb, 2000).

The primary rationale behind why support groups are viewed as helpful is that peers, or people facing a similar stressor, are able to understand one another's situation in a way that their own social network members may not (Hegelson & Gottlieb, 2000). Because peers in a similar situation face similar challenges, it is thus assumed that they will understand each other's situation (Hegelson & Gottlieb, 2000). Sharing experiences with other people facing a similar stressors is expected to lead to validation of the situation, normalization of the experience, a reduction in social and emotional isolation, and a sense of belonging (Hegelson & Gottlieb, 2000). Previous scholarship has highlighted the various benefits support group membership has had on female cancer survivors (Hatano, Mitsuki, Hosokawa & Fukui, 2017; Nápoles-Springer, Ortíz, O'Brien, Díaz-Méndez & Pérez-Stable, 2007) and their respective spouses (Levy, 2011); women experiencing gender-based violence (Morales-Campos, Casillas & McCurdy, 2008); and to help address gender-based pathways to problem drinking (Cunningham, 2012).

For example, Nápoles-Springer and colleagues (2007) conducted a cross-sectional telephone survey to examine the association of predisposing, enabling, and need factors with the use of cancer support groups among 330 Latina breast cancer survivors. Curious as to why few Latina women utilized support groups despite possibly being at a higher risk for psychosocial morbidity when compared to white women, they discovered that families played an important role in promoting the use of support groups. Women receiving a significant amount of encouragement from family members were seven times more likely to have ever attended a meeting. Otherwise, 68% of the sample had never utilized a support group. Major reasons for never using a support group including receiving enough support from other sources (20%), not needing one (18%), and being unaware of groups available in their local area (17%).

Similar results were found by Hatano and colleagues (2017) when they examined Japanese cancer survivors' awareness of and participation in support groups. Survey responses received from 275 cancer patients demonstrated that about half were unaware of support groups. Furthermore, even among patients who were aware of these support groups, many did not attend a support group. On the other hand, support groups for spouses of cancer patients have been critical in helping them emotionally cope, deal with the anxiety and stress of the situation, address their personal and familial distress, and discovering their needs for additional mental health assistance (Levy, 2011).

Benefits of support group membership have also been documented among immigrant Hispanic women exposed to gender-based violence and/or abuse (Morales-Campos et al., 2008). Utilizing participant observation, in-depth interviews, and document analysis, Morales-Campos and colleagues (2008) discovered that women enjoyed the group and all it had to offer. For instance, women benefited from the support group by listening to other women's problems, being able to talk about their own problems, and receiving assistance from other members and the counselor involved (Morales-Campos et al., 2008). During support group meetings, members were taught how to manage situations and emotions; learned how to become less dependent on the abuser; were given the opportunity to help each other by providing input; and listening to the advice they provided one another helped some women find solutions to their problems and reinforce their confidence (Morales-Campos et al., 2008). Finally, a qualitative study examining gender-based pathways to problem drinking in Dublin, Ireland discovered how support groups helped "find community" in their recovery experience. Participants discussed how being a member of Alcoholics Anonymous (AA) and Women for Sobriety (WFS) helped them establish new social networks and learn alternative ways to cope with negative emotions (Cunningham,

2012).

Incarceration is an extremely stressful situation; not just for the offenders but also for the family and friends involved. What support groups are available to them? While the United States has yet to address this issue in prison visitation literature, scholars across the UK have provided a useful understanding towards the benefits of support group membership and how family members of prisoners are able to address their emotional and informational needs (Condry, 2007; Sharratt et al., 2014). These studies also provide a strong foundation in understanding how family members of prisoners are able to address barriers to visitation together.

Support Groups for Prisoners' Families

Focusing on improving support for families, Light (1989, 1993) pointed to a national conference held in Bristol in 1988 that supplied three recommendations towards improving this support: 1) the Prison Department must provide better facilities for visitation; 2) that a network of properly funded support groups be established across the country; and 3) there is need for a national coordinating agency for these support groups. While most of these recommendations were put into practice through the implementation of policy, it was reported that not nearly enough support groups were created to perform a vital role. One step in the right direction was the creation of the Federation of Prisoners' Families Support Groups in 1990 to serve families of prisoners across the UK, which "has achieved much with little funding and voluntary effort" (Light, 1993, p. 327). It was not long after that the Offenders' Families Helpline was created, which is currently still operating across the UK (Sharratt et al., 2014).

Acknowledging there has been a strong focus on support groups (identified here as "self-help organisations") for children of incarcerated parents, Condry (2007) has been one of the few to consider support groups for family members of prisoners and the benefits of membership.

Interviewing mothers, sisters, wives, a daughter, a grandmother, an aunt, and a father, these individuals were recruited through a self-help organization for the families of serious offenders called “Aftermath” (Condry, 2007, pg. 156). This group was created when its original founder became aware of the need to support relatives of serious offenders through their volunteer work supporting victims of crime (Condry, 2007). One participant described members of this group as “There’s people [in Aftermath] in the same boat. They know exactly what’s hitting your heart, what you’re thinking, what you’re feeling, how you feel and it’s just amazing to have somebody there that knows exactly” (Condry, 2007, pg. 154).

While this group no longer active, Condry (2007) concluded that during its tenure, interviews with members often reflected progress and a sense of moving forward from an initial point of devastation, with much of that progress driven by family members of prisoners themselves. These individuals reported that they took pride in the strength of their prisoner-family relationship and the level of family bonds that were maintained (Condry, 2007). This work raises important questions such as who joins support groups, how family members come to understand their incarcerated loved one’s predicament, and how it is shaped by the lens provided through these groups (Condry, 2007). While this support group did not seem to focus on issues surrounding visitation, this work at least provides a strong foundation for examining support groups of family members in the U.S. and how membership may help in addressing barriers to the visitation process.

Addressing Barriers to Visitation Through Policy

Despite the dramatic increase in their numbers, prisoner’s families largely remain “forgotten victims” (Codd, 1998; Light, 1993; Light & Campbell, 2007; Matthews, 1983). Furthermore, as stated previously, the ability of a family member to acquire the appropriate

information and support necessary to overcome barriers to visitation, both practical and emotional, can determine feelings towards subsequent visits (Fishman & Alissi, 1997). It is imperative to address their specific needs through policy and correctional practices that recognize the importance of visitation and perhaps attempt to mitigate some of these difficulties. However, as existing literature on prisoners' families has demonstrated, they tend to be socially excluded (Codd, 1998) through presumed guilt by association (Roberts, 1994) and viewed as undeserving victims that are not worthy of sympathy or assistance (Matthews, 1983). Thus, before institutional barriers to visitation can be addressed, it is crucial to unpack why prisoners' families have been pushed to the margins and ignored for so long.

Family Members as “Forgotten Victims”

While not usually thought of when it comes to victims of crime or victimization, some have argued that family members of prisoners be included in this category. For instance, Light (1993) clearly stated this when he extended his definition of victims to prisoners' families: “The victims of crime include not only those who have had offences committed against them, but also the families and dependents of those convicted of offences, particularly if the offender is sentenced ... to prison” (pg. 324-325). Expanding upon the work of Morris' (1965) work on prisoners' families in Britain, Matthews (1983) examined communication options such as the operation of visits, home leave, and correspondence. Notably, Matthews (1983) surveyed program and support services available to families through either Probation Service or voluntary sector. Discovering a severe lack of support and inclusion, this led Matthews (1983) to coin the term “forgotten victims,” to describe family members of prisoners (Light, 1993). Sadly, prisoners' families are easy to forget due to the general public maintaining a deserving/undeserving view of victims (Matthews, 1989). In other words, while victims of

violent or personal crime have experienced improvements in support system available, prisoners' families have not, as they are typically implicated through "guilt by association" (Roberts, 1994) and thus considered underserving of support (Light, 1993; Matthews, 1989).

The argument of deserving/underserving victims becomes complex when discussing prisoners' children. Expanding on Matthews' (1983) findings, Shaw (1987) demonstrated the lack of support and inclusion extending toward children with imprisoned fathers in the UK. In addition to providing previously unavailable data, Shaw (1987) supplied a convincing argument that the criminal justice system shift their mindset towards family members of prisoners from one that is offender-oriented to one that is victim-oriented. They also challenged the "undeserving victim" label as being inapplicable to children (Light, 1993). Thus, visitation arrangements must be made available not in the interest of the offender, but in the interest of the child (Light, 1993; see also Shaw, 1987). More importantly, Shaw (1987) also suggested policies to help facilitate these arrangements and believed a realistic political agenda needed to be designed to address the suffering endured by prisoners' families (Light, 1993).

Regardless if family members of prisoners are perceived to be "forgotten victims" or not, they continue to experience feelings of shame and stigma from others, as well as rude treatment by prison staff due to reasons listed above. In short, prisoners' families continue to be subjected to a climate of exclusion. Continuing to examine the role of Probation Service in the UK, Worrall and Hoy (2013) argued that their response toward offenders and their families has changed from one whose aim is to "advise, assist, and befriend" to one whose goal is to "confront, control, and monitor." While prisoners' families should be met with the first response and see how they can assist in the reentry process, both correctional departments and community supervision tend to view them as potentially criminogenic due to their relations. Similar to

treatment received during visitation, family members of prisoners are also pushed to the margins of probation practice (Worrall & Hoy, 2013), which has caused them to create their own support groups as a response to this exclusion (Codd, 1998). Recognizing that “the experience of having coped with offending and imprisonment is always there,” Codd (1998) suggests that if families are to cope with imprisonment, then support groups need to be promoted by correctional departments and criminal justice agencies and not simply left to chance (p. 151). In addition to beginning to recognize prisoners’ families as victims, it is also important that confrontational and controlling behavior associated with secondary prisonization (Comfort, 2003) and family-hostile practices associated with visitation also be addressed as issues related to prisoners’ families will not go away (Light, 1993).

Secondary Prisonization and Family-Hostile Prison Practices

As families of prisoners tend to be economically disadvantaged and live in urban cities distantly located from their incarcerated loved ones, it has been suggested that many of their adjustment difficulties directly stem from these contextual factors (Carlson & Cervera, 1991b). Thus, some argue that it is correctional systems and local communities who bear responsibility for addressing the resultant needs of the family, as families cannot meaningfully be given the responsibility for increasing the effectiveness of the criminal justice system (Baker et al., 1974; Carlson & Cervera, 1991b; Casey-Acevedo & Bakken, 2002; Codd, 1998; Light & Campbell, 2007; Liu et al., 2016). Some have even argued that family-hostile prison practices have largely contributed to the practical problems, as well as physical and psychological difficulties related to visitation (Arditti, 2005; Comfort, 2003; Hairston, 1998).

Recalling Comfort’s (2003) conceptualization of secondary prisonization and the overall rude treatment of visitors by correctional staff, results from a study examining family visitation

at a local jail demonstrated the prohibiting and restrictive conditions of the setting (Arditti, 2005). On an average visit, children and their caregivers waited for 30 to 60 minutes before being called to have their turn for a 20-minute, noncontact visit with their incarcerated loved one who was separated by a Plexiglass wall (Arditti, 2005). During the wait in the visiting area, children were bored, restless, and had little to do except hang on to their mothers or lie down on the floor due to the lack of toys, books, or anything remotely child-friendly (Arditti, 2005). It is likely that a majority of visiting areas in jails can be described as developmentally inhibiting because of their restrictiveness and environmental conditions (Arditti, 2005). The same can be argued for visiting rooms in state or federal correctional facilities (Fuller, 1993; Jorgensen et al., 1986) as well as prisons located in the UK, (Codd, 2008; Light & Campbell, 2007). Based on these results, it can likely be assumed that similar family-hostile practices would occur at state prisons as the nature of visitation at correctional facilities as a whole can be physically and psychologically demanding for both children and adults. Unfortunately, correctional departments have typically failed at recognizing these difficulties, just as they have failed to recognize family members of prisoners as victims.

Relatedly, these family-hostile prison practices have also largely contributed to the complexity of parental incarceration and the challenges associated with reentering the community. Nurse (2002) recognized these policies as part of the “deep break” in where incarcerated parents are purposively isolated from their family and community as a punishment strategy. “Deep break” policies are not just for parent-child relationships; they have proven to also be effective punishment strategies towards a variety of prisoner-family relationships as they ultimately aim to separate. This has transformed prisons from a focus on reentry preparation to containment that reinforces and enhances the likelihood of disenfranchisement (Arditti, 2005).

Examples of “deep break” policies have previously been discussed in the Supreme Court upholding the findings of *Overton v. Bazzetta* (2003), which essentially views visitation as a privilege and can be revoked by prison administration as a form of punishment. Another example lies in the current Michigan Department of Corrections policy directive detailing Prisoner Discipline (Michigan Department of Corrections, 2019b) whereas visiting has been listed as a loss of privileges sanction since 1995 (Thompson, 2019).

It is therefore essential that family members of prisoners be included in current prison debates, and especially ones concerning visitation policy (Light & Campbell, 2007; Liu et al., 2016; Tasca et al., 2016). More importantly, although family members of prisoners often experience similar stresses, it is crucial to recognize that families and partners of prisoners are not a homogenous group and may require a variety of responses (Murray, 2008). However, similar to efforts addressing the need for support groups for family members of prisoners, the need to address policy surrounding visitation has also been primarily focused across the UK (Codd, 1998, 2008; Light, 1993; Light & Campbell, 2007; Murray, 2008) and not the U.S. Thus, it is crucial that efforts be made to address barriers to visitation through policy. As the benefits to prison visitation have been presented and discussed in this literature review, there seems to be a disconnect in implementing policies that are helpful – or at least very least encourage visitation – and to rethink policies that may be harmful or further restrict visitation. This only creates additional barriers and yet another challenge that family members of prisoners must face when trying to maintain the prisoner-family relationship.

CHAPTER 3: RESEARCH METHODOLOGY

The project used a qualitative research design. Data collection occurred in two phases. Phase I (January 2015 – November 2017) focused on pre-dissertation data collection and exploration of the topic through participant observation of the support group, Citizens for Prison Reform (CPR). Preliminary results confirmed concepts and themes previously recognized in the literature and aided in creating additional research questions surrounding barriers to visitation and support group membership among prisoner's families. Phase II of the project (November 2017 – December 2018) allowed for additional participant observation of CPR meetings, as well as related support groups and prison reform/advocacy groups. Interview responses provided by family members of prisoners involved in these groups were also gathered during this phase of the study (June 2018 – September 2018). Constructivist grounded theory (Charmaz, 2000, 2004) provided the theoretical framework in both data collection and data analysis strategies to allow for interpretation of, and explanation of, the patterns and themes identified.

Theoretical Framework

Originally defined as the discovery of theory from data, grounded theory works to provide us with relevant predictions, explanations, interpretation, and applications (Glaser & Strauss, 1967). The grounded theory research process is fluid, interactive, and open-ended. To begin, a general research topic informs initial methodological choices for data collection and grounded theory analysis may lead to adopting multiple methods of data collection in order to pursue inquiry (Charmaz, 2000, 2014). Thus, the researchers' analytic categories are directly "grounded" in the data and simultaneous involvement in data collection and analysis is part of the process.

However, with several methodological developments advancing grounded theory over the years, this dissertation specifically utilizes constructivist grounded theory (Charmaz, 2000, 2014) as this approach is better aligned with the research design and phenomena being examined. Constructivist grounded theory adopts the inductive, comparative, emergent, and open-ended approach originally developed by Glaser and Strauss (1967), but it challenges the positivistic epistemology and rigidity of the method and instead calls for a more flexible approach that also simultaneously centers the researchers involved (Charmaz, 2000, 2014). In other words, this theory recognizes that concepts and theories are *constructed* by researchers out of narratives that are in turn constructed by research participants who are trying to explain and make sense out of their experiences and/or lives, both to the researcher and themselves (Charmaz, 2000, 2014; Corbin & Strauss, 2008).

Charmaz (2000, 2014) and several others (Clarke, 2005, 2006, 2007, 2012; Conrad, 1990; Ellis, 1995; Richardson, 1993) have argued that researchers are a part of what they study, not separate from it, and thus analytic directions arise from *how* researchers interact with and interpret their comparisons and emerging analyses rather than from external recommendations or from inherent meanings in data (Charmaz, 2000, 2014). Constructivist grounded theory also criticizes the notion of the neutral observer and value-free expert (Charmaz, 2000, 2014). Charmaz (2014) continues by reiterating: “If, instead, we start with the assumption that social reality is multiple, processual, and constructed, then we must take the researcher’s position, privileges, perspective and interactions into account as an inherent part of the research reality” (pg. 13). Therefore, research acts are not given; they are constructed through our positionality (Charmaz, 2000, 2014).

Positionality of the Researcher

Because this study utilizes qualitative methods of participant observation and interviews, and from a constructivist grounded theoretical framework, it is crucial to first discuss how the positionality surrounding both my role as the researcher and my role as a support group member can introduce bias into the research design. Additionally, recognizing and addressing possible biases during the early stages of research design, and remaining aware of them throughout the research process, provides the opportunity to be reflexive. Addressing the positionality of the researcher can also aid in subsequently attending to driving shifts in data collection, data analysis, and even recognizing shifts in the relationships and rapport between myself and study participants.

As a researcher, my role is primarily concerned with effectively and accurately collecting data in a professional manner. My responsibilities lie in acting ethically and as professionally as possible, as I am also a representative of the university with which I am affiliated. Rapport and entrée could be affected through this position. However, it is important to be able to recognize and set boundaries when operating in this role. While some scholars may argue against getting too close with sample participants, I believe that my role as a support group member is beneficial to building rapport with my participants as I have been attending monthly CPR meetings since January 2015. By attending these meetings, I have made connections with other support group members and those who serve voluntarily on the CPR Board of Directors. Some of these individuals also serve on the Family Advisory Board (FAB) that meets quarterly with the Michigan Department of Corrections (MDOC).

Although my research is more exploratory, it does have an auto-ethnographic component that warrants discussion. Due to my personal experience, I have garnered a special

“insider/outsider” (Zinn, 1979) standpoint that other criminologists and scholars in the field may not have. My position as an “insider” allows me to quickly build rapport and bond with family members with an incarcerated loved through shared experience, given that my father was incarcerated twice during my lifetime. Other participants may have a similar experience, and as an insider, I might have a deeper understanding of some of the thoughts, feelings, and emotions family members with incarcerated loved ones can experience. While I do not have the personal experience of visiting my father while he was incarcerated, I distinctly remember feeling a range of emotions including shame, confusion, anger, and the embarrassment of having a parent behind bars. Due to this personal lived experience I was invited to join FAB, a voluntary position I have filled since January 2016. Taking this position with FAB has helped create closer bonds between myself and a few CPR members, and has provided me with deeper insight into issues surrounding the visitation process as well as efforts to address issues related to family connectedness within MDOC facilities.

In conjunction with being an “insider,” my position as an outsider can also be beneficial in gaining rapport. As a graduate student originally from Texas, CPR is a support group that has expressed interest in building relationships with universities and academic institutions across the state of Michigan. Support group members may view my connection to MSU as a positive attribute, but it is important to recognize what other perspectives and attachments this might have towards my research endeavors with other support groups in the area. For instance, an imbalance of power during the data collection process due to my level of education, race, age, and class background, or that of the participants, could arise while conducting this study. Thus, I was mindful and aware of this balance through the duration of the study. By simultaneously being a part of this group due to shared experience, but also removed from this special population due to

my outsider status and powerful position as the researcher (Oakley, 1998), I recognize the importance of allowing participants to inform me which barriers to visitation they experience and what various strategies they use to address them because they are the experts on this topic, not me.

As traditional scientific approaches encourage the researcher to be as distant or “neutral” as possible, they tend to remain cold and unavailable to oppressed and/or disempowered individuals or groups. When research is conducted in this conventional manner, it does not necessarily help in gathering accurate information on subjugated populations. Often stigmatized and ignored by politicians and the public, family members and friends of prisoners arguably represent a socially oppressed and stigmatized population that may be able to enact social change through increasing their knowledge and power together as a group. My positionality as a researcher and support group member, combined with my unique standpoint as a child of an incarcerated parent, brings a certain kind of situated knowledge (Haraway, 1988, 2003) to the research design and data collection process. Thus, it is crucial to address these various positions and to be reflexive as to how each of these roles, or combination of these roles, can affect my research.

Research Questions

When conducting a qualitative inquiry, it is necessary to frame research questions in a way that provides the researcher with enough flexibility and freedom to explore a topic in depth (Charmaz, 2000, 2014; Corbin & Strauss, 2008). While some concepts pertaining to the phenomenon of the prisoner-family relationship and barriers to visitation have been previously identified in the literature, it cannot be assumed that all concepts have been identified or fully developed at the time of this dissertation. Thus, dependent and independent variables cannot be

identified, conceptualized, or operationalized for measurement. Informed by pre-dissertation data collection efforts in Phase I, the following research questions were developed and drive the focus of the study: RQ1) How do family members of prisoners navigate and manage the visitation process?; RQ2) What are the advantages and disadvantages of support group membership for family members of prisoners?; RQ3) How can support group membership assist in addressing barriers to visitation?; and RQ4) How can support group membership assist in addressing visitation policy?

Research Setting

As previous scholarship has primarily focused examinations on the east and west coast regions of the United States, this dissertation provides evidence from the Midwest. It is useful to examine barriers to visitation in the state of Michigan as this research setting is unique for several reasons. First, Michigan offers the opportunity to study this issue in a more rural setting than previous studies due to the geography of the state. Rurality is a concept that has not adequately been explored and this is an area this study aims to shed light on. This setting also warrants further attention in the state of Michigan since it is geographically divided into two regions: The Lower Peninsula and the Upper Peninsula (commonly referred to by residents as “The UP.”) Furthermore, due to recent sentencing and parole reforms, combined with a state budget crisis, at least 21 correctional facilities have closed in the state of Michigan since 2002, forcing the frequent transfer and consolidation of inmates (Porter, 2012). With five correctional facilities located in the Upper Peninsula, and the strong possibility of inmates being transferred to facilities located “up north,” barriers to prison visitation may be more difficult to navigate and manage for family members residing in this state.

Another reason for this particular research setting is that the state of Michigan has a history of restricting inmates' visits. As the population of Michigan's prisons increased in the early 1990s, the number of visitors also increased; causing a strain on prison security, supervision and control (Boudin et al., 2013; Thompson, 2019). Incidences of substance abuse also increased during this time. As a response to these growing concerns, MDOC revised its prison visitation policies in 1995, placing limitations on the number and type of visitors a prisoner is eligible to receive in order to assist with decreasing the number of visitors (Boudin et al., 2013; Thompson, 2019). Typically, an inmate may be visited by a qualified member of the clergy, attorneys conducting legal business, and by persons placed on an approved visitor list, which may include an unlimited amount of immediate family members and up to ten others. Notably, what constitutes as an "immediate family member" has evolved over the years and tends to be restrictive by definition. The amended policies also allowed the state to ban any minors from visiting prisoners who were not their biological parents. In short, that meant nieces, nephews, siblings, cousins and godchildren were cut off entirely from visits (Thompson, 2019).

This revised visitation policy also sought to control the increase of substance abuse among prisoners. Visits were withheld for inmates who committed two substance-abuse violations. Only clergy and attorneys would remain eligible visitors. Prisoners could then apply for the reinstatement of visitation privileges after two years. Concerned and frustrated by this change in policy, a group of incarcerated women, along with their family members and friends, filed a lawsuit against MDOC alleging that it violated their right to "intimate association" with young family members, as well as violations to the First, Eighth, and Fourteenth Amendments (Thompson, 2019). Both the district court and the Sixth Circuit Court of Appeals ruled in the women's favor. The Michigan Department of Corrections, however, appealed the decision to the

United States Supreme Court. After changing its policy to allow young siblings to visit, all nine justices sided with prison officials noting that people can still write letters or talk on the phone (Thompson, 2019).

Over fifteen years later, the decision in *Overton v. Bazzetta* (2003) has set a precedent for how far prisons can go to restrict visits, and has since been widely cited for the proposition that “freedom of association is among the rights least compatible with incarceration” (Boudin et al., 2013, p. 131). While the Supreme Court agrees that prisoners have a right to visitation, their opinion stated that “visitation alternatives need not be ideal; they need only be available” (Thompson, 2019). Furthermore, this ruling ultimately allows wardens and correctional facility staff the authority to view visitation as a privilege and thus restrict it as a form of punishment (Monahan, Goldweber & Cauffman, 2011).

Finally, the capital city of Michigan (Lansing) is home to a grassroots organization formed and led by family members of prisoners with statewide advocacy efforts. What first began as a letter writing campaign to state legislators in 2008 quickly turned into a nonprofit organization by 2012. The mission of CPR is a grassroots, family-led initiative that engages, educates, and empowers those affected by crime and punishment to advance their constitutional, civil and human rights (Citizens for Prison Reform, 2019a). They also hold monthly support group meetings that are free, open to the public, and remain non-denominational despite meetings being held at a local church. CPR remains active today and has become a stronghold for families and friends with incarcerated loved ones.

Sample Population and Selection Criteria

As CPR had already been identified, related support groups were located in the mid-Michigan area. Selection criteria was used to screen if my attendance was welcome and if the

site would be useful for participant observation. Selection criteria for observable support groups required that: 1) The group focus on serving prisoners' families and/or have a mission related to the prisoner-family relationship; 2) Support group members must be at least 18 years old to be included for observation; and that 3) The group be free and open to the public to attend.

This project also gathered responses by conducting interviews with family members active in support groups observed or related groups. Therefore, interview participants were purposively sampled and recruited through CPR. To increase representativeness of the sample, interview participants were also recruited by soliciting additional support groups selected for participant observation. Snowball sampling techniques (Coleman, 1958-59; Goodman, 1961; Wright, Decker, Redfern, & Smith, 1992) were also utilized as interview participants subsequently shared my contact information with friends and acquaintances who had their own visitation experiences they wished to discuss. Selection criteria for interview participants required that: 1) Participants must be at least 18 years old at the time of the study; 2) Must have a partner or family member currently incarcerated within a state correctional facility, or a partner or family member that has been incarcerated within the past 12 months; 3) Must have visited their incarcerated relative within the past 12 months; and 4) Must be currently active with a support group for family members of prisoners, or have attended a meeting within the past 12 months at the time of data collection. Participants who disclosed being active in online support groups and/or private Facebook groups for family members of prisoners were included in the sample.

Data Collection

Phase I: Pre-Dissertation Data Collection (January 2015 – November 2017)

Phase I of the project developed from an ethnographic field study originally conducted for graduate coursework (SOC 985: Qualitative Field Methods). Students enrolled in this course

were required to engage in various methods utilized in qualitative design and field study. After conducting a qualitative examination of a nationwide web forum utilized by prisoners' families for a related graduate course (CJ 907: Qualitative Methods), I remained curious about barriers to visitation and, more specifically, how family members of prisoners attempt to navigate and manage the visitation process through their involvement in support groups. Conducting a cursory online search led to finding the Lansing-based support and advocacy group, Citizens for Prison Reform. I contacted the Board of Directors to inform them of my interest in joining the group, but also to ask for their permission to observe monthly meetings as part of my field study design. I received a reply from one of the Board Members (Mora) the next day, confirming my meeting attendance and allowing me to engage in participant observation.

This resulted in collecting six ($N=6$) observations (4 monthly CPR meetings, 1 Legislative Education Day, and 1 Family Participation Program presentation and meeting). After attending these public events, and getting to know CPR members through repeated conversations before and after meetings, a preliminary interview instrument was created to further the visitation process and prisoner-family relationship. A pilot interview was then conducted with one CPR member and their initial feedback was received (April 2015). Data was also obtained through field notes, memos, jottings, sketches and documents available at support group meetings and related events, and were utilized to better capture the theoretical decision-making process (Maxwell, 1996). Initial data analysis was performed using grounded theory (Corbin & Strauss, 1990; Strauss, 1987) and a list of themes was generated through the iterative process of open, axial, and selective coding in order to help generate emerging concepts and categories of interest (Creswell, 1998). As specific barriers to visitation had not yet been identified, initial data

collection during Phase I occurred inductively to allow the data to speak for itself (January 2015 – September 2015).

While the selection and sampling of this support group was purposive due to the limited research setting and timeline of study available (a single academic semester), CPR proved to be a useful site to explore how family members of prisoners utilize support groups to help them navigate and manage the visitation process; to better understand and challenge the barriers they may encounter along the way; as well as to learn strategies to help complete a visit and maintain the prisoner-family relationship. For example, during monthly meetings CPR members voiced specific barriers to visitation they have experienced such as how many hours or miles they have to drive to complete a visit (*distance*); the amount of money they spend during each visit and the various *costs* that incur to maintain communication with their incarcerated loved one; the myriad of reasons for why they were denied a visit upon their arrival to the correctional facility (*institutional barriers*); and ill treatment received from prison officials and staff (*secondary prisonization*). Other concepts and themes generated during observation of CPR meetings and related events included finding and sharing information, providing emotional support to other members, and learning how to become an advocate for your incarcerated loved one, some of which have previously been recognized in the literature (for instance, see Christian (2005) for discussions surrounding *moral support* and *watching the system*).

Relatedly, analyzing this preliminary dataset provided initial experience in designing a qualitative study and what methods may prove to be most useful and appropriate for data collection. Recognizing the potential for a dissertation topic, I continued to attend and observe monthly CPR meetings over the summer (June, July, and September 2015) to remain active in the group, gain further rapport with members, tweak the interview instrument, and to help

identify and develop future research questions¹. However, as concepts and themes had now been confirmed within visitation literature, the remainder of data collection for Phase I occurred deductively with the anticipation of what prisoners' families commonly experience as barriers (October 2015 – December 2018).

As participant observation involves the collection of data from human subjects, IRB approval was obtained by the Human Research Protection Program (HRPP) at Michigan State University (MSU) in October 2015 to officially (and ethically) observe CPR monthly meetings and related events. It was also during this time that I began to voluntarily serve on the board for two groups related to CPR. In January 2016, I joined the Family Advisory Board (FAB), which meets quarterly with the Michigan Department of Corrections (MDOC). The quarterly FAB meetings that occurred during Phase I (January 2016 – September 2017) were included as cases of observation through my field notes and approved meeting minutes supplied by board members.

I also joined the Michigan chapter of Citizens United for the Rehabilitation of Errants (MI-CURE) in October 2017. Members of this group work to educate and inspire individuals to advocate for themselves and for improvements in the Michigan criminal justice system. This is done through the publication of a quarterly newsletter, self-help literature, and hosting an annual membership meeting. The bimonthly meeting that occurred during Phase I (November 2017) was also included as an observation case again utilizing my field notes and approved meeting minutes supplied by board members. Additional FAB and MI-CURE meetings were observed during Phase II of data collection.

¹ Permission was granted by the Guidance Committee in May 2015 to engage in pre-dissertation data collection to aid in the development of a dissertation proposal.

Thus, a total of twenty-one ($N=21$) participant observations were conducted during the pre-dissertation data collection period (October 2015 – November 2017) that are recognized and protected by IRB. While observations conducted for graduate coursework lend to the longitudinal timeline of field study, the original six cases gathered during early 2015, as well as the meetings attended over the summer months, were not included in the dissertation dataset as IRB protection cannot be retroactively applied.

Phase II: Additional Participant Observation and Interviews (November 2017 – December 2018)

Pre-dissertation data collection, however, provided only a mere snapshot of how family members of prisoners navigate and manage the visitation process. More data – and more data sources – needed to be identified and collected. During Phase I, crossover between support groups was observed and I noticed that several CPR members were involved in two or more groups. For example, a handful also volunteer as FAB board members (Pete, Alicia, Mora, and Lois) while others are involved with MI-CURE (Dennis and Shirley). A few CPR members are also involved in support group for special prison population groups and their family members (Meredith, Kathie and John). Along with continued participant observation, interviews needed to be conducted with prisoners' families to gain further insight and help corroborate data gathered during Phase I².

Data Collection Procedures

Participant observation of monthly CPR meetings and related events continued from

² A dissertation proposal outlining these data collection procedures and amendments to the research design was written, defended, and accepted by the Guidance Committee (November 2017) allowing additional participant observation and interviews to take place during Phase II of the project.

November 2017 through December 2018, as well as observations from MI-CURE bimonthly meetings and FAB quarterly meetings. A new support group also was selected and recruited for observation during this time (Prison Fellowship). I first gained permission to observe CPR meetings during Phase I after contacting the Board of Directors and informing them about my study. As this group is free and open to the public, there was no objection. I also assured the Board of Directors that no names or identifying information of the members would be recorded. As an additional line of assurance, a Research Participant Information and Waiver of Documentation form was supplied and signed for each case of observation. In short, I would make myself known to the support group at the start of each meeting, inform them of the study, and again state that no identifiable information other than first names will be recorded. The same procedure was used to gain entrée with related support groups (FAB, MI-CURE, and Prison Fellowship). However, as I also volunteer with FAB and MI-CURE, permission to observe and write field notes in the form of meeting minutes was granted with attendance. Any support group member who did not wish to be observed was not included in any of the field notes, memos, sketches or other materials gathered during data collection³.

Table 1 presents a detailed timeline of participant observation and the total number of cases collected during Phase I and Phase II of the project ($N=36$). Although related support groups were recognized in addition to CPR, nearly two-thirds (63.8%) of participant observation data came from CPR monthly meetings and related events. A total of twenty-three observations

³ No meeting attendants declined to be observed during the data collection phase. Notably, other students and academic faculty collected data from the group during the period observed (January 2015 – December 2018). For instance, a faculty member associated with a large public research university, along with her undergraduate students, conducted video interviews asking CPR members to share their personal stories related to having an incarcerated loved one. Undergraduate students at this same university also helped conduct policy research for the group, while another student at a different university located in the state recruited members to be a part of her undergraduate photo essay. Those who participated did so voluntarily and expressed how they felt it was important to share their story and lived experience.

Table 1: Timeline of Participant Observation (2015 – 2018) and Total Number of Cases ($N=36$)

		Name of Support Group	Event Type	Date of Observation	
Phase I: Pre-Dissertation (N=21)	2015	CPR	Monthly meeting	12/12/2015	
	2016	FAB	Quarterly meeting	1/15/2016	
		CPR	Monthly meeting	2/20/2016	
		CPR	5 th annual Legislative Education Day	4/28/2016	
		FAB	Quarterly meeting	4/29/2016	
		FAB	Quarterly meeting	8/26/2016	
		CPR	Annual meeting	10/15/2016	
		CPR	Monthly meeting	11/19/2016	
		CPR	Monthly meeting	12/10/2016	
		2017	CPR	Monthly meeting	1/21/2017
			FAB	Quarterly meeting	1/27/2017
			CPR	Monthly meeting	2/18/2017
			CPR	Monthly meeting	3/18/2017
	CPR		Monthly meeting	4/22/2017	
	CPR		6 th annual Legislative Education Day	5/11/2017	
	FAB		Quarterly meeting	5/19/2017	
	CPR		Monthly meeting	7/15/2017	
	FAB		Quarterly meeting	9/15/2017	
	CPR		Monthly meeting	9/16/2017	
	CPR		Annual meeting	10/21/2017	
	MI-CURE		Bi-monthly meeting	11/2/2017	
	Phase II: Dissertation (N=15)	2018	CPR	Monthly meeting	1/20/2018
			MI-CURE	Bimonthly meeting	3/1/2018
			FAB	Quarterly meeting	3/02/2018
CPR			Monthly meeting	3/17/2018	
CPR			7 th annual Legislative Day	4/11/2018	
CPR			Monthly meeting	5/19/2018	
FAB			Quarterly meeting	6/15/2018	
CPR			Monthly meeting	6/16/2018	
MI-CURE			Bimonthly meeting	7/5/2018	
Prison Fellowship			Bimonthly meeting	7/20/2018	
CPR			Monthly meeting	7/21/2018	
CPR			Monthly meeting	9/15/2018	
CPR			Annual meeting	10/20/2018	
MI-CURE			Bimonthly meeting	11/1/2018	
CPR			Monthly meeting	12/15/2018	

($N=23$) were recorded related to CPR: Seventeen (17) monthly meetings; three (3) annual Legislative Education Day sessions (2016 – 2018); and three (3) Annual Meeting events (2016 – 2018). Participant observation data for the remaining third (36.1%) was provided by related support groups and prison reform/advocacy groups for additional thirteen observations ($N=13$): Eight (8) quarterly FAB meetings (2016 – 2018); four (4) bimonthly MI-CURE meetings (2017 – 2018); and a single (1) bimonthly meeting of Prison Fellowship (2018), a religious-based group focusing on prisoner reentry services in the Metro Detroit area.

Interviews with family members of prisoners active in support groups were conducted from June 2018 through September 2018. A semi-structured interview format (see Appendix B), which allowed for considerable probing was used to provide respondents a wide range in describing their perceptions of the visitation process and support group membership. Beginning with general questions about their incarcerated loved one such as how long they have been visiting, what correctional facility they current travel to, and what security level their loved one is housed in, interview participants were then asked a series of questions related to the research questions posed: how they plan or organize their visit (navigating the visitation process); how they handle barriers they face along the way (managing the visitation process); how can being active in a support group aid in addressing barriers to visitation; and how can being active in a support group aid in addressing visitation policy. To develop and refine the interview instrument, the first two interviews were completed with seasoned CPR and FAB board members. This process ensured that wording of the questions was clear and that the ordering of questions and length of the interview was appropriate. The initial and final instruments received IRB approval.

Interview participants were primarily recruited using a flyer advertisement, snowball sampling, and word-of-mouth. A hardcopy of this flyer was placed on the literature table at

monthly CPR meetings and distributed at a Prison Fellowship meeting. A digital copy of this flyer advertisement was also placed on the public and private Facebook group pages for CPR and related groups such as Humanity for Prisoners and Michigan Families Along for the Ride. Board members of CPR and members of FAB also distributed copies of this flyer as part of recruitment efforts. I also recruited participants in person by asking members of CPR and related groups if they would be interested being a part of the study during the announcements portion of meetings. Those interested in participating in the study were asked to contact the researcher by phone or email.

A total of thirty-one ($N=31$) interviews were conducted after participants were identified and met selection criteria. Interviews were primarily conducted face-to-face ($N=23$) at the private household of the participant. Other interview locations included participants' place of employment or a mutually agreed upon public meeting space, such as a coffee shop or diner restaurant. Due to the location and timing restrictions of both the participant and researcher, some interviews could not be conducted face-to-face and were thus conducted using an online video chat service such as Zoom, Google Hangouts, or FaceTime ($N=3$) or over the phone through Google Voice ($N=5$).

Interview responses ranged from approximately 45 minutes to 3 hours in length with the average interview taking approximately 100 minutes to complete (1 hour and 47 minutes). Participants were made aware of the length of the interview ahead of time and were also informed there was no cost or compensation for participating in the study. Once participants fully understood the purpose of the interview, their informed consent was obtained. Recognizing that one risk in taking part of this study is that some questions may cause participants to feel emotional, frustrated, or distressed, I provided a copy of a local resource guide for participants to

utilize based on their own individual need. Included in this resource guide are other support groups that may be of interest to family members of prisoners, as well as other prison reform/advocacy groups, contact information for transportation services available across the state, and statewide services and agencies that focus on issues related to incarceration.

Qualitative Data Analysis Strategy

Observation sessions for CPR support group meetings, related events, and other support groups were recorded through written field notes, memos, jottings, and sketches to help capture the theoretical decision-making process (Maxwell, 1996). Documents and handouts made available to group members were also collected at each meeting and related events. After each meeting or event ended, field notes and memos were digitally transcribed to a Word document complete with a list and short description of what informational handouts were made available. Any sketches drawn at the original time of the observation were digitally scanned and added to the electronic copy of field notes.

Next, transcribed field notes were coded using NVivo qualitative software. Initial coding began using open coding procedures to generate topics and themes. This helped generate a codebook that was utilized as a reference tool and guide throughout the data analysis process. Axial coding procedures were then applied to help relate categories discovered in open coding to subcategories. This process helps specify the properties and dimensions of said category and give coherence to the emerging analysis (Charmaz, 2000, 2014; Corbin & Strauss, 1998). Axial codes were added to the codebook as they were discovered and defined.

Interviews were audio-recorded. Before transcription began, the researcher listened to the raw audio of the interviews and wrote corresponding memos for each participant. Similar to cases of observation, this process aided in generating initial themes and concepts present in the

narratives. These memos were also helpful in recognizing patterns among interview participants. Next, raw audio files were transcribed into a Word document.

To develop and refine the coding process for transcribed interviews, five cases were selected at random and coded by hand to generate initial themes and concepts among participants' responses. These codes were checked against the initial codebook created for participant observation. If similar codes were discovered, concepts and themes were consolidated, and their definition refined. Unique codes generated through hand coding of transcribed interviews were added to codebook.

With a master codebook created, all transcribed interview files followed open coding procedures using NVivo qualitative software. Similar to participant observation, all transcribed interview files went through initial coding procedures using NVivo qualitative software and the initial codebook. Axial and selective coding procedures were then applied to all transcribed interview files, with any additional codes added to the master codebook to use across the qualitative dataset (see Appendix E).

Reliability and Validity

As an original research design, this study utilized the methods of participant observation, interviews and document analysis to aid in achieving data saturation. Failure to reach data saturation can impact the quality of the research being conducted and compromises content validity (Fusch & Ness, 2015; see also Bowen, 2008; Kerr, Nixon & Wild, 2010). Data saturation is of particular concern when interviewing study participants (O'Reilly & Parker, 2012; Walker, 2012) and researchers must address the question of how many interviews are enough to reach data saturation (Guest, Bunch & Johnson, 2006). Thus, observing monthly CPR meetings and related support groups, observing the special events members attend, interviewing

family members who were active in both online and face-to-face support groups, and having access to support group literature and related documents provided opportunities to “check” the truth of the data being collected.

For example, field notes gathered during participant observation garnered similar concepts, themes and quotes from support group members that were present in transcribed interview files, and vice versa. In other words, information and individual responses voluntarily shared in support groups meetings were echoed during interviews, and interview participants who were later observed in these meetings repeated responses they originally provided during their interview⁴. Like Christian and colleagues (2006), I was also able to cross-check information through similar written documents made available during participant observation and online through the CPR website (fliers, pamphlets, newsletters, annual reports, etc.).

Information shared in both participant observation and interviews could also be validated through official records. For instance, when CPR, FAB, or MI-CURE members would discuss MDOC administrative rules or policy directives during meetings, these documents were accessible through the Department website and downloaded as a reference check. Checking official MDOC documents was also helpful as interview participants, especially those affected by loss of visits, cited rules and policies by number. Relatedly, the efforts CPR and FAB members put into Legislative Education Day each spring, including rallying around the Family

⁴ For example, Mora, a board member for CPR and FAB, was not shy in sharing how many times her son had been transferred across MDOC facilities (“He was transferred 24 times in the first 4 years of visits.”) She discussed how her son consistently being moved from facility to facility impeded their visitation schedule in her interview with me, and I observed her share this particular experience with others during CPR meetings. When she joined FAB in 2018, she shared this information again with MDOC officials. Similarly, Charles and Connie, a married couple who also visit their son, both shared in their individual interviews how they have lost visiting privileges for a second time due to their son receiving multiple substance abuse tickets. They have been coming to CPR meetings together for years and have shared their story with other members. Furthermore, when Connie experienced a medical emergency, FAB members arranged a meeting where both she and Charles could personally share their story with MDOC officials in an attempt to restore visits.

Advisory Board Bill (SB195, 2019) were verified in a similar manner by accessing copies of the bill and related legislation made publicly available on state government websites. All of these efforts increased the likelihood that saturation, reliability and validity was achieved within the dataset.

Descriptive Statistics

Participant Observation

Some demographics of participant observation were collected in field notes and meeting minutes. To begin, attendance records of CPR monthly meetings varied depending on the speaker or presentation scheduled, as well as the time of year. Based on estimated head counts, monthly meetings maintained an average attendance record of approximately 35 participants per meeting, with a range as low as 7 members present (July 2017) at one meeting, to an estimated 65 or more members present during special presentations and events such as two monthly meetings with the Legislative Liaison to MDOC (September 2016 and March 2017), Legislative Education Day sessions, and their Annual Meeting held in October of each year. As members present at CPR meetings and related events were not asked to disclose any personal or identifiable information, I only generally observed demographics of attendants such as gender, age, race.

Regardless, members of CPR presented as being overwhelmingly White (Non-Hispanic) and older in age (middle-aged and seniors). Few people of color (fewer than 5 per meeting) were regularly present at monthly meetings, although more were present during Legislative Education Day and Annual Meetings due to a larger attendance. The lack of racial diversity of CPR has

been recognized by board members and suggestions have been discussed to increase inclusivity⁵.

Most CPR members appeared to be in their fifties, sixties, and seventies. Younger meeting attendants estimated to be in their twenties and thirties were observed from time to time, however, their membership did not prove to be as consistent or as longstanding when compared to older members. These individuals would attend a few meetings and eventually their attendance would cease. Children under 12 years of age, as well as those appearing to be adolescences, were also a rare occurrence. I observed at least two young mothers bring their children to meetings and related events, but only two or three occasions. Membership appeared to be evenly distributed between female and male attendants, however, more females were observed to be consistently present during monthly meetings based on head counts. The Board of Directors for CPR are also majority female. Out of thirteen members ($N=13$), eight are female, thus comprising two-thirds of the board (61.54%).

Based on information shared during participant observation, employment status and type of employment, level of education completed, and estimated social economic status (SES) of members varied. While some CPR members have shared that they are retired and choose to volunteer their time with the group, some explained how they balance their membership between working fulltime and visiting their incarcerated loved one. Specifically, two female board members of CPR disclosed they are practicing lawyers and explained how their professional experience influences their membership. Others disclosed they got involved with CPR over

⁵ While CPR is a group that is open and welcome to all, Alicia, who identifies as a Black woman, confirmed the lack of diversity of CPR when she described the first time drove from the Metro Detroit area to attend a monthly meeting in Lansing: “Yes, I was looking for support groups. And even when I went into that room – I’ll be honest – I didn’t see people that looked like me or people who necessarily had the same situation as me, so I didn’t feel like that was my place.” While she serves as a FAB board member, she rarely attends CPR meetings.

concerns related to mass incarceration or due to previous experience as a prison volunteer.

Due to the purpose of CPR, an estimated majority of members disclosed their reason for their involvement is that they currently had an incarcerated loved one and came to the group

looking for support. I observed a small group of members (two men and two women) who revealed that while they do not have the personal experience of incarceration, they are aware of the challenges family and friends of prisoners face and choose to involve themselves in the group for purposes related to social justice and social action.

Attendance of FAB meetings was on a much smaller scale as this group is made of up volunteer board members. Out of a total of thirteen members ($N=13$), attendance at quarterly meetings with MDOC ranged between 5 and 9 members, with some participating by phone due to their physical location (one member resided in the Upper Peninsula and three in the Metro Detroit area). While some FAB board members have come and gone over the years, the demographics of members remain majority female (61.53% or $N=8$), majority White (Non-Hispanic) (53.85% or $N=7$), and members who are above the age of forty (76.92% or $N=10$). Lacking in some diversity similar to CPR membership, two-thirds (61.53%) of board members currently have an incarcerated loved one in MDOC facilities and two members (15.38%) were formerly incarcerated themselves.

Although captured in a single observation, the demographics of Prison Fellowship were different when compared to membership of CPR and FAB. Out of the seven individuals present, attendance remained majority female (71.4% or $N=5$), and this support group had a majority Black membership (85.7% or $N=6$). One white male, who identified himself as formerly incarcerated, was present. Based on census data available for the zip code where bimonthly meetings are held, a higher attendance of people of color is consistent with the total population

of Black and African Americans (91.8%) in that area of Detroit.

Finally, MI-CURE held the smallest attendance. While the board is comprised of eight volunteers, only five members consistently attend bimonthly meetings. Members present were nearly all female (80% or $N=4$) and all appeared to be White. Out of the two male board members, one is formerly incarcerated and sometimes attends with his wife. Notably, another married couple that sits on the board was previously involved with CPR. I even observed them attend a few meetings in 2015 and 2017. Furthermore, interview participants referenced learning about the group from this couple after meeting them in the prison lobby during visits.

Interviews

At the end of each interview, participants were asked to answer classification questions detailing their age, sex, race, education obtained, annual household income, marital status, and number of dependent children. Additionally, family members were asked to classify their prison-family relationship (*i.e.* parent/child) by specifying their relationship (*i.e.* father/son) to their incarcerated loved one, the gender of who they visit, and at what security level. These demographic variables were entered in SPSS statistical software to aid in analysis of interview participants.

Table 2 provides results from descriptive statistics for interview participants ($N=31$). Overall, participants sampled echo the demographics of participant observation of support group settings: they vast majority were female (83.9%), White (80.6%), and most were middle-aged or senior citizens (67.7% for respondents between 50 and 80 years of age). The age of participants ranged between 22 years of age and 81 years of age, with an average age of 52.9 years. Nearly three-fourths of the sample have obtained a college education (70.9%), with over one-third (35.5%) having completed a graduate degree.

Table 2: Descriptive Statistics for Interview Participants (*N*=31)

	Frequency	Percent
GENDER		
Male	5	16.1%
Female	26	83.9%
RACE/ETHNICITY		
Black	4	12.9%
Hispanic/Latino	1	3.2%
White (Non-Hispanic)	25	80.6%
Other	1	3.2%
AGE		
18 – 24	1	3.2%
25 – 34	3	9.7%
35 – 44	5	16.1%
45 – 54	5	16.1%
55 – 64	11	32.3%
65+	6	19.4%
MARITAL STATUS		
Single	4	12.9%
Intimate Partnership	3	9.7%
Married	18	58.1%
Separated	1	3.2%
Divorced	3	9.7%
Widowed	2	6.5%
EDUCATION		
Graduated High School/GED	8	25.8%
Associate degree (2 year)	1	3.2%
Bachelor's degree (4 year)	5	16.1%
Some graduate studies	6	19.4%
Graduate degree	11	35.5%
INCOME		
\$15,000 to \$29,999	7	22.6%
\$30,000 to \$44,999	6	19.4%
\$45,000 to \$59,999	2	6.5%
\$60,000 to \$74,999	1	3.2%
More than \$75,000	10	32.3%
Refused	5	16.1%
NUMBER OF DEPENDENT CHILDREN		
None	16	51.6%
1 to 3	12	38.7%
4 to 6	2	6.5%
Refused	1	3.2%

Participants who reported their annual household income were generally split between those earning the highest and those earning the lowest. For instance, over one-third (32.3%) of the sample earn more than \$75,000 annually. However, 41.9 percent earn below \$45,000, which is less than the median household income for the state of Michigan (\$52,668) based on recent American Community Survey 5-year estimates (2013-2017).

Over two-thirds of the sample are married (58.1%) or in some type of intimate partnership (9.7%). Notably, two married couples were recruited (Kathie and John; Charles and Connie) but were interviewed individually at separate times. Most likely due to the advanced age of the sample, 51.6 percent do not have dependent children residing in their household. However, fourteen participants (45.2%) were responsible for dependent children and had to parent in addition to attempting to complete a visit. Most cared for at least 1 to 3 children (38.7%), while two participants were mothers to 4 to 6 children (6.5%).

For participants who reported their zip code, results demonstrate at least some coverage across each seven regions of Michigan (Michigan Department of Transportation, 2019). While just over half the sample (51.6% or $N=16$) was recruited from the mid-Michigan area (29% for University region and 22.6% for Grand), a fair amount of respondents lived in the Metro region (19.4% or $N=6$) and a few in the Southwest region (12.9% or $N=4$). Representing the northern region of Michigan, only one participant (3.2%) was recruited from the North, and one from the Superior region, which represents all counties in the Upper Peninsula.

Descriptive statistics were also generated to analyze the types of prisoner-family relationship present in the sample. Data was entered into SPSS and analyzed using frequencies and crosstabulations to aid in describing the relationship between male and female respondents. Results are shown below in Table 3. To begin, over half the sample were in parent-child

Table 3: Descriptive Statistics for the Prisoner-Family Relationship

	Male (N=5)	Female (N=26)	Total (N=31)
PARENT/CHILD	100.0%	46.2%	54.8%
Daughter/Father	-	3.8%	3.2%
Father/Son	100.0%	-	16.1%
Mother/Daughter	-	11.5%	9.7%
Mother/Son	-	30.8%	25.8%
SPOUSE/INTIMATE PARTNER	0.0%	50.0%	41.9%
Girlfriend/Boyfriend	-	11.5%	9.7%
Fiancée/Fiancé	-	7.7%	6.5%
Wife/Husband	-	30.8%	25.8%
SIBLING	0.0%	3.8%	3.2%
Sister/Brother			
GENDER OF PRISONER			
Male	100.0%	88.5%	90.3%
Female	-	11.5%	9.7%
SECURITY LEVEL			
Level I	20.0%	38.5%	35.5%
Level II	80.0%	57.7%	61.3%
Level IV	0.0%	3.8%	3.2%

relationships (54.8%), with a majority being mothers visiting their sons (25.8%). The second highest parent-child relationship was fathers visiting their sons (16.1%), which represented the prisoner-family relationship for all male respondents ($N=5$) interviewed for this project. There were three mothers (9.7%) who visited their daughters at Women's Huron Valley Correctional Facility (the only state prison for women), and one daughter who visited her incarcerated father. Nearly the other half of the sample (41.9%) was made up of participants who were in a spousal relationship or intimate partnership with a prisoner. Out of the thirteen participants with an incarcerated partner, most were wives visiting their husbands (25.8%), while three were girlfriends visiting their boyfriends (9.7%) The remaining two women were fiancées visiting their soon-to-be incarcerated husbands (6.5%).

Participants were also asked what security level their incarcerated loved one was housed in at the time of interview, as the number of opportunities to visit, including what days and times, are determined by the level assigned by MDOC. According to MDOC Visiting Standards (2018), prisoners housed in Level I are permitted 8 visits per month, which any or all can take place on a weekend; Level II are permitted 7 visits per month, but only two of the allowable visits may be on a weekend; Level IV are permitted 5 visits per month, and Level V are permitted only 4 visits a month, similar to prisoners placed in Segregation. Those that are housed in Security Threat Groups (STG) I and II are restricted to 3 and 2 visits per month, respectively. A majority of sample participants' incarcerated loved ones were housed at the lowest levels, Level I (35.5%) and Level II (61.3%). On the other hand, nearly one-fourth of participants ($N=7$) disclosed that over the years they have been visiting their incarcerated loved one, their security level has dropped from Level IV to Level II, or from Level II to Level I. Although this decrease in security level might have caused a change in visiting days or hours for some, all recognized

that the number of times they could visit per month increased.

Finally, all but one interview participant ($N=30$) reported to be a member or involved with a support group for family members of prisoners, whether locally or online. Table 4 below provides a summary of those interviewed for this project, as well as the relationship they have with their incarcerated loved one and which support group(s). For a more detailed description of support groups utilized, including those where participant observation data was collected (CPR, FAB, MI-CURE, and Prison Fellowship) see Appendix A.

Recognizing that purposive sampling and selection criteria for interview participants as a limitation, results are common with ethnographic studies of this type (Condry, 2007)⁶. Despite this limitation, this study provides insight into which family members of prisoners join support groups and how they utilize them to navigate and manage the visitation process.

⁶ See Limitations and Recommendations for Future Research in the concluding chapter (Chapter 6) for further discussion.

Table 4: Interview Participants (N=31)

Name ⁷	Gender	Age	Race	Relationship to Incarcerated Loved One	Support Group Membership ⁸
Alicia	Female	44	Black	Girlfriend/Boyfriend	CPR, FAB
Ann	Female	56	White	Wife/Husband	CPR
Betty	Female	50	White	Fiancée/Fiancé	None
Connie	Female	78	White	Mother/Son	CPR
Deanna	Female	53	White	Wife/Husband	HFP
Diane	Female	61	White	Mother/Son	Michigan Families, CPR
Edith	Female	67	Black	Mother/Son	Prison Fellowship
Elaine	Female	45	White	Girlfriend/Boyfriend	HFP
Faith	Female	22	Black	Girlfriend/Boyfriend	CPR (Facebook)
Geri	Female	60	White	Mother/Daughter	HFP
Heidi	Female	44	Other	Wife/Husband	CPR (Facebook)
Jalee	Female	57	White	Fiancée/Fiancé	HFP, Michigan Families
Jane	Female	32	White	Wife/Husband	CPR
Justine	Female	37	White	Daughter/Father	HFP
Katherine	Female	62	White	Mother/Daughter	CPR (Facebook)
Kathie	Female	70	White	Mother/Son	CPR, MCJ
Lena	Female	40	White	Wife/Husband	HFP
Marlene	Female	57	White	Mother/Son	Detroit People's Task Force
Melissa	Female	41	White	Wife/Husband	CPR (Facebook)
Meredith	Female	55	White	Mother/Son	CPR, MCJ
Miranda	Female	50	White	Mother/Daughter	CPR (Facebook)
Mora	Female	63	White	Mother/Son	CPR, FAB
Rita	Female	55	Hispanic/Latino	Sister/Brother	CPR
Sandra	Female	55	White	Mother/Son	CPR (Facebook)
Sharon	Female	61	White	Wife/Husband	HFP
Tiffany	Female	31	White	Wife/Husband	HFP
Charles	Male	80	White	Father/Son	CPR
Jim	Male	68	White	Father/Son	FAB
John	Male	69	White	Father/Son	CPR, MCJ
Mike	Male	51	White	Father/Son	CPR (Facebook)
Pete	Male	56	White	Father/Son	CPR, FAB, FPP

⁷ Participants were given the choice to use a pseudonym or the first name only. Sixteen (N=16) participants provided a chosen pseudonym while the remaining 15 participants consented to using their first names.

⁸ See Appendix A for full description of each support group as well as acronyms. While over half of participants (N=19) are involved in Citizens for Prison Reform (CPR) in one form or another, participants who only utilized their Facebook page are denoted by the label CPR (Facebook).

CHAPTER 4: NAVIGATING AND MANAGING THE VISITATION PROCESS

The goal of the first research question was to capture how family members of prisoners navigate and manage the visitation process. Interview participants were asked a series of open-ended questions that focused on how they initially sought out information and what did they do to plan or organize their visit, including applying to be approved for visits. Recognizing that navigating the visitation process is one initial barrier to completing a visit, participants were then asked how they managed the following barriers already recognized in the literature: distance, cost, time, institutional barriers, other barriers such as employment and visiting with dependent children, and emotional barriers.

Navigating the Visitation Process

Family members were concerned with three primary issues when initially learning how to navigate the visitation process: 1) finding information about prison visitation, 2) filling out the visitor application to be approved for visits, and 3) planning the visit.

Finding Information

During the finding information phase, family members opted to find information either on their own ($N=5$), by asking their incarcerated loved one exclusively ($N=8$), making an inquiry with MDOC through phone calls or searching for information on their website ($N=25$), or utilized a combination of these methods. A majority of the sample (70.9%), however, eventually reached out to support groups for information or guidance ($N=22$). This was usually after feeling frustrated with the lack of information supplied by the Department – especially information that was accurate. Table 5 below describes the frequency of themes related to navigation and

Table 5: Navigating and Managing Barriers to Visitation by Interview Participants (N=31)

	Frequency	Percent
NAVIGATING BARRIERS		
Finding Information	31	
Found information themselves only	5	16.1%
Asked their incarcerated loved one (ILO)	8	25.8%
Asked MDOC or utilized their website	25	80.6%
Utilized support groups (including online)	22	70.9%
Visitor Application Process	21	
Application approved under a month	15	71.4%
Application lost	3	14.3%
Application denied	3	14.3%
Managing multiple visitor's lists	2	9.5%
Planning the Visit	28	
Plan in advance	22	78.6%
Called their ILO before	9	32.1%
Asked MDOC or utilized their website	12	42.9%
Utilized support groups (including online)	18	85.7%
MANAGING BARRIERS		
Distance⁹	29	
Traveled less than 200 miles	10	34.5%
Traveled more than 200 miles	19	65.2%
Traveled to the Upper Peninsula	13	44.8%
Traveled from out of state	3	10.3%
Traveled internationally	1	3.4%
Distance recognized as major barrier	6	20.7%
Cost	31	
Spend less than \$500 a month	7	22.6%
Spend less than \$1,000 a month	20	64.5%
Spend \$1,000 or more a month	4	12.9%
Cost recognized as major barrier	12	38.7%
Time	30	
Taking the day to visit (8 to 12 hours)	25	83.3%
Taking time away from others and community	5	16.6%
Time recognized as major barrier	4	13.3%

⁹ Inquiring whether interview participants traveled more or less than 200 miles is based on the MDOC policy that states those who travel 400 miles or more round-trip are not to have their visits terminated early due to the amount of distance traveled.

Table 5 (cont'd)

	Frequency	Percent
Other Barriers	14	
Employment	10	71.4%
Visiting with children	8	57.1%
Visiting with elderly	5	35.7%
Medical issues	3	21.4%
Other barriers recognized as major barrier	3	21.4%
Institutional Barriers	31	
Inefficient visitor processing	28	90.3%
Dress code violations	20	80.6%
Transfer of ILO	16	51.6%
Termination of visit	19	61.3%
Loss of visit	8	25.8%
Rude treatment by staff (secondary prisonization)	31	100.0%
Institution recognized as major barrier	4	12.9%
Emotional Barriers	26	
Positive (Happiness, excitement, joy)	20	76.9%
Negative (Anxious, fearful, guilt, shame)	13	50.0%
Emotions as motivations	10	38.5%
Riding an emotional roller coaster	4	15.4%
Emotions recognized as major barrier	3	11.5%

management of barriers that appeared across interview narratives.

For example, when Alicia discovered that a longtime friend had been sentenced to prison, she reached out to him and sent him a card. As they got to know each other, she inquired about visiting him and asked what she had to do: “I initially learned information from him. He told me how I needed to fill out a visitor application to get on his approved visitor list, and we went from there. He let me know I could get the application online and to mail it in.” From there Alicia utilized the MDOC website but would still confirm the information she read online with him.

Charles and Connie started visiting their son in a similar manner. Charles recalls, “When he first went in, we knew nothing about policy directives; we knew nothing about MDOC; we just didn’t know anything about the system. We didn’t know where to turn or who to ask.” After learning what they could from their son, they too, started using the MDOC website and double-checked the accuracy of the information provided based on what he told them. As they had never experienced prison before, Charles commented that “... learning the ropes of visits is a whole different ball game.”

On the other hand, Jalee had already acquired some knowledge related to prison visitation as she had previously visited both her brother and ex-boyfriend while they were incarcerated. She utilized her personal experience to her benefit once she began a relationship with her fiancé. She admitted how she initially felt shame and stigma for being a “prison wife” and maintaining a serious relationship with someone serving a life without parole sentence. She explained that because, “I didn’t want anyone to know in the beginning. I didn’t want anyone judging me and my family, so I reached out to my brother for information in the beginning and got it from him.”

A few family members recalled finding information on their own and utilized the Department website with general ease and success, while several others found the information

reported to be out of date, inaccurate, or misleading. A father who has been visiting his son for the past 13 years (Jim) shared his habit of calling the facility before he left to confirm visiting hours: “When he first went in, I used to call to confirm visiting hours every time I left, just in case. Now that it’s 2018, much of that information is online, but it is not correct.” Even if families did call to request information (or clarification) reported on the Department website, they would not always receive the friendliest of responses from prison staff. Heidi shared her overall experience when calling to inquire about visitation hours and request information from correctional facilities:

No I think the whole process – and still – I think the whole process is vague and hard to follow And I think what the worst part about that was the couple times I called the facility, they’re not helpful. They’re just not generally kind people – and I know I’m stereotyping all of them. I will say there are a few good ones – a few. But no, the rest of them are not nice and are just not helpful. And they treat us like they expect that they can treat the inmates and that’s not okay.

In addition to wrong information, prisoners’ families reported a lack of information related to the rules of visitation, dress code policies, and generally what is expected of them as a visitor, thus causing them to “know nothing” and “being totally naïve” towards the procedure, as both Mora and Alicia described. To make matters more difficult, rules and expectations for visitation varied facility to facility. In turn, this led to much confusion and frustration in trying to follow rules they were not aware of, especially for novice visitors experiencing incarceration for the first time, which was a majority of the sample ($N=27$; Table 6 in Chapter 5 for details). Family members described trying to learn this information as fast as they could, however, due to being reprimanded by prison staff for violating rules unbeknownst to them, some were forced to learn from their mistakes. For example, one participant had his visit terminated early for leaving his car windows slightly rolled down in the visitor parking lot and another time for having an excessive amount of quarters in his pocket than was allowed when he went through visitor

processing (Jim). Pete agreed and admitted he had to learn the rules quickly if he wanted to successfully complete a visit with his son:

Now they don't tell you about a lot of the nuances at a facility: dress code is there, but how things operate as far as the searches and putting your stuff in a locker, what you could actually bring in the facility or not – you can't bring a telephone in there at all – that kind of thing. No electronic devices. I've learned really quick ... don't be afraid to say that it's your first time and hopefully they will fill in the blanks for you.

Another participant who has been visiting her husband for more than 25 years (Deanna) also found it to be helpful to mention it being your first time, especially when learning the process of a new facility:

You know unfortunately from facility to facility it's not the same process right? So what I do is when I get there I basically tell them, "Hey this is the first time I'm here. This is how they did things at the previous facility. Is there something different I should know?"

Due to the general unresponsiveness and inaccuracy of the Department, however, most participants interviewed ($N=22$) found themselves seeking out support groups for assistance, either locally or online. Diane, a novice visitor who had only started visiting her son in the past six months, explained how she began searching for these groups online after feeling increasingly frustrated each time she tried to obtain information directly from MDOC. She encountered several roadblocks along the way, including having her visitor application lost on three separate occasions:

There is information there, but sometimes it's inaccurate and incomplete, so I've also relied on support groups on the Web to get the practical information about how they actually operate ... sometimes they don't tell you everything.

She explained how utilizing Michigan Families Along for the Ride, a private Facebook group for family members of prisoners, helped her know what to expect once she was approved to visit her son: "Absolutely. You know what to expect when you go there, you know. The first time I went there I needed to have a dollar, or buy a card for a dollar, or you need money to put on the card,

some facilities take quarters, etc. It was very helpful.”

Some family members eventually came across Citizens for Prison Reform (CPR) from meeting Lois, the President of the group, in the prison lobby. This was the case for Mora, who has been visiting her son since 2007. She spent the first five years of his sentence navigating and managing the process on her own:

I knew nothing at the beginning. It was kind of like a taboo subject. You didn’t talk about it. I had to learn on my own – and at each facility – with my son being transferred so many times. When I met Lois and she told me her story, I thought “Oh my god, you know what I’m going through!

Although prison administrative rules prohibit visitors from communicating with one another, Mora admitted that they went into the women’s restroom to exchange contact information and find out when meetings were held.

Pete was introduced to CPR through a friend who heard an interview with Lois on the radio. Similar to Mora, he spent the first couple of years navigating on his own. Finding CPR helped him connect to other family members of prisoners, which became a useful resource to request and share information.

At the very beginning that was a little tough because I wasn't connected with anybody else in the system at all, period. I didn't even know that there were resource guides out there. I didn't even know that MDOC ... if they had a family resource guide on there, on their webpage.

Before CPR was formed in 2012, navigating the visitation process alone for the first few years seemed to be the general experience for prisoners’ families. This “crisis of information” was confirmed by members on the Family Advisory Board (FAB) during quarterly meetings with MDOC. From one meeting agenda (4/28/2016):

FAB members reiterated that family members do not know this information ahead of time; sometimes it can take years to comprehend and become comfortable with the rules and regulations related to visiting. MDOC should be more understanding of this and help share helpful information.

Visitor Application Process

Once initial information was obtained, family members were required to submit an application in order to be approved for visits. Out of the 21 interview participants who discussed the visitor application process, most ($N=15$) found this step of the process relatively easy and had their application approved within a few weeks to a month, while others found the directions unclear, had their application lost ($N=3$) or had their application denied for making a mistake or failing to fill out a portion of the application incorrectly ($N=3$). Waiting for approval, as well as seeking it again after denial, added between 4 to 8 weeks of additional waiting time until family members could see their incarcerated loved one.

Complications related to the application process again centered around a lack of information available from the Department. While visitor applications were available to download and print directly off the MDOC website, Jim clarified that all applications must be mailed directly to the facility. Visitor applications will not be accepted by email:

Many family members don't know that you must remember to include a self-addressed stamped envelope with your application so they can mail their response back. Few people know this and may end up waiting an indefinite amount of time for a response that may never come. Or they may eventually receive a denied visitor application sent to their return address if they're lucky.

Having the visitor application denied, however, was a major barrier that one participant had to endure before even getting the chance to complete a visit. Ann had a unique circumstance as she was formerly employed by a private contractor within the Department and married her incarcerated husband once she left her position. While she does not have a felony conviction that would deem her ineligible for visits, Ann¹⁰ explained how she was denied visitation indefinitely

¹⁰ For context, Ann disclosed that while she was working in this same kitchen, she was sexually assaulted by an inmate and filed a report with the Department. Although they were not married at the time, her husband witnessed the incident and she believes that is why MDOC did not approve their visits.

due to “overfamiliarity” related to her previous employment:

I was not allowed to see him at all. The first time I tried to go visit him I was denied because I worked at the prison and he was considered a “victim.” I mean it wasn’t like we were caught doing anything ... the last time I would have seen my husband would have been right before Thanksgiving in 2015. They took him out of the Level V kitchen since they were kind of questioning things. They pulled him out and put him in Level I. But I did see my husband March 8 of this year when we got married. So it’s like, they let me in to marry him, but they don’t let me in to visit him.

An additional complication related to the visitor application is when family members have to manage being on multiple inmates’ approved visitor lists. This was the case for two participants in the sample (Jim and Mike). While Jim visits his son and serves as a volunteer in other prison facilities, Mike faces challenges in balancing visits between his son and two of his close friends, which he has helped raise since their adolescence and considers to have kin relationships with. Per MDOC policy, visitors cannot be on more than two inmates’ approved visitor lists at the same time. Thus, he was forced to rotate his visitation among his biological son and his “adopted” sons:

Right now I’m currently going to Jackson and the Thumb, then every six months I rotate between Cotton and St. Louis because the other two are adopted. So the schedules change but I’m making, usually, two trips a week – one to each facility. The applications are the hardest part because you’re new to it. So I got mine sent back like 3 or 4 times between the three of them because you just don’t know. So I started visiting immediately after that ... six weeks or two months? They’re not user friendly.

Planning the Visit

When it came time to planning the visit, this phase demonstrates how family members logistically organize themselves and the various strategies they use to get ready and ensure everything is in place before they leave. This portion of navigating the visitation process includes identifying barriers simply related to scheduling a visit such as getting time off of work, making sure they have secure and transportation to get them to and from the correctional, or the need to obtain childcare for the day.

Recognizing that the visitation process typically takes between eight and 12 hours to complete (see discussion on managing *Time* as a barrier to visitation), a majority of participants ($N=28$) shared how they meticulously plan their visits in advance. For instance, Jalee explained how she needed at least one week to plan her visit and secure childcare: “I’m a mess before my visit. Usually I’ve got to call my mom a week before to get her down to babysit. My biggest thing is securing daycare.” She also described how she frequently needs an entire weekend to prepare for her visits. Jalee wants to look her best; however, because policies surrounding dress code are so strict, she would bring at least four different outfits to make sure she can get in: “I literally packed my entire closet! You have to take a change of clothes. You have to be prepared for anything. It’s not very reliable because they say one thing and they mean another.”

On the other hand, both Jane and Heidi plan their visits at least one to two months in advance. Due to visiting with her children, the level of organization Jane maintains when planning her visit was higher than most, but helped facilitate travel to facility as well as visitor processing:

So I have a visiting envelope that has both the children’s’ birth certificate, my visitor approval letter, my ID, and a couple of extra vending machine cards. Yeah so very organized. It’s just got everything just in case something could happen. I also keep a visiting diaper bag that has an extra change of clothes for the children.

Heidi spent the first four years traveling out of state to visit her incarcerated husband. Since her trip required her to drive anywhere from 15 to 18 hours, she began planning a month in advance to ensure nothing would interfere with her visits once she arrived. To avoid any problems, she would call the facility at least two weeks before her scheduled visit. One facility was accepting of this practice; however, once her husband was transferred to another facility, it became more of a challenge to call and receive confirmation from the Department:

I called and left messages – and I’d start two week in advance because this is a major haul for me to plan this out, get hotels ... making sure everything is set. So at one point, the officer is like, “You know, you don’t have to call me so far in advance. I don’t really know what’s going on, give me two days.” So I would give him two days and when I would call, he would be out so I couldn’t know what was going on. I called and left messages. He called me back and I said, “Okay I haven’t heard from you, my visits have always been approved, I’m heading out. I’m leaving from out of state and coming up there. You should have gotten back in touch with me. So I got to my halfway point and he called me and says, “You know, we just really can’t approve this visit this time.” So I did not get to see him. So that was a wasted visit.

Others planned their visit by waiting for a strategic time in the month or by running certain errands the day before. In order to ensure she can afford the costs associated visiting, Mora explained how she would typically wait and visit on the weekends after she received her paycheck: “I keep a weekend or two free to visit my son. It helps if I wait and go during a pay week, so I have enough money for the vending machines or to get an oil change done on my car.” Another participant, Rita, explained the routine she follows the night before she leaves to visit her brother:

First I will call and email my brother the day before to remind him that I’m coming. Once I hear back from him, I’ll go run my errands like going to the bank to get quarters for the vending machines and making sure my car is fully gassed up. You also prepare yourself and figure out what you’re doing to wear the night before and make sure it’s dress code. Calling their incarcerated loved one directly was another tactic families utilized when

Due to their experience in trying to obtain information from the Department, family members expressed trepidation in calling the correctional facility to verify visiting hours for the day.

Although new to the visitation process, Diane has formed a routine with her son similar like the one Rita established with her brother: “My son calls me on a schedule, and we discuss when I’m going to come visit so I have it planned several days in advance. And I basically set aside an entire day for a visit.”

Despite their planning efforts, family members could only control so many variables, especially when they arrived at the correctional facility. Similar to experiencing frustrations in

trying to find and obtain information related to visitation, participants grieved over finding the best time and day to avoid an overcrowded visiting room, which could only occupy a range of 45 to 70 visitors at a time. Pete admitted that it was nearly impossible to know how many people are going to be in the visiting room once you arrive:

Yes that's the that's the one thing you have no way of knowing when you're planning a visit is how many people are going to be in the visiting room, and the visiting room up there is small. I can't tell you the capacity right off the top of my head but visits - as you'll hear from everybody I'm sure - if they have a capacity, and that capacity is met, any more visits coming in means that somebody who is already visiting ... their visits will be terminated. They have to have a minimum of a one hour visit but driving six hours for a one hour visit isn't exactly cutting it as far as keeping contact.

Trying to figure out the best time to visit was cited as another reason a majority of family members (85.7%) eventually reached out to support groups to help them to better plan the next time. In Diane's case, she did not realize the importance in avoiding consuming too much food or liquids before the visit, as taking a break to use the restroom took away additional time due to visitors having to be processed into the lobby and back into the visiting room again:

It helped me be prepared for what can go wrong. The idea that they can terminate visits is kind of incredible, and they do it regularly because visiting rooms are too small. The idea you need to go there and not drink anything before you go in, so you don't have to use the restroom ... these are major, major things they don't tell you. These tips are very helpful.

Tips were helpful as families reported variations in visitation experiences across facilities, thus affecting how they plan their visits. This led to more "learning by failing" for some family members due to assuming the planning strategies they established would apply at other facilities. After getting involved with CPR and discussing with other prisoners' families how they plan their visit, Pete became aware of the nuances between each correctional facility, which helped adjust his planning efforts when his son was transferred to a facility located in the Upper Peninsula:

It made me more aware that there are a lot more issues going on out there at different facilities that I had no idea about. It made me more apt to make sure I cover all my bases when he's transferred before I walk in the door whereas before I might not have, so it's changed in that way. I make sure I have all the details when I'm going to a new place to visit.

Taken together, these findings reflect the difficulties prisoners' families experience in obtaining information from correctional departments and knowing ahead of time what is expected of them as a visitor. Navigating the visitation process is the first barrier family members face when trying to complete a visit. This could explain why they initially reach out to support groups, including those available online, that may be to provide them with formal and informal information.

Managing Barriers to Visitation

In addition to barriers created when trying to navigate the visitation process, there are still plenty of additional barriers family members of prisoners must manage. Here, the barriers of distance, cost, time, barriers created by administrative rules and/or prison staff once family members arrive (institutional barriers), as well as emotional barriers that may affect visitation are discussed. Interview participants disclosed other barriers to completing a visit such as employment schedules, attempting to obtain childcare or visiting with dependent children, medical issues, and traveling with elderly family members. Results confirm barriers to visitation previously identified in the literature (Arditti, 2003, 2005; Casey-Acevedo & Bakken, 2002; Christian, 2005; Christian et al., 2006; Tewksbury & DeMichele, 2005) but also indicate how these barriers can intersect, thus creating a constant struggle to complete a visit. Lena summarized managing barriers to visitation succinctly when she stated, "Like I said before: It is very expensive ... it is very time consuming ... it is emotionally draining, financially draining, mentally draining to have somebody in prison." While some family members developed a few

strategies to manage these barriers, they were still largely affected by the pains of the visitation process.

Distance

The first major barrier to visitation is how the geographic location of a prisoner directly affects both the family member's ability to visit and how often. A total of 29 participants acknowledged distance as a barrier and discussed the various issues it produced. To begin, distance traveled by prisoners' families ranged between 15 minutes up to more than 24 hours, as one participant traveled international from Australia to visit her incarcerated husband (Lena). On average, over two-thirds of the sample drove more than 200 miles (one way) to visit (65.2%) as most of these individuals traveled to correctional facilities located in the Upper Peninsula (U.P.) ($N=13$). Three family members reported traveling from out of state, which greatly increased the average driving time. Although they had been approved for visits, a fifth of the sample recognized distance as their biggest barrier to visiting their incarcerated loved one (20.7%) and admitted it was too far to visit.

For example, Jalee has never been able to visit her brother since he was transferred to the U.P, where driving times range between six and 12 hours depending on the destination, which demonstrates how distance can directly impact visitation:

For me, distance is everything. My brother is 8 hours away. He's been down 3 years and I have never been able to go see him. You know, the key to success in rehabilitation is having your support system and when your support system can't get to you but once a year, it defeats the purpose of prison reform.

Relatedly, Mora disclosed that she has not seen her son since November 2017 once he was moved to Muskegon, which was located more than 2 hours away from her residence. He was previously being held at a facility about 90 minutes away, which was more manageable for her. While he was located closer she and her mother would visit about once a month. "Now that they

moved him farther away again, it's too far of a trip. Plus, I'm nervous if my car can withstand that kind of travel."

In fact, participants commented on the fear of their incarcerated loved one being transferred "up north" or "over the bridge" to the Upper Peninsula, which sometimes left them with the impression their incarcerated loved ones were being transferred farther away as a form of punishment. Diane traveled 100 miles each way to visit and fears her son will be moved even farther away:

That is the nightmare of all families ... to have their loved one transferred to the UP. And if you raise any issues or problems, that's their [MDOC] response. It's used almost as a retaliatory for families to keep them in check – and if they don't behave – they'll move them to the UP. You complain, they'll move them to the UP.

In addition to creating a greater amount of distance between prisoners and their families, other issues related to being housed in the Upper Peninsula included how generally inaccessible the area is, the cost of gas and overnight lodging, dealing with tourism (and increased lodging prices) in the summer, and temporary bridge or facility closures in the winter due to extreme weather. Due to this increased distance, and how long it takes to complete a visit that far away, participants who traveled to the UP described how they would incorporate outdoor, recreational, and leisure time to coincide with their visiting their incarcerated loved one.

This was the case for Charles and Connie, who haul their travel camper up north during the summer to visit their son. Connie explained:

Truthfully we combined the visits of seeing our son with the pleasure of seeing the Upper Peninsula and our son is happy that we can at least enjoy the area. Every time he calls us, he reminds us, "Go out and have fun!" and I think it helps alleviate some of his guilt, pain and suffering.

Come winter, however, their camping options and ability to travel to the Upper Peninsula were limited. It was only during the spring through fall months that they were able to visit more

frequently. Something else Charles and Connie had to factor in is their age. As they are both in their early 80s, their mobility is not what is used to be and the distance began taking a toll on them, especially Charles. He commented that it is becoming physically difficult to drive and pointed out the obvious: “Because I’m 81 years old and I can’t do it anymore. I can’t haul that trailer anymore.”

John and Kathie, another married couple who visit their son, were also able to work in leisure time and recreational activities in traveling to the Upper Peninsula. At the same time, however, Kathie realized the limitation this extra distance put on their ability to visit more frequently: “The farther he was transferred away, the less likely we would be able to visit. When he was housed at Chippewa, we would only be able to get up there once a month.” Pete summarized how his visitation patterns have changed since his son was transferred “up north” three years ago. He agreed with how much more difficult it has become and recognized he cannot get up there as easily as he did when he previously only had a one hour drive to a facility located in nearby Jackson:

Well because of the distance it's not ... you can't, I can't do a snap visits. You know, go see him in the afternoon because it's an ordeal. When he was in Manistee that was 4 hours round trip, and there were a couple few times actually at that time of the beginning, where I would literally leave work and drive up there, visit for 8 hours, and then drive home and get home one o'clock in the morning and go to work the next day. So I don't do that anymore ... I just can't do it. The distance definitely cuts down on the number of visits he gets a month, period. It's an ordeal – I got to work around the things that are happening and there's just no way I get up there, let alone the cost.

Of course, traveling out of state or internationally presented additional barriers related to distance. While she only had to travel 80 miles to visit her husband, before Lena moved from Australia to be closer to her husband, it took her nearly 24 hours and three separate flights to get to the correctional facility where he was housed. As she was forced to rely on flying to get her to her visit, this was not the most feasible option for participants traveling from out of state. In

order to have her personal vehicle available to her at all times, Heidi decided it was easier to drive the 15 hour minimum to visit her husband:

It would have been a lot easier to fly. Unfortunately, that meant that on the flip side, when I got there I may not have transportation to the prisons right, and I also would not have transportation if something happened where they terminated my visits like if they went to lockdown or something. I would have had no control over my transportation, so it wasn't a safe bet. And it just caused additional costs depending on – since I had to fly on holidays those tickets were more expensive – and then the rent a car I was still better off most of the time financially, economically to drive even though it ruined my cars.

Like Heidi, Tiffany moved to Michigan from the neighboring state of Wisconsin to be closer to her husband and make it easier to travel with their two young sons. While they are now under 200 miles away from him, she used to spend upwards of seven hours, one way, to get to the facility: “So before that it was about 420 miles, which was about six hours and 45 minutes one way. And that was straight traveling with minimal bathroom and gas breaks.”

Only two participants (Edith and Mora) reported being able to travel less than 30 minutes to complete a visit. Notably, both of these situations were temporary. Although she is grateful she only had to travel 15 minutes to visit her son, Edith recalled all the times she had to drive anywhere from two to four hours to see him and how distance largely determined her frequency of visits: “It determines how many times you’re able to visit your person.” In fact, distance was explicitly identified as the hardest barrier to overcome for a handful of participants ($N=6$) and confirmed average distances of 100 miles reported in the literature (Homer, 1979; Nagel, 1973; Prison Policy Initiative, 2015). Recognizing the difficulty distance can create for the prisoner-family relationship, Rita sees this as major burden for family members and other potential visitors to maintain contact: “I find it negative. It doesn’t matter how far you have to drive or how close you are – it’s still a burden on them.” These results suggest additional policy directions for correctional departments, which largely focus on placing inmates closer to their

families and communities to encourage regular visitation. Members on the Family Advisory Board agree with this and have suggested that placing inmates closer to families would aid in reducing this barrier:

They give no consideration whatsoever to where the support system is when they place these guys in these facilities. So their rules and where they ship people based on available bed space has a huge impact on people and whether or not – there's people up in the UP that never get visits, period – and they don't consider that at all when they're deciding where somebody is going to be.

Cost

There were significant costs associated with visiting an incarcerated loved one and all interview participants identified cost as a barrier to visitation ($N=31$). In addition to money for gas mileage, change for lockers, money for food and drink from the vending machines, as well as photo tickets, there were also costs associated with maintaining communication outside of visitation. Some of these included money for phone calls, emails, mailing letters and packages, commissary account deposits, books, clothing, and other gifts. Interview participants went into great detail as to how much they have spent either monthly or annually in order to maintain a relationship with their incarcerated loved one, which ranged between \$100 and over \$1,000 a month. When calculating all costs involved, over two-thirds of the sample (64.5%) estimated they spent less than \$1,000 a month but more than \$500 a month to visit and maintain communication. This confirms monthly expenses previously estimated in the literature that ranged between \$200 and \$600 a month (Christian et al., 2006). Thus, family members engaged in a wide array of financial planning techniques in order to afford visits.

Jalee explained: “This is how I plan for my trip. I always keep \$75 for my trip and that is for gas, vending machines, and pictures. That is the minimum of what I can take.” To be clear, she spends this amount for each visit a month, totaling at least \$150 for her two visits. To ensure

that she has the money to get there, Jalee would immediately budget her paychecks every time she received them. Other expenses included phone calls and emails, which ranged between \$25 and \$50 a week. She estimated that she spends roughly \$450 a month on visits and maintaining communication (“everything”) with her fiancé. While her employment hours are flexible, she explained the extra effort she puts in while on the clock:

I work extra hours and I work extra hard. Take every extra hour and everything I can get ... to work to make extra money – and every time I think, “Oh, that’s a phone call. That’s my phone calls for the week!”, and that’s immediately what I go to. It benefits me in a way that ... I love spending \$3 on that picture, you know what I mean? It means the whole world to me. That picture is my whole life.

Mora can only afford the bare minimum. As she is widowed and takes care of her elderly mother on a single income, she had to strictly budget her visits and avoided spending money (“do without”) on herself in order to ensure she has the funds to visit:

I try to put money aside ... a lot of time I can’t afford it because I’m a single income household. And I’ve been a single mom since I’ve been 37 – I’m a widow – so I’ve never had a lot of money. Instead of getting myself an outfit or something, I would put it aside to make sure we had money for vending machines. You know, just budget and do without.

Because she could not afford to physically visit that often, she does talk to her son on the phone every day. This costs about \$80 to \$100 a month alone. She also buys him SecurePaks up to 4 times a year, which cost approximately \$90 each time, and she sent \$50 to his commissary account every month. Regardless of the cost, she shared that it was worth seeing him in person and being able to provide for her son during his incarceration:

It’s nice being able to see him and just being able to hang out and talk, so it was worth the money for that “eyes on” and make sure he’s doing okay. And it gives him a mental break from being out of the cell and being in a different part of the facility and having different things.

As these are just a few examples of the amount of money some family members were willing spend, others shared how they had to adjust and manage their finances in order to

continue and pay for visits. This led to some “doing without” and avoid purchasing things for themselves or holding off on household expenses. For instance, Alicia estimated that she spent upwards of \$10,000 in the first year of visiting her incarcerated partner:

I thought about getting a second job to afford visits. Once we realized how much I was spending, we had a serious discussion about finances and he asked me, “Do you want to spend \$10,000 on visits or on an apartment?” That really made me think and watch my finances more closely. So I had choices to make. Maybe I didn’t eat lunch out on Wednesdays anymore.

Rita echoed this sentiment when she explained how much money she has spent visiting her incarcerated brother for the past 12 years:

I did a lot of budgeting. There was plenty of stuff I would have liked to have done, but this was for my brother. I purposefully put off house repairs and vacations to help him out. I can do those anytime and he can’t, so you do without extras for the time being. Hell, I could have bought three luxury cars by now with all the money I’ve spent on visits! But you learn how to do your money the way it has to be done.

Miranda was forced to adjust her finances after her husband was laid off. Not wanting to cut down on the number of visits to see her daughter, or to lessen their amount of phone calls, she shared how she works the cost of visitation into her budget just like she would any other monthly bill or expense:

It’s always hard to take a huge chunk of money and put it in this visit, but it’s something you have to do. You want to see your child, so it becomes like a cell phone payment or a house payment. It becomes something you have to pay for, figure into your budget, and it has to be there. It’s not like it’s entertainment where you can just find something cheaper for a couple weeks or not eat out as much ... there’s no give.

While participants expressed that they do not enjoy spending all their extra money on visitation and communication, it was a cost they were willing to pay if it meant keeping in touch. In other words, family members engaged in their own cost-benefit analysis where costs associated with the visit were likely to have precedent over anything else. Lena estimated that she has spent close to \$40,000 since moving to the United States from Australia to be closer to

her husband and continues to put visits before anything else:

I put our visits before anything else because those visits are crucial. They are crucial in maintaining our relationship, to maintaining our marriage. We are able to spend 5 or 6 hours together and actually have a conversation. So I pretty much put that ahead of everything else, you know, which pretty much means I can never do anything for myself. Everything goes towards those visits.

Finally, over a third (38.7%) of sample participants confirmed that cost was their strongest barrier to visitation. One participant explained how maintaining the prisoner-family relationship was ruining her financially (Heidi). As a graduate student, she admitted to taking out over \$100,000 in student loans to help make ends meet:

It's ruining me. It's ruining me. I mean, that could be a house payment, right? This is ridiculous. I would be in a much better place financially and I've told him my only concern about us finishing out these next 5 years is financial because I have to balance so much on his costs ... it's horrible. It's my biggest burden, it's my biggest worry it's what keeps me up at night. It's horrible.

Time

Related to distance, another barrier was the amount of time it took to complete a visit; there is the time it takes to travel to the correctional facility, time spent waiting in the lobby and to go through visitor processing, the time actually spent in the visiting room, and the time spent traveling back home. Thus, it was common to hear participants ($N=25$) describe how a single visit is “... an all-day thing. It's a visiting *day*” (Jane). This led family members to regularly block out large amounts of time in their schedule in order to visit. As Edith described, “Now you've got this allotted time out of your day and set it aside ... to go see them. So this day is dedicated to just go and see him.” Other participants (Lena) confirmed this and explained how visiting days can take upwards of eight to 12 hours to complete:

I mean, it's not down the street so you have to plan your day. Usually, when I go to visit it pretty much takes up the whole day because I get there at 2:30pm or 3:30pm and I stay until 9:00pm. So you have to have that time because you're there for 5 or 6 hours, which is still not enough time.

Others described enduring over 12 hour days to visit from the time they leave for the facility until the moment they return home. Utilizing Sundays as her “long visit” day, Alicia laid out the timeline of her visit:

If I’m visiting on a Sunday, I’ll wake up at 6:30am and I’m usually on the road by 7:30am. I like to leave early, so I have time to get gas on the way there and to make sure I get there before count. If I stay the whole 9 hours, sometimes I won’t get home until midnight or 1:00am the next day.

Despite the taking an entire day to visit, participants spent an average of four to six hours actually visiting with their incarcerated loved one, confirming they typically spend more time traveling to the facility than time spent at the visit itself (Gordon & McConnell, 1999). Thus, for all the time family members committed to completing a visit, roughly 50 percent of it was spent with their incarcerated loved one. For instance, cognizant of the extra the time it took her to travel from out of state, Heidi realized: “I was driving 30 hours to see him for 16 hours.” This translated to some family members feeling as though they never got enough time during their visits. Lena followed up on her comment above and added:

Spending six hours with your husband is not really enough. It’s also better than nothing. So those six hours are ... we try to get in as much as possible in those six hours. Essentially, we live for those visits. We live from visit to visit, and if we have to miss a visit due to the fact there are only 7 visits a month ... those 7 days feels like 7 seven years. So the time that we do get is precious. It is really precious.

On the other hand, others discussed that they *do* get enough time together because it was physically and mentally difficult to visit for too long. For instance, Jalee would typically end her visits after four hours, otherwise the time spent sitting becomes unbearable for her and her fiancé: “The sitting there kills my back. The chairs are so uncomfortable.” Another participant shared a similar experience and explained: “The older that I get, I can only visit for about 2 hours. I can’t sit longer than that” (Jim). Sitting for long lengths of time was taxing on the inmate

as well as their movements are restricted, and they were not allowed to get up out of their seat for the entire duration of the visit. This was also an issue for Jane and her children. While she typically visits for five hours, her children could only manage to stay for about two and a half hours. Although she would love to spend more time with her husband she described it as "... it's enough time sitting down. If he could get up and move around it would be different. If he could get up and run after the children, it would be different. It would be way different." The condition of the visiting room also influenced how long visits lasted. Being forced to sit on uncomfortable furniture and in such close quarters did not bode well for the quality of visits. While Rita wanted to spend more time with her brother, she admitted there were times she wanted to leave sooner:

You never get enough time, you never do. But there were other times I couldn't wait to get out there! You know, you sit so close together ... and sometimes it felt like you were herded in like a bunch of cattle, you were seated like a herd of cattle – that's what you do – and it was just very uncomfortable. And you couldn't have a private conversation.

Having to endure long visitor processing times and other administrative "wait time" was an additional annoyance. Miranda, who visits her incarcerated daughter and is used to long wait times in the lobby, admitted "It gets a little crazy when you've waited 3 hours and still haven't gotten in." Putting up with additional wait times was hard for some participants ($N=4$) as they recognized time to be their biggest barrier. Diane explained how time is her biggest cost:

The biggest cost is my time. It is two hours of driving time. Once I arrive there, it's at least one hour to sit and wait for processing. Sometimes two hours or longer to just sit and wait because MDOC staff take frequent breaks during the day. There are at least three scheduled 1-hour breaks where they don't process anyone.

Family members did recognize one potential benefit related to time, which was the ability to spend "quality time" with their incarcerated loved one. Due to the removal of everyday distractions that participants were used to outside of the visiting room (smartphones, TV, etc.), they reported being able to focus on their visit. For instance, Alicia recognized

... there isn't a TV and so it creates a space and an opportunity to have meaningful dialogue. There is space to potentially have those conversations. I now recognize the importance of visits and how valuable time is and to use it wisely.

Relatedly, since Jim has retired, he has garnered a new sense of time, which has helped him appreciate visits with his son even more. He explained, "In a strange sense now that I'm retired, I have more time, so I have the opportunity to spend time. So it's kind of treasured, the visit is treasured." Thus, having the ability to spend quality time during a prison visit may have the potential to maintain social ties and strengthen social bonds.

However, while family members seemed to have a greater appreciation for time once they sat down with their incarcerated loved one, a few others ($N=5$) admitted how committing all the time it takes to complete a visit simultaneously took time away from other activities and being present for additional family roles. Diane explained:

I can only visit him on weekends, and it takes a whole day to have a visit. Time is a barrier because I work during the week and it's so far away to visit, which leaves me little time to get things done around the house and see other family members. All my family is, you know, in other cities. So it limits my contact with them, too.

Rita comes from a large family and shared how adhering to her visitation schedule took time away from her other family members and even from her own daughters:

It took away a lot of [outside] family time. You have to plan accordingly; you might not be able to attend a family outing or a family picnic because your loved one wants to see you. I never wanted to disappoint my brother and not come. There was a lot of things I missed, or I couldn't go to that involved my daughters.

These responses indicate that how despite benefits related to quality time spent during visits, the additional time commitment dedicated to the visitation process had a strong potential to take time away from other activities and devoting time and resources to the family member's life in the community (Christian et al., 2006). In turn, this could impact the social bonds and social capital available to prisoners' families due to weaker ties in their community. In order to

address barriers related to time, correctional departments should expand visitation to seven days a week and provide a variety of hours to allow for more flexibility in visitors' schedules.

Other Barriers

In addition to the barriers of distance, cost, and time, there were plenty of other barriers that disrupted family members' visitation patterns. Some of these included employment schedules, visiting with children, visiting with elderly family members, and dealing with medical conditions that exacerbated the pains of visitation. Nearly half of the sample ($N=14$) recognized other barriers as an impediment to their visits. For instance, a majority of these family members ($N=10$) recognized employment as a barrier, which forced them to schedule their visits during the weekends if they wanted to avoid using vacation time. This reduced time they had available to themselves to get things done during the weekend and prepare for the work week ahead. Mora explained:

When I'm there, I wish we could stay the full amount of visitation time, but it's very draining. But when he knows he still has three more hours that he could have a visit, I feel bad for leaving early but I've got to because of the drive and I have stuff to do. Visiting only gives me one weekend day to get everything I need to get done for the following week, so it does back things up. On the other hand, I feel bad we can't stay longer.

One participant did regularly dip into her vacation time as she needed extra time to travel to visit her son in a facility located in the Upper Peninsula. Meredith explained that although she utilized her paid vacation time, using it for visits never felt like a vacation: "I would still have to get up at 6:00am to have enough time to get there – which isn't really a vacation if you ask me." Relatedly, not having vacation days available or being forced to take time off work meant losing out on potential income for some, which could eventually lead to being no longer being able to afford visits. Heidi summarized this situation while recognizing the privilege she has not being tied to a full-time schedule:

I think their visitation is not conducive for those who work full-time. Like I said, I'm free on the weekends but I can only get two of those (visits) in most places and sometimes I can't even get them back to back, so it means I have to take off work. And if I'm taking off work – I'm lucky I have vacation time – for some people that's money out of their pocket. So I think they're just not conducive to people who work full time. And fuck! You need to work full time if you're supporting somebody in prison. You better be working all you can, are you kidding me?

Visiting with children and minors is another challenge prisoners' families must face.

Although almost half of the sample (45.2%) cared for dependent children, a handful explained that it was not always easy taking them along for visits ($N=8$). One participant (Faith) who recently had a baby with her incarcerated partner, explained she learned how breastfeeding was not allowed in the visiting room and that she would have to prepare formula from a pre-made mix while in the facility: "I didn't know it wasn't allowed before I went. They really want you to use the formula and they are supposed to give you the water, I guess."

Relatedly, some children were not allowed to visit due to issues related to paternity, which created difficulties in forming bonds with stepchildren and other kin relations. As Jalee's fiancé was not the father of her children, she could not bring them on visits and therefore must secure childcare each time: "My mom helps watch the kids, but she can't do it all the time. It takes her an hour to get here. So I end up having to cancel my planned visits about once a month because I can't find a babysitter." Limiting parent-child relationships to immediate family also prevented some of Jane's relatives from bringing their kids to visit their uncle (Jane's husband): "I think it's crap that nieces and nephews can't come. My sister is currently pregnant so my husband can't see her kids until they're 5 years old?! What the heck is wrong with your people? Why?"

However, visiting with adolescent children was also a challenge. Participants described how not only are they older and can process the visitation experience for themselves, they were also busy with school, homework, and extracurricular activities that did not allow for extra time

to complete a visit. For example, Lena's 16 year old son would come to visit her husband with her on Mondays, but he did not enjoy sitting in the visiting room "for hours and hours" and so she limited their time:

Visiting on Mondays during the school year is difficult and it becomes complicated. There have been times where he's asked if it's okay that I go without him. He loves his stepfather, but he has a life to live. I'm worried their bond is becoming stagnant, though. It is very hard to build a bond – especially between a parent and a child – when that person's not there. Seeing them once a week, or times a week, is not enough time. It's not enough time to have a relationship.

Visiting with elderly family members proved to be just as difficult. Over a third (35.7%) of the 14 narratives described instances where the needs of the elderly were not taken into account and threatened to affect their visitation. In addition to their age, some participants' parents had mobility issues and could not physically get to the visiting room, which was located upstairs with no elevator for them to access (Mora). While others experienced issues with dress code policies when they wanted to bring in an extra sweater or blanket (Jim). Other items such as Kleenex and hankies were not allowed to be brought into the facility (Diane). Visiting with an elderly family members also reduced the ability to both wait for a visit and complete a visit. For instance, Kathie pointed out "One of the longest times we waited to get into the visiting room was when John's elderly mother was with us. She was in a wheelchair and on oxygen."

Finally, a few participants ($N=3$) explained how medical issues presented additional challenges. For example, the need to take medication at certain times, or getting processed wearing any supportive gear such as a knee brace, retainer, using a wheelchair, or having an internal medical device such as defibrillator caused a variety of issues. This was the case for Edith. During one of her visits, her defibrillator set off the metal detector, which had not happened before:

When the alarm went off, the prison guard asked if I had any documentation. Since no one had asked me that before, and I didn't have any documentation on me, I got held up in processing for a bit. I remembered I carried a card letting people know of my medical condition and thankfully they accepted it. This prepared me for other hold ups down the line. You know, you just kind of get in that frame of mind, like, stop being this person out here and you start being this person in here [prison] because this is what I've got to do. I don't want to step outside the lines.

Rita disclosed a time when she showed up wearing a leg brace due to a recent surgical procedure.

She presented a note from her surgeon as well as a letter signed by the Warden of that facility.

Although she had followed the procedures and was processed through on previous visits, the staff working that weekend did not accept her paperwork:

They didn't accept my documentation or my letter. They gave me a real hard time and threatened to terminate my visit if I did not comply with their request to remove my leg brace. After some back and forth I eventually got through, but I decided I couldn't handle visits anymore after that. I admit I didn't see my brother during the last 5 months of his sentence because of that.

These responses confirm previous recognitions that prisoners' families are not a homogenous group (Murray, 2008). Thus, correctional departments should be more cognizant of the different needs of visitors and again strive to be more welcoming to the needs of employment schedules, those who visit with children or elderly relatives, and those who need additional assistance due to their medical conditions and needs.

Institutional Barriers

In addition to traveling long distances to get to the facility, bearing the brunt of costs associated with maintaining the prisoner-family relationship, and adjusting their schedules to be available during visitation hours, family members of prisoners must then challenge institutional barriers once they arrive to the correctional facility. These barriers include administrative rules surrounding prison visitation such as visitor processing, adhering to dress code policy, the termination of a visit – or worse – loss of a visits, but also the rude treatment by prison staff.

When asked if any institutional barriers interfered with their visits, all participants ($N=31$) shared at least one experience where they were hindered by correctional staff and/or the administrative rules surrounding visits. Although he has been visiting his incarcerated son for 13 years and doesn't encounter too many issues with institutional barriers, Jim concluded that "... the administrative rules don't allow the family to easily visit."

To begin, a majority of the sample (90.3%) reported issues with inefficient visitor processing. While also a barrier related to *time*, family members were simultaneously confused and aggravated with how long it would take to process them through to the visiting room: "Their practices make it very difficult to spend time with your loved one. You know, when you've got a room full of people and they could be visiting, there's something wrong with this procedure" (Geri). Wait times to be processed ranged from 15 minutes upwards to three hours. In order to avoid long processing times, participants would pay attention to the administrative happenings during visitation hours, such as shift change and "count time" where the facility temporarily shuts down and prison staff must individually count and confirm the placement of all inmates: "You have to get there before count, otherwise you wait forever" (Sharon).

Most of the sample also experienced dress code violations (80.6%). As the sample was primarily women visiting incarcerated men, there were several accounts of how their clothing, and by extension their bodies, were scrutinized at each visit. Lena remembered during the first time visiting her husband, she was reprimanded for wearing jeans that were considered to be too tight:

I didn't purchase any other clothing because I didn't think what I was wearing would be a problem. But I guess I wore "skinny jeans" and when I arrived the guard looked me up and down and commented they were too tight. I tried to explain I had just come from Australia. This is what I have because this is what I usually wear. She just said, 'They're too tight,' without any explanation.

Furthermore, dress code policies were not explicitly made aware to visitors and if they were, they were inconsistently applied. As a response to the how arbitrary these rules could be, some women ($N=8$) would plan ahead and bring a change of clothes just in case:

I was denied twice for dress code violations. The first time I showed up, I didn't know, and of course the guards didn't tell me where I could go to get another outfit. I didn't know the area I was in and so I lost a significant amount of time trying to find a clothing store nearby, a Dollar General, *something*. I finally did and came back an hour later. While I was going through processing, the guards told me there was a Wal-Mart just 5 minutes away. I wish they would have told me that before I left!

Some would even designate certain clothes their "visiting outfit" or "prison uniform" and wear it repeatedly in order to meet dress code policy requirements: "This will get me in" (Edith).

However, due to the discretion of prison staff, these outfits and uniforms did not always pass the test. For instance, Jalee recalled having her visits affected by dress code policies on three separate occasions. As a way to avoid this in the future, she described how she started wearing similar combinations of clothes in order to get into the visiting room:

I call it my 'prison uniform' and I always make sure I have my uniform ready. But because the rules are so inconsistent, I make sure to always ask the staff for their feedback on what is okay to wear and what is not okay to wear.

At the same time, however, she expressed frustration over not being able to wear what she wanted to wear: "I want to feel comfortable but most of the time I don't. Most of the time I try to hide it and make the best of it, but I don't feel comfortable at all. (Jalee). Realizing that women were experiencing dress code policies overwhelmingly compared to men, Alicia commented how MDOC does not seem to trust female visitors: "Visitors are treated so rudely, especially women. It's assumed that we are naïve, or bringing in drugs, or we're just looking for a boyfriend."

Additionally related to gender, one participant in the sample discussed issues related to menstruating while visiting. Because visitors were not allowed to get items out of the locker until they are ready to leave the facility, Lena had to explain her situation to an officer:

I needed to get a feminine hygiene product out of my locker. I told an officer of my need and they weren't sure what to do. This officer then had to go tell his Sergeant and go up the chain of command, I guess. By that time, there were four correctional officers that knew my personal business. So now what they tell people to do is you now have to go and say to the front desk person that you have to get something from your locker. You then have to get it and how it to them – and then you can go to the bathroom. It's a total invasion of privacy. They didn't inspect it once they allowed me to retrieve it from my locked, but I'm surprised they don't go to the bathroom with you.

She suggested that one way around this was for correctional facilities to simply put a vending machine in the bathroom for feminine hygiene products. These responses indicate some of the *gendered barriers* that women visitors experience when compared to men.

A more serious institutional barrier is the termination of visits and loss of visits. Over two-thirds of participants experienced at least one terminated visit (61.3%) while nearly a quarter of the sample (25.8%) were not able to see their incarcerated loved ones at the time of their interview due to having visitation privileges taken away. Visits were terminated for various reasons but primarily for overcrowded visiting rooms. However, others described having their visit terminated due to what was deemed as “inappropriate behavior” or “sexual misconduct” by prison staff. This occurred to four women in the sample. Jalee explained one such incident:

I was getting ready to leave and he kind of turned to me and asked me to marry him. I got really excited and I kissed him. He didn't even come over to us, he yelled out ‘Visit terminated now!’ and everybody looked at us and I was so embarrassed. I was so excited, and it just went to guilt and embarrassment. I just wanted to hide my face and get out of there because the guards are screaming at us. It was horrible.

Due to the Department's policy of revoking visitation privileges for inmates who receive two or more substance abuse tickets, Charles and Connie have endured loss of visits on two separate occasions, which resulted in them not being able to physically see their son for a total of four years. At the time of their interview, they had not seen him for approximately two years. Other loss of visits experienced for bringing contraband into the facility (Deanna and Miranda).

While participant responses thus far have hinted at how they are treated by prison staff,

all participants ($N=31$) shared an experience of rude treatment when they arrived at correctional facilities. Several described feeling humiliated, violated, treated like they were “less than” and overall just “dehumanized”: The policies that they follow and how they treat people there are set up to make you feel unvalued and dehumanized” (Diane). John felt a similar way and recognized rude treatment by prison staff was one of strongest barriers: “One of the big problems, for me, was the humiliation of the process. And I know there are some people who won’t to visit and prisoners who don’t want their family to visit because of that.” However, family members did not feel like they could speak up and say anything out of fear of retaliation and instead just dealt with it: “So dealing with these people is very frustrating. Often I do want to say something but can’t because the retaliation can be brutal” (Lena).

Fear of retaliation was on the minds of several participants as rude treatment tended to manifest itself into punitive behavior in order to maintain safety and security of the facility at all times. Some of this punitive behavior has been discussed thus far such as the lack of accurate information, strict dress code enforcement, and an unwelcoming attitude from most prison staff. In short, sample participants confirm what Comfort (2003) has recognized as secondary prisonization. Their treatment was analogous to the prisonization their incarcerated loved ones experience. Lena explained how she felt under the control of the prison while sitting in the visiting room with her husband:

You’re constantly monitored in there. When you go into a visiting room, you have cameras at certain angles always pointing at you. You have staff that are sitting in a clear bubble that will watch you. You have a correctional officer sitting on a podium that sits there and watches you constantly. So you’re not at ease. You’re not made to feel comfortable in any way, shape, or form.

Trying to understand why they are treated so badly; Heidi recognized that the shame and stigma applied to them at macro-level has direct effects on the secondary prisonization they experience at the micro-level:

I think the pervasive issue in our country with inmates and anybody who is associated with inmates is that they're less than, they're less than human. They made a mistake, many of them, but not everyone in prison is guilty. But they made a mistake but that is not them and therefore I don't need to be discounted, you don't need to be discounted, and the people who support them don't need to be discounted, accordingly. And I think that's pervasive and that's what give permission for the COs and the judge and the wardens to treat everybody like shit because that's okay.

One strategy that aided in addressing institutional barriers involved some family members ($N=6$) forming strategic relationships with prison staff. This helped the visitation process go more smoothly if they were able to see the same staff more regularly and become acquainted with them: "You have to maintain a sense of keeping your cool. As long as you're always respectful and courteous and, you know, you get to know them and be friendly – it's very beneficial to you." (Jalee). This also helped prison staff become acquainted with their situation and the family unit as a whole. Family members who were persistent in their visitation saw the benefits:

The more persistent you are and showing them that, "I'm going to come every week no matter how rude you are to me so get used to it!," and they see that you're actually going to come every single week, they finally respect you. They finally decide, "Okay, this person does care about this incarcerated person. Maybe they're not so bad if this lady's going to keep bringing her children." So it's almost like I have to prove myself to them. That's what I've gathered in the three years of doing this. They don't pick on us anymore.
– Jane

This was also a technique utilized by family members who were lucky to avoid experiencing having their incarcerated loved one transferred across facilities. Jim has been able to visit his son at the same facility for all of the 13 years he has been visiting. Thus, he has been able to build working relationships with prison staff: "But now that I've been coming so often, there's a

relationship that's been built there. For example, I know he's retiring in a year and half, and should my son be there, I doubt anybody will have the depth of experience that he has.”

However, should their loved ones end up being transferred, these relationships were lost, and family members had to go start building strategic relationships all over again at a new facility.

Taken together, these responses confirm the institutional barriers recognized in the literature related to institutional rules and regulations of conduct that can be intimidating and vague, policies and practices that hinder visitation programs, as well as experiences of secondary prisonization (Pleggenkuhle et al., 2017; see also Arditti, 2003; Braman, 2004; Christian 2005; Comfort, 2003; Duwe & Clark, 2013; Fishman, 1990). This has strong implications for policy directions, which are discussed further in Chapter 6. In the meantime, both correctional departments and visitation scholars should pay additional attention to the perception of institutional barriers by prisoners' families and how they understand and internalize encounters with correctional systems and their staff.

Emotional Barriers

As there are a myriad of physical barriers to visitation, family members may not always recognize some of the emotional barriers that could influence their visitation patterns. This subsection describes responses interview participants gave describing how they felt throughout the visitation process (before, during, and after). Out of the 26 interview participants who discussed emotional barriers, results demonstrated various emotional reactions to the visitation process including anger, resentment, depression, love, and empathy. Some of these participants ($N=3$) summarized the range of emotions they felt akin to “being on an emotional rollercoaster. These emotional swings may have been a result of trying to cope with lingering feelings of shame and stigma that are associated with having an incarcerated loved one. At the time same,

others actively ignored their emotions or suppressed what they were feeling in order to avoid disrupting the visit and the emotional state of their incarcerated loved one. Finally, it was observed how emotions could be a positive experience, as they helped serve as a form of motivation for some family members to keep visiting.

When describing how they feel before their visit, some family members were excited and retained positive feelings:

It's a feeling that's indescribable. You get butterflies. I just get so excited that I feel like my body is moving faster, like, I'm just so excited to get out the door and get there. I'm going 80, or 90 miles per hour on the freeway to get to this man! It's so much happiness but at the same time it goes by so fast that I've got to cherish every single second that I'm there. It's an exciting feeling – Jalee

It really is the best feeling when you know you're going to see him the next day. Just know that he's doing okay ... and knowing how much it means to him." – Meredith

Others, however, were nervous and tried to handle the anxiety they feel when preparing to visit:

I start the night before. I make sure I take my anxiety medication. It's just a real drain, like if you ran a marathon. You're just so wiped out – physically, mentally – and you're just trying to refocus and get back on track. I've got to put that visit behind me and, you know, I have to take care of myself now. I have to remind myself that he's doing okay this month – Mora

Family members generally felt positive emotions during the visit (76.9%) and utilized their time together to catch up, have a good conversation, and play games. This helped participants keep in good spirits and appreciate their visits:

Actually, 99 times out of 100, I love it. We have a great time, we laugh, we joke, we gossip. I actually think that I'm spending more time face-to-face with my son right now than anybody else does on the outside sitting down face to face talking. And I always remind myself of that. – Pete

He became a card player while in there and we made up our own game. We just had a blast and found ourselves laughing and I think we were unusual in that respect. I think for a lot more people it was more somber. – Meredith

Participants recognized other positive emotions they felt, which helped provide some with the motivation to continue visits. For them, visits helped strengthen their relationship and maintain strong bonds. Some even discussed how visitation helped them become closer to their child despite their incarceration:

It's definitely a benefit. Like I said earlier, it's the whole idea of sitting down face-to-face with someone and talk with them – with nothing else happening. No TVs ... you're not at a barbecue ... you're not on the way out the door, you know? It's a strange thing but that definitely strengthens a relationship, I think, or it can. To sit down and talk to somebody about whatever comes to mind for four hours ... try it. – Pete

In an odd way, over the years I have spent more time with [name of son] because he's locked up and wants to see me than he might be if he were on the outside and a college student in a different state. That's kind of an odd benefit, I think. – Jim

On the other hand, it was difficult to not get emotional when it came time to leave.

Furthermore, these feelings of sadness and longing lasted various amounts of time for participants. Jalee explained how hard it was to say goodbye to her fiancé when their visits were over:

Sometimes I just do nothing but cry. Sometimes I leave there completely in tears because I want to take him home with me. It can last days, it can last weeks, it's hard to say. It can last completely up until the time I see him again.

These feelings of sadness also lasted for Lena, who explained how hard it was to manage the emotions for both herself and her incarcerated husband as she tried to “survive on the outside”:

I mean, I've had moments where I've bawled my eyes out for two hours because it does get to you at times, it does get to you. I don't have him here to help me, so it does get emotional – for the both of us. His frustration is that he isn't here, and he wants to be a husband, and he wants to do all of these things and he can't.

Guilt was another emotion that family members had to negotiate during their loved one's incarceration. While they wanted to visit regularly, they also realized how physically and emotionally taxing it maintain visitation. Feelings of guilt led a few participants ($N=3$) to at least

think about temporarily stopping their visits or taking a break, but once they realized no one else would visit except them, they felt obligated to continue. Edith explained:

I admit, there were times I thought about stopping my visits. But my son and I kept our routine and since we were both committed to it, I kept going. But I also was the only one in our family who still visits him, so I felt obligated to go. Knowing others with an incarcerated loved one, we always say, “You’re locked up also” because in a sense you’re treated like that. Your life is kind of like ... you’re locked up, too, or on pins and needles just because you don’t feel like you have control over anything. I guess that’s what it is. Everything is in someone else’s hands, or at least you feel that way.

However, guilt was also felt by inmates as they were aware of everything it took to complete a visit: “I don’t think he had any idea how heavy the burden was. If he would have, he would have never asked me to visit. He would have felt guilty about it” (Alicia).

Negative feelings arose for half of participants such as anger, resentment, and depression (50.0%). More importantly, these feelings arose at different times over the course of visitation for different participants. For instance, although Jim is a longtime visitor, he admitted to experiencing major depression in the past year, which started to affect visits with his son:

I’m always looking forward to seeing my son, so that’s a good thing. Although lately I’ve been in a clinical depression, so I’ve been very concerned about how I’m going to make *him* feel. So it’s been more difficult lately going to visit him.

One participant recognized how depressing the situation was, but suppressed these feelings in order to be there for her incarcerated son: “It could lead me to be very depressed if I let myself think about it because things seem so hopeless. And I can’t succumb to that. I have to be there to help my son through this” (Diane). Rita, who spent 12 years visiting her brother, expressed how angry she was about the entire situation. Like Edith, she was the sole family member who maintained regular visits. While she admitted she loves her brother, she expressed anger and frustration over dealing with his incarceration in the first place: “I’m so angry. It’s just a mix of

thing: ‘How did we get here?’ ‘Why do I have to go and do this?’ ‘I have to be away from home.’ I get myself so worked up that I have stomach problems.”

Experiencing a wide range of emotions led some (11.5%) to describe having an incarcerated loved one similar to “being on an emotional rollercoaster.” For instance, Edith admitted she felt sad when she thinks about visiting her son and all the barriers involved in getting there in the first place, but at the same time, she is both happy to see him and nervous that something will go wrong during the visit: “It’s just an emotional roller coaster. You’re trying to enjoy your visit and not feel anxious by looking at the clock on the wall. You also have to mentally and emotionally prepare yourself to leave when it’s time to go. It’s a lot to handle.”

These feelings lingered and were constantly on the minds of family members. Connie explained:

My emotions range from sadness to fear. Once in a while I feel grateful for one tiny thing that may have been positive or may have been helpful, but there is a lot of fear, apprehension and what’s going to happen next. The unknown. And it just lingers.

Even once their incarcerated loved ones were released, participants’ emotions remained. Rita shared how she started to see a therapist in the past couple of years and continues to do so now that her brother has been released on parole: Therapy! Therapy, oh my gosh. I feel like I had a nervous breakdown when he went to prison. I don’t remember certain parts of it, and some parts I do. Sometimes it felt like a dream. It was so stressful. Even now it’s like you’re on an emotional rollercoaster.”

Findings related to emotional barriers demonstrate that in addition to the physical barriers of distance, cost, time, and institutional barriers, prisoners’ families must deal with negotiating a range of emotions (Tewksbury & DeMichele, 2005) that can arise related to the incarceration experience. This confirms how incarceration can be a stressful and disruptive experience for family members (Hairston & Lockett, 1987), often forcing them into a state of emotional crisis

(Sack et al., 1976; Schwartz & Weintraub, 1974). Despite some participants reporting positive feelings, maintaining visitation also produced levels of strain for both the inmate and visitor (Arditti, 2003; Christian, 2005; Fishman, 1990; Pleggenkuhle et al., 2017) as well as feelings of anxiety, worry and mental exhaustion (Pleggenkuhle et al., 2017; see Christian, 2005; Comfort, 2003). At one point, one participant (Rita) likened her incarceration experience to posttraumatic stress disorder: “That has been one of the biggest, hardest things I’ve put my family through. My health has deteriorated because of all this. I feel like I have PTSD.”

Taken together, emotional barriers may prove to be even more difficult to overcome for some family members when compared to the physical barriers they face. Or, when emotional barriers coincide with physical barriers, it could perhaps be the ultimate deciding factor that dictates if a family members will complete the visit – and if they do – their emotions could potentially influence the overall quality of the visit. Furthermore, as some participants discussed how they suppressed their emotions in order to focus on their incarcerated loved one, results also demonstrate how families may go through cycles of visiting that are partly determined by the strain that visiting puts on family members’ emotional capacity and resources (Christian, 2005). However, as results in Chapter 5 discuss, some of these emotional barriers, along with the physical barriers previously described, may be alleviated by becoming involved in support groups.

CHAPTER 5: UTILIZING SUPPORT GROUPS

As the previous chapter presented the barriers associated with navigating and managing the visitation process, Chapter 5 highlights results for how family members of prisoners utilize support groups, including their advantages and disadvantages, and how they are able to address barriers to visitation through their membership. Overall results demonstrate how prisoners' families active in support groups are able to navigate and manage the visitation process *together* through the informational and emotional support they receive, as well as the ability to share and learn strategies from one another. As some of these groups support advocacy efforts and encourage family members get politically involved, this study also examined how prisoners' families attempt to address barriers to visitation through policy directions.

Table 6 below describes the frequency of themes related to support group membership that appeared across interview narratives, as well as visitor experience and which groups they are members of. To begin, nearly all participants ($N=27$) were classified as novice visitors as they were dealing with their first incarceration experience. Only four participants were recognized as “expert” visitors as they had experienced at least one prison sentence before and thus had some knowledge and experience related to the visitation process. Although most family members were novice visitors, they, along with a few expert visitors, were recognized as seasoned visitors ($N=29$) due to experience gained from visiting their incarcerated loved one for one year or more and their ability to share strategies related to the visitation process.

Among prisoners' families interviewed, support group membership was primarily held with Citizens for Prison Reform (CPR), either in person at monthly meetings ($N=12$) or by utilizing their website or Facebook page online ($N=7$). Two CPR members interviewed (Mora and Pete) were also members of the Family Advisory Board (FAB) along with Jim and Alicia.

Table 6: Support Group Membership by Interview Participants (N=30)¹¹

	Frequency	Percent
Visitor Experience		
Novice (First incarceration)	27	90.0%
Expert (Have experienced one or more sentences)	4	13.3%
Seasoned (Have visited one year or more)	29	96.7%
Support Group Membership		
CPR	12	40.0%
CPR (Facebook)	7	23.3%
Detroit People's Task Force	1	3.3%
FAB	4	13.3%
Humanity for Prisoners	7	23.3%
Michigan Citizens for Justice	3	10.0%
Michigan Families Along for the Ride (online)	3	10.0%
Prison Fellowship	1	3.3%
Other online groups	2	6.7%
Advantages and Disadvantages of Membership (RQ2)		
Normalization	8	26.7%
Learning Strategies	15	50.0%
Motivation	12	40.0%
Emotional Burnout	6	20.0%
Addressing Barriers Through Support Groups		
Informational Support	11	36.7%
Emotional Support	8	26.7%
Advocating for (Policy) Change	16	53.3%
Addressing Barriers Through Policy		
Active in Legislative Education Day	10	33.3%
Active in Family Advisory Board	4	13.3%

¹¹ Out of 31 interview participants, only 1 admitted to not using any support groups to aid in the visitation process. Thus, frequencies and percentages were calculated based on the 30 interview participants who utilized support groups.

Additional support groups that held monthly or bimonthly meetings included Michigan Citizens for Justice (MCJ) ($N=3$), Prison Fellowship ($N=1$), and one participant (Marlene), formed her own community group, the Detroit People's Task Force. In addition to the CPR Facebook page, participants also disclosed if they were a member of an online support group. These including Humanity for Prisoners (HFP) ($N=7$), Michigan Families Along for the Ride ($N=3$), and other private groups made specifically for prisoners' wives ($N=2$). Only one interview participant (Betty) did not consider themselves to be involved in a support group.

Advantages and Disadvantages of Support Group Membership

The goal of the second research question was to capture some of the advantages and disadvantages of support group membership among prisoners' families. Interview participants were asked a series of open-ended questions related to what support groups they utilized, if any, what resources did they provide, and overall, what these support groups mean to them. Although participants utilized different support groups, including those only available online, three main advantages of membership were recognized: 1) normalization, 2) learning strategies, and 3) motivation. While few disadvantages were discovered, one major drawback was the emotional burnout felt by longtime members and those serving in leadership positions with CPR and FAB.

Normalization

Similar to how Condry (2007) discussed how family members would engage in "normalising [sic] accounts" of the violent crimes conducted by their incarcerated loved ones, support group members reported feeling of normalization and recognizing that it is okay to have a person you love in prison. This is an advantage of support group membership that assisted participants in dealing with feelings of shame, stigma, and guilt, and in some cases, helped them

talk about it with others. This was the case for approximately a quarter of the sample (26.7%) who reported gaining feelings of normalcy through support group membership.

For example, as Charles and Connie had never experienced the criminal justice system before, their son's incarceration came as a big shock to them. Feeling secretive and protective of this information, Connie eventually accepted their situation as "the new normal" and that they must figure out how to maintain a relationship with their son while he is in prison. Joining CPR has helped them with this process. Connie shared how she and her husband's lives had changed but talking it out with others who are going through the same thing helps:

This is the new normal. Our world was turned upside down when Rob went to prison. And about two years later, our daughter died from pancreatic cancer. So we are trying to normalize catastrophic situations that are our lives. These are our lives. But it helps a lot in regard to normalizing – to talk with others. I think Citizens for Prison Reform is unique in that that is its big focus: To be able to talk. Whether it's before, after, or during the meeting – to be able to talk and to understand. If we were to tell a neighbor, they would have no understanding. In fact, they might not believe us. We choose very carefully who we do talk with.

Viewing CPR as her family, Mora explained how other members help motivate her to keep going and to not be ashamed about having a son in prison. Her feelings of shame and stigma have subsided a bit, which allowed her to feel more "normal" about the situation: "I feel a bit more normal because there are other people that can actually relate to what I'm going through, which is really nice." John and Kathie also felt this way when they originally joined CPR, but more so when they got involved with Michigan Citizens for Justice. This helped them specifically connect with other family members who have an incarcerated loved with a sex offense or a parolee who is on the sex offender registry list. Because they are very careful in what groups they get involved with and the people they socialize with, finding MCJ in addition to CPR was satisfying for them:

There is some shame involved and you don't feel that free to talk to the average citizen about it ... so finding a group of like-minded people where you can talk about it – the years, the problems – and they will understand is very satisfying. Plus, I'm hoping that by having people in number coalesce around an issue that perhaps things can be improved or change. That we can advocate for change.

Edith found similar support, and normalcy, when she joined Prison Fellowship after her son went to prison for a second time. Feeling a mixture of shame, anger and embarrassment, becoming a member of this group helped her accept her current situation:

A lot of times you feel that stigma of having someone incarcerated and when you're with these groups, they make it okay for you to love whoever your person is – and you need that. You need to know that it's okay that you love this person and you're not going to give up on them.

Although she does not attend monthly CPR meetings, normalization was also a part of online support groups. Jalee explained how private Facebook groups online and other social media outlets has helped her find other people, particularly women, in similar situations. She explained what she gets out of these online groups and how helpful they are for her:

There's a lot of support because all these people – they don't judge you. You know you can talk about 'This is what happened at the visit today ...' and 'Does anybody have an idea of who I can contact to take care of this problem or incident that I just had?' They're resourceful, you know. They'll be like, "You need to write this person, you need to explain the situation, and you need to do this, and they don't judge you. They give you support, advice, and it's really – it's so much easier. Before, I wanted to talk about my visit, but nobody understood. These women you can talk to. It's good to talk to people that understand.

This group was also helpful for Heidi, which helped her cope with her husband's incarceration as she was also concerned with judgment from others now that she is a "prison wife":

But it got me through for a while because then at least I was around some level of normalcy and because nobody in my world knew, I didn't have anything about it that was normal or accepted and it was a really lonely part of it for that period of time.

Learning Strategies

A second advantage of support group membership is that is allowed prisoners' families to share and learn strategies related to navigating and managing the visitation process. Half of the sample (50.0%) described instances where they learned strategies from support groups, whether in person or online. In turn, this helped them address the barriers they face, especially related to institutional barriers and the inconsistency of rules and regulations. Once he finally got connected with CPR, Pete explained how he became more aware of issues surrounding visitation, and how they can vary from facility to facility. This helped him prepare to travel to a new prison when his son was transferred to the Upper Peninsula:

It made me more aware that there are a lot more issues going on out there at different facilities that I had no idea about. It made me more apt to make sure I cover all my bases when he's transferred before I walk in the door whereas before I might not have, so it's changed in that way. I make sure I have all the details when I'm going to a new place to visit.

Over time, Pete transitioned to a seasoned visitor and due to his position on the CPR board and he became a trusted resource for other family members of prisoners. Meredith stated how she was aware of CPR when her son first went in and how she initially reached out to Pete for help in the beginning: "I sent him an email and he wrote a lengthy response that had lots of helpful information in it. While I had already found of this information online, I appreciated how organized it was and the time he took to write back to me."

CPR monthly meetings provided the time and space for family members to come together and discuss issues related to visitation and the incarceration experience. For instance, during one meeting in December 2016, members discussed how a 15-minute phone call can cost up to \$15 in Michigan. Lois shared in that meeting, as well as a quarterly FAB meeting held the very next month, how she would purchase credits at the maximum amounts in order to avoid a higher

surcharge: “Lois mentioned that in order to save some money, she deposits the maximum amount of money possible (\$99.99) to pay a processing fee of \$6.95. Any deposits over \$100.00 require an \$8.95 processing fee” (FAB quarterly meeting, 1/27/2017). In another monthly CPR meeting, she highlighted other topics and strategies the group has discussed that other support groups have not: “PTSD and post-incarceration TSD; how to makes families aware that ‘it’s not over’ and life continues; the need to recognized psychological/emotional barriers when incarcerated loved ones are released back home; and connecting offender success, reentry, families, and mental health together” (CPR monthly meeting 6/16/2018).

Online support groups also provided a space where prisoners’ families could learn various strategies from one another. This was the case for Heidi and the private Facebook page she used geared towards prisoners’ wives: “I think it was helpful in the beginning just to try to figure out what to expect when I had never done and didn’t know what to expect.”

Motivation

Once family members have been involved with support groups for some time, their membership can eventually lead to motivating them to continue their visits ($N=12$), regardless of the barriers that continuously challenge them. When family members were feeling sad, frustrated, or apathetic about the visitation process or the collateral consequences of having a loved one in prison, others were there to listen and provide advice and support, which helped boost their spirits and encouraged them to not give up. This was the third advantage of support group membership. Edith recognized the motivation she received from other members in Prison Fellowship: “From going to these meetings I learned that they need this support, you know, to keep their heads on straight. It’s important on both sides to keep each other going.”

Keeping each other going was a sentiment that motivated others to stay involved in support groups and give back. Being able to share the knowledge he has gained from visiting his son for the past 12 years with others motivated Pete to retain membership with CPR and stay involved:

Even if there's nothing specific happening or working towards anything specific in any given moment, it still inspires me ... just the fact that there's so many people out there every day dealing with this and even though I know it – going in there and hearing them and talking about things that other people are doing – even if I'm not directly involved – it still inspires me. Even if it's just me answering an e-mail from somebody that no one's ever going to know about – it still gives me that extra little kick in the butt, so I think personal inspiration is really where it's at for me.

Kathie echoed this sentiment and explained how she enjoyed being able to share her knowledge and pay it forward to others:

Three things I think I get from the support group are the emotional support, the informational support, and the next thing would be the honor and gratitude that I feel for being able to help other people. That I've been put in a situation that I can help someone else makes me feel good to be able to help someone else. Finally, that together, we are more powerful and maybe change something.

Notably, even when family members feel discouraged by the visitation process, Lois reminded other CPR members the importance in recognizing when they are able to help another family: “I know it's discouraging when we can't move forward, but ... these are the moments that help me keep going.”

A few participants ($N=3$) even went as far to express how vital their support group membership was and described it as being a “lifeline” or “lifesaver” for them. This helped them to better cope with having an incarcerated loved one and motivated them to maintain visitation.

Mora explained:

It's a life saver! Because if I have questions or say, “This is what happened ...” or “Have you encountered this at this facility?” or “Give me some input on how I should handle this officer? Should I report this or is there going to be retaliation?” At least you've got something you can throw these ideas out at.

Another participant (Edith) used similar language when describing her membership with Prison Fellowship: “Like I said it was my lifeline. Everybody who has somebody incarcerated needs to be a part of support group because it just makes a difference in how you’re able to maneuver your life because your life is different.”

Emotional Burnout

While few disadvantages of support group membership were recognized, one negative aspect arose for some members in the form of emotional burnout. Some participants ($N=6$) reported experiencing burnout and began questioning how much longer they could continue the leadership roles. For instance, one CPR monthly meeting (7/21/2018) was devoted to discussing emotional burnout and what family members could do to address it. Suggestions included: “Consolidating support group efforts with other community groups and statewide organizations for assistance to possibly achieve strength in numbers through recruitment efforts.” Lois, who created CPR in 2012 and has held a leadership position since its inception, recognized how “... families have been on their own when it comes to navigating and managing visitation” (CPR monthly meeting, 5/19/2018) yet began questioning her personal capacity to keep devoting time and energy to both the group and the cause. This led her and other CPR board members to hold a special monthly meeting to address the issue of burnout and what to do when you experience it. While the group did not come up with any concrete solutions, one member overheard at the following month’s meeting that seemed to sum up the group’s feelings: “The lack of success is very draining.” (CPR monthly meeting, 6/16/2018).

Furthermore, family members of prisoners already perform high amounts of emotional labor. For family members active in support groups, and especially those in leadership roles, led to their constant performance of emotional labor for themselves, their incarcerated loved ones,

and other prisoners' families. Recognized as a well-seasoned visitor and reliable source of information, both Lois and Pete were the main points of contact for CPR. In their limited spare time, they answer phone calls, emails, and other inquiries they receive from other family members in need of assistance. Although he is happy to help, Pete confirms this as his major disadvantage of support group membership:

They want it all tied up in a little bow. Just like any other volunteer thing, people will suck every minute out of your day for the rest of your life if you let them. To help them with their one little piece of the pie, you know. So that's a disadvantage. I can do this, and I can really help, but I can't do this for everybody. You may be selling people short, but you have no choice, so it adds a whole new dimension to the emotional aspect of you dealing with your thing. Or sometimes people have a legitimate problem and they want you to go to bat and pitch and bitch about this – and you think, “Well, no, I've got my own inmate to worry about having to possibly be retaliated against or my name's attached to something.” So that's a whole other dimension that most people don't have to worry about.

Emotional burnout also affected FAB members. Although the group has been informally meeting with MDOC for upwards of six years, members wondered “How much more can we do? Are we are truly being listened to, or how much of this is just busywork to make ourselves *feel* like change is occurring?” (Jim, FAB quarterly meeting, 5/19/2017). Heidi, who was planning on joining FAB when it was created, realized how immersed she has become in the incarceration experience:

I was going to be part of the Family Advisory Board as an out of state person. My opinion was needed but it was really hard for me to get to meetings. So I try to get involved in those ways to make some changes and it's ironic because I'm so sick of prison, I am so sick of prison. And yet, I have all of this that I have to do something with, so I just end up completely surrounded.

Results from the second research question indicate how family members of prisoners active in support groups go through a process of socialization. First, members are welcomed, and the shame and stigma associated with having an incarcerated loved one begins to lift through feelings of normalization. In other words, support groups members are understanding of the

incarceration experience and help prisoners' families feel more at ease with their situation by surrounding themselves with like-minded people. Having increased understanding allows members to trust each other enough to share information and learn strategies related to the visitation process. In turn, this begins to increase their ability to navigate and manage this process. When the pains of visitation do occur, however, support groups members are there to provide additional emotional support to one another, which can help motivate them to continue their visits. These findings are reminiscent of how family members of violent offenders in the support group Aftermath would "normalise" the offense committed (Condry, 2007), as well as the friendship and moral support prisoners' families provided one another while riding the bus together to visit their incarcerated loved ones (Christian, 2005). One negative outcome of support group membership, however, is that longtime members and those that hold leadership positions would experience emotional burnout from time to time, which left them feeling irritated, exhausted, and wondering if they are capable of spreading awareness or making the social change they aimed for.

Addressing Barriers to Visitation Through Support Groups

The third research question aimed to discover that once family members of prisoners recognize the advantages and disadvantages of support group membership, how do they take this knowledge and use it to address barriers to visitation. In other words, does being acting in support groups assist with navigating and managing barriers to the visitation process. Again, three primary themes were present: 1) informational support, 2) emotional support, and 3) learning how to advocate for your incarcerated loved one.

Informational Support

One of the first advantages family members active in support groups gain from support

group membership is informational support. Monthly CPR meetings allow members to request and share information related to the incarceration experience, including information related to the visitation process and staying in contact with your incarcerated loved one. Family members would also use meetings to discuss the various barriers to visitation they have faced along the way. During these discussions, it is common for other members to share what strategies have worked for them – or have not worked – when making a visit to see their incarcerated loved one. Sharing visitation strategies, both the good and the bad, helps family members learn from one another and in turn, become more knowledgeable about the process. A third of the sample cited receiving information support from support groups, whether in-person or online (36.7%). For example, two participants both expressed how much they have learned by becoming involved with CPR over the past couple of years:

I have learned from the meetings. I have learned from information handouts, speakers, experiences, etc. That leads me to looking up more information and becoming more familiar with the MDOC website, their monthly newsletter, and their policy directives. I had no idea 11 years ago! – Charles

You learn from each other. You tell stories and ... lately we have lots of experience that we can give to other people who don't have the experience. But at the beginning, it was the other way around. So learning visiting rules and mail policies was helpful. – John

Online support groups were also helpful in providing informational support. For instance, Melissa described how useful she found the CPR Facebook page to be. She was not able to regularly attend meetings but utilized it regularly and reads the information they share and post to their feed. Melissa appreciates that she at least has this outlet as it helps keep her informed:

I'm just really glad I found it. Hearing the people and what they're talking about, you know, "What's your experience with this or whatever?" It's someone listening and someone that can do something. I can learn things about the prison system and things I wouldn't know how to look up, but I think I should know.

Heidi stays connected through other private Facebook groups that are geared towards prisoners'

wives. Although she mentioned how she stays away from the drama, she still finds their posts useful for information:

I'm in several groups and I kind of take it or leave it depending on that's going on I stay connected to the ones in the state – not for the drama or the gossip – but just for the information. Because unfortunately there is no outgoing information from the DOC. MDOC is not forthcoming about things the way a bunch of nosy-ass prison wives can be, right? [Laughs] So if somebody hears something here – and you take it with a grain of salt – but there's probably some truth to it. So I stay connected.

Jalee is also involved in this group and she explained how staying connected help her navigate the visitation process: “It gives you insight because these girls are located around the world. We help each other out and navigate so much through each other. It always helps. We're always navigating in that way.”

In addition to gaining informational support towards the visitation process, each monthly CPR meeting focuses on a specific topic related to incarceration and regularly invites a speaker to give a presentation. Speakers have ranged from leaders of other support groups and organizations, former state legislators, judges, formerly incarcerated people, community health workers, and mental health specialists. Some of the topics covered include drug addiction and community responses to treatment, mental health and incarcerated-related trauma, restorative justice, the commutation process, the transition to parole, and issues surrounding sex offenders and the registry.

Another bonus in gaining informational support, inviting these speakers has also helped members become more knowledgeable towards mass incarceration and the criminal justice system as a whole. Rita expressed how she appreciates that she is able to obtain accurate information but also increase her knowledge through the invited speakers: “It's a learning curve. With CPR, you have everything spelled out. And those meetings – I really benefit from those and the speakers we've had.”

Emotional Support

Support group meetings, specifically CPR meetings, were also a place where family members could express their pains and frustrations related to having an incarcerated loved one and the visitation process. In turn, they received emotional support in the form of understanding and shared experience of others. Over a quarter of the sample (26.7%) reported that they received emotional support through support group membership.

At the beginning of each meeting, CPR members are encouraged to introduce themselves and share a little bit about who they are, who their incarcerated loved one is, and what brought them to the group. These introductions usually lead to members sharing their personal experiences related to the visitation process. While some updates from members are positive, most express anger, frustration, and disbelief in the negative things they have encountered when trying to visit or dealing with MDOC: “It’s gotten so depressing that I’m starting to believe inhumanity is part of the process” (CPR monthly meeting, 7/21/2018).

As a response, members provided each other with encouraging words and motivated each other by sharing similar experiences or strategies that have garnered a more favorable response. This allowed for bonding to occur between members as they learn how to manage barriers to visitation together. Pete, who is also both a CPR and FAB board member, recognized the powerful potential they have as a group: “We [family members] have no leverage. We don’t have political power or formal representation with MDOC. But together we can make a difference.” Lois reiterated this sentiment during a monthly meeting recognizing her relationship with other CPR members: “... a lot of these people are my family” (CPR monthly meeting, 5/19/2018). More recently, CPR began hosting sharing circle meetings to allow for fluid discussion of how family members are feeling and to perform an emotional check-in with one

another. Only a few of these meetings have been held since 2018, but have helped alleviate the pain and anger felt by some participants. At the very least, sharing circle meetings have allowed family members to vent.

Other support groups also provided emotional support. While she did not necessarily need the informational support, Edith joined Prison Fellowship for the emotional support after her son was incarcerated for a second time. She appreciated being able to reach out to fellow members in times of need as other members have reached out to her: “That is why finding a support group is so crucial. We need to have compassion for one another. One thing – you never know – it could happen to you. Getting in trouble is so easy.”

Similar to informational support, online support groups also provided emotional support for its members. Miranda, who visits her daughter, utilized both the CPR Facebook page and Michigan Families Along for the Ride, especially once she realized how many other people were in a similar situation. She enjoyed seeing others getting involved in prisoner advocacy as she has previously explored advocacy for battered women. Miranda explains how she will share certain posts in hope of simultaneously spreading awareness and support to others: “It’s refreshing to me the two pages I have found. You know, I’ll share this on my page and maybe somebody else can understand. Somebody I know.” Heidi appreciates the support that is available to her through the prisoners’ wives group she is a part of. Although she does not regularly engage in this Facebook group, she stays connected and realized that a support system is always there if she needs it:

When it works well, there’s a lot of support. I think it’s a place where people can go and vent and stress and like, “Hey this is normal. What do you think? Have you gone through this? Who’s on lockdown? That kind of stuff.

Lena, who is involved with Humanity for Prisoners, started her own Facebook page to bring awareness to her husband’s case and other wrongful conviction cases. She describes how people

commenting and sharing her page can provide emotional support for her and her husband's case:

They like to, you know, come on our page to send us an email or message of support, and that's really encouraging because it's not just me saying, "Yes, my husband is innocent." There are people who have sent us messages asking, "How in the hell did this even happen?" So that encourages me. It's helps me keep going forward.

Advocating for (Policy) Change

Once informational and emotional support was gained, it was observed how longtime support group members and those who assumed leadership roles in support groups eventually formed a politicized identity by learning how to become advocates for their incarcerated loved one. Interview participants discussed how they feel obliged to give back to others and share the information and knowledge they have gained through their involvement, as well as rally together for social change. Over half the sample (53.3%) reported being involved in advocacy efforts, including CPR's Annual Legislative Education Day and the Family Advisory Board.

For example, Alicia shared how passionate she has become towards issues surrounding mass incarceration: "I want them to understand what mass incarceration is. The impact of people not being involved and what that means." Since getting involved in CPR and FAB, Alicia now tries to spread awareness and is intentional about utilizing her voice to demonstrate to others how representation matters and the importance in getting involved in local politics. Edith felt the same way and eventually started taking political action through writing and signing petitions: "I have assisted in a few petition campaigns organized by Prison Fellowship concerning zero-tolerance visitation policies."

Recalling the informational support available to them through support group membership, participants explained how they now felt informed enough to recognize the need for additional prison reform and advocacy. For instance, Meredith summarized one benefit of having an incarcerated loved one and going through the incarceration experience: "The biggest

blessing in all of this is that our eyes were opened wide to the huge need in reform.” This has helped both her and her husband to get involved and take action through advocacy groups for those on the sex offender registry and their family members. Working alongside John and Kathie, she has been able to spread her advocacy beyond Michigan Citizens for Justice to the national level through her membership with the National Association for Rational Sexual Offense Laws (NARSOL). Together, Meredith explains how she and Kathie feel that they are making a positive difference in people’s lives:

Kathie and I feel that we are an integral part in the support group, and we see that we’re making a difference in these guys’ lives ... You can see it gives them hope just knowing that other people care. So that’s the beauty. I don’t think I would have done something as meaningful with my life had this situation not happened.

Rita echoed a similar sentiment when discussing her feelings about mass incarceration and the criminal justice system in general. Being involved with CPR for the past seven years has not only helped increase her knowledge, but has also helped her use her voice to speak up, spread awareness and educate others:

CPR has really opened my eyes. They’ve given me an avenue to talk to people and educate them in regard to our prison system. And to educate our politicians. I’m not ashamed my brother went to prison. I was at first, but now I don’t have a problem sharing. I don’t do it for the accolades, I do it because it’s the right thing to do.

While she is not involved in CPR or Legislative Education Day, Lena did realize the importance in becoming an advocate and applying public pressure in order to get things done. That is the main reason why she created the Facebook page for her husband and uses it to spread awareness to others:

The only way prison visitation is going to get better is through public pressure. And it would take a lot people getting together – and actually pushing that forward – because without that public pressure ... nothing will change. If anything, it can just get worse because they keep implementing all these different policies that are not making it better.

Jalee engaged in a similar response by creating a YouTube channel and Twitter account to help advocate for her fiancé and spread awareness about his case:

I post and share all day long: I am on Twitter or in the reform groups sending out his petition and sending it out ... I've sent his petition to governors and governors in other states. I've sent to other leaders and people working in the prison reform movements. I've sent it out so much and I have advocated for him so much that it's literally consumed my life ... I hope we can all stand up together and make these changes. It's more than a money issue, it's a people issue.

Results from the third research question indicate that prisoners' families are better able to navigate and manage the visitation process through both the informational and emotional support they receive from support group members. Taken together with the results from the second research questions, findings demonstrate how family members of prisoners are able to address barriers to visits *together* through support group membership. In turn, some members may go through a second process of socialization where they learn to become an advocate for their incarcerated loved one and become more politically involved. This is similar to previous findings that point to the strong feeling among prisoners' families that visitation provides them a means of monitoring or watching the prison system (Christian, 2005). Like Christian (2005), family members "believe that when a prisoner does not receive visits, it is a sign that no one cares about him, which gives prison personnel free license to treat him however they wish" (p. 41). In addition to "watching the system," families who visit feel that the system is not accountable to anyone. One interview participant (Diane) gave a similar account: "They don't care! The prison system is not accountable to anyone that I know of. They do as they please and they don't really care. The only thing that can stop them is probably lawsuits because they don't answer to anyone else.

Addressing Barriers to Visitation Through Policy

The goal of the fourth research question was to capture how family members who

advocate for their incarcerated loved one take their knowledge gained and use it to address barriers to visitation. This was primarily done by forming strategic relationships with prison administration and state legislators, as well as becoming involved in CPR's Annual Legislative Education Day and serving on the Family Advisory Board. More importantly, these family members consistently provided suggestions for policy direction, yet were largely ignored by prison administration and making changes legislatively revealed to be a painstakingly slow process. Thus, results indicate the importance in listening to forgotten victims and to include them in criminal justice debates, especially those concerning the prisoner-family relationship.

Annual Legislative Education Day

Rallying together for social change is the purpose behind CPR's Annual Legislative Education Day, which has been annually held for past seven years at the Michigan State Capitol. Notably, over a third of sample participants (33.3%) were involved in Legislative Education Day. Members used this event to hold a press conference to present themselves, along with the goals and priorities of the group to local media, politicians, and key community stakeholders. Each Legislative Education Day focused on a theme related to the prisoner-family relationship and the importance of family connectedness during incarceration. Furthermore, it invites community members, state legislators, as well as community organizations and agencies concerned with criminal justice issues to come together for an afternoon of discussion and networking. Previous themes CPR have focused on include the importance of family visits (2015), family reunification through restorative justice practices (2016), restorative justice before, during, and after incarceration (2017), and making family support a priority within the Department (2018) (CPR Annual Reports, 2013 – 2017). Regardless of the topic covered, CPR utilizes Legislative Education Day to discuss the annual priorities of the group and what their

policy focus is that particular year. For example, the three main policy priorities for 2019 are 1) establish a formal MDOC Family Advisory Board through the Family Advisory Board Bill, 2) limit solitary confinement to 15 days at a time and only for cases of serious disciplinary violation, and 3) remove restrictions on visits as punishment for misconducts.

Once invited guests, state legislators, and Keynote Speakers have given their presentation, attendees were then encouraged to sit down to lunch with legislators and their staff. This provided a friendly and casual warm-up for prisoners' families who have scheduled appointments to speak with the legislator to introduce themselves and greet them. During this lunch, attendees were also able to engage in critical networking among other family members, political staffers, and members of the organizations and agencies who helped co-sponsor the event. After lunch, the rest of the afternoon is utilized for individual meetings with legislators. During these meetings, family members of prisoners were able to highlight CPR's priorities and discuss these issues with both their State Representative and State Senator. Having this political platform at the state level is crucial for breaking down institutional barriers to visitation and advocating for policy change. It is important to note that while the group has only been active since 2011, they have quickly established and professionalized themselves among powerful players within their local community and state.

For example, Rita, who is also a CPR board member, was able to have a conversation with her state representative about the disadvantages of video visits, which helped form a working relationship:

We even spoke in front of a political science class together. He now sees the disadvantages of switching to video visitation and respects the importance of face-to-face visits. So CPR helped me with that. I would have never communicated that to others without them. I just wouldn't have.

In addition to training family members how to be an advocate for their incarcerated loved one, CPR provided an annual training session the month before Legislative Education Day titled “How to Talk with Your Legislator.” This helps family members identify who their legislators are, where they stand on current criminal justice issues, and the overall talking points they should hit when discussing CPR policy priorities during their scheduled meeting. While Jane does not regularly attend CPR meetings, she admitted that she specifically makes time to attend the meeting before Legislative Education Day to learn these strategies and prepare for her individual meeting with her legislators:

I’ve been able to form a good working relationship with both of them over the years and I use these relationships as both an information pipeline and a powerful tool for visitation policy. I appreciate those who will listen to me. Some seem to understand the importance of implementing policy that actually encourages visits.

Portions of this training encourage prisoners’ families to “clip a photo of your incarcerated loved one to your shirt while you speak with your legislator so they can remember they are speaking to *two* people” (CPR monthly meeting, 4/22/2017). Additionally, Pete encouraged others to “out yourself” as a family member of a prisoner to initiate conversation about visitation and the incarceration experience: “You never know where connections will take you. This number [of prisoners’ families] is so huge, but we don’t know the true statistic because no one talks about it.”

Family Advisory Board

Relatedly, the Family Advisory Board (FAB) was created at the beginning of 2015 out of efforts from the Family Participant Program, but have been holding meetings with the Michigan Department of Corrections (MDOC) since 2012. Board members meet quarterly with the Legislative Liaison to the Department. It is entirely volunteer-based, and representatives include family members of prisoners, returned citizens, former correctional employees, and prison

volunteers from across the state of Michigan. There are currently 11 members on the board, and six of these members were also active in CPR. During these meetings, FAB representatives can discuss administrative rules and policy directives that affect the prisoner-family relationship, and offer suggestions how MDOC can support and encourage family connectedness. Some of the issues addressed include "... important issues affecting many families such as: loss of visits, parole board issues, need for release of information, increasing phone service costs and the poor quality of phone services (CPR Annual Report 2013). It a collaborative effort that has helped bridge a working relationship with the Department.

However, this relationship was made based on a verbal agreement made with the previous Director of MDOC and has continued to be honored by the current Director. As Lois pointed out during at a few CPR monthly meetings, "The FAB is at the mercy of MDOC. We are a voluntary group that can be dissolved at any time – that is why the passing the Family Advisory Board bill is important" (CPR, 2/18/2017). In order to gain more legitimacy as a board, FAB representatives have collaborated with state legislators that routinely support Legislative Education Day to introduce the Family Advisory Board Bill (SB195, 2019).

Influenced by the Family Services Unit at Washington State Department of Corrections, the FAB bill would establish Family Councils and Local Family Councils within MDOC facilities. Furthermore, "... it would establish a diverse working group of community members and professionals to assist and advise the Department regarding the development of policies and procedures that support family reunification during and after incarceration" (CPR monthly meeting, 7/21/2018). They would also assist and advise regarding the development of programs and ways to enhance communication between the Department and families. Under SB195, Family Advisory Board members would be required to consist of individuals who have a parent

formerly or currently incarcerated in Michigan, those who were formerly incarcerated themselves, social workers who has training to work with incarcerated populations, advocate and mentors for the incarcerated, and members nominated by the state and/or appointed by the Governor who have experience working with formerly or currently incarcerated individuals and their family members (SB195, 2019).

While there appears to be a decent amount of support for this bill, it is too early to tell its outcome at the time of this study. In the meantime, FAB has been successful in other policy endeavors. For instance, they have assisted in editing and implementing the MDOC Family Information Packet, which has been made available for prisoners' families to download and review. This was an attempt to help provide more (and accurate) information to family members and other potential visitors. Their efforts were also successful in implementing standardization of medical authorization forms for inmates. Previously, this form was not available online and families were left in a bind when they needed to obtain healthcare information about their incarcerated loved one as there was departmental confusion over who needed to sign the form, how long it was eligible, and understanding what information was allowed to be released. Now that standardization has been achieved, the Legislative Liaison to MDOC confirmed " ... the form is given to inmates at the time of their intake to fill out, has been made available online for families to download and fill out as needed, and forms will be renewed during annual medical screenings" (FAB quarterly meeting, 6/15/2018).

Relatedly, FAB members were also able to amend a zero-tolerance policy on watches and other items deemed to be contraband that visitors could potentially show up to visits with. For example, there was a Zero Tolerance policy on *smartwatches*, however families were having their visits terminated for wearing a regular watch: "While no smartwatches are allowed of any

kind in any MDOC facility, correctional guards are supposed to ask about watches at the gate. MDOC recognized there has been inconsistency with this practice” (FAB quarterly meeting 3/2/2018). This resulted in MDOC discussing their need to change the signage regarding what is and what is not allowed, and to make it consistent across all facilities. It was agreed upon that the FAB board can work with MDOC to create this signage (FAB quarterly meeting, 3/2/2018).

Although the group has been meeting with MDOC for the past six years or so, these are the only policy changes that have occurred. There are several other policies and suggestions that have been made by FAB, but the Department appears to have other larger issues to be concerned with. Progress has been slow and actual change almost non-existent. This has led some FAB members (Jim, Lois and Aaron) to experience emotional burnout, questioning the purpose of the group, and if any real change has occurred since their inception. Jim explains:

The issue is that the human side of all of this get lost so often in the desire to create some sort of policy without actually having walked in the steps of people who are affected by the policy. And I think that’s what the Family Advisory Board provides, but I’m sure not if we’ve made anything near the impact that could be made.

Despite some FAB members feeling frustrated over the lack of progress, there is importance in recognizing how family members active in support groups get involved politically, learn how to advocate for their incarcerated loved one, and in turn form strategic working relationships with their legislators to spread awareness concerning barriers to visitation and the prisoner-family relationship. Notably, there is more importance in recognizing what additional accomplishments can be achieved through policy by simply listening to family members of prisoners.

Listening to the “Forgotten Victims”

Finally, it is crucial to address how prisoners’ families, especially those who identified as an advocate or are politically involved, expressed frustration over being continually ignored by the Department despite efforts to help make the visitation process more efficient. One participant

(Jane) succinctly pointed this issue out: “Family members are a good resource when it comes to real issues, but we are not listened to.” This frustration was particularly felt among CPR and FAB board members (Pete and Jim), but other participants seem baffled that MDOC would not engage in evidence-based practices surrounding visitation. Heidi, who is a graduate student and interested in research on corrections systems, expressed her annoyance over their lack of insight on the positive outcomes visits can produce:

So it’s [prison] not meant to be a vacation, I get it. But when you have something that you know is directly tied to positive, lower recidivism rates, do more of it! Are you kidding? Do more of that! Make your visiting bigger, get more staff, do what you need to do here to make things better. Behavior goes down, people are happier, they’re doing better ... what is our goal here?!

These results support the assertion by UK scholars that family members of prisoners remain “forgotten victims” and do not receive the support services or resources they need from correctional departments (Codd, 1998, Light, 1993; Murray, 1983). As a result, they tend to fend for themselves when it comes to navigating and managing the visitation process. However, prisoners’ families do not necessarily have to do it alone if they are able to become involved in a support group. Regardless of their involvement, family members proved to be a vital source of knowledge and expertise towards the visitation process, yet remained ignored by the Department because, as Charles stated during a CPR meeting (7/21/18), “The general public just doesn’t care about prisoners.” More importantly, several participants were eager to give policy suggestions they believed would encourage visits and help make them more accessible.

Before we listen to prisoners’ families, however, it is useful to first acknowledge their victim status and the increased amount of shame and stigma they tend to experience from others, including correctional departments and prison staff. For instance, Meredith described how

helpless she felt after her son was arrested as this was the first time she had ever encountered the criminal justice system:

Something I think about quite often – that seems really poor the way it’s handled – and that is when families who haven’t had encounters with the justice system who are suddenly in the throes of it ... the trauma is enormous. I feel like I’m almost as traumatized as my son was. And I don’t know if that’s recognized.

Relatedly, Lena, who is originally from Australia, expressed her frustration over the public’s general understanding of the American prison system and its overall punitive mindset:

You know, people that throw around comments such as, “Just lock them up and throw away the key! Don’t feed them! Don’t visit them! Why are you visiting them?” – that thought process needs to change.” – Lena

Similar to Heidi’s frustration, Pete expressed how MDOC should do everything they can to encourage visits:

The proven promise that contact with good people on the outside has a huge effect on whether or not there’s going to be a successful reentry, and every single barrier that may seem trivial that we run into, that would perhaps make somebody not visit, is taking away from that basic premise. You can’t expect people to see somebody once every two months and then prepare for them to come out and you’re going to be their sole support system. Anything we can do to increase visits is huge. Visits should be absolutely encouraged.

Once the public – and correctional departments – can see past the “undeserving victim” label that is shamefully attached to them, they would benefit from utilizing the knowledge, skills, and resources they have built up over the years. Working with prisoners’ families might prove to be a cost-saving benefit as well. Pete continued to discuss how useful prisoners’ families are and that they are willing to help at no cost to the Department:

There are people out here who want to help ... and we’re doing it for free! You know, the cost to keep these guys over their ERD (early release date) because they’re not prepared to go home can be mitigated by encouraging support on the outside.

This sentiment was repeated by others (Jane) who exclaimed, “Because I don’t think MDOC realizes that they have a good resource in families. Let us help!” In other words, there are benefits to listening to these “forgotten victims” and correctional departments should take notice.

One major benefit is directions for policy. When asked if a departmental policy has ever helped or encouraged visitation, family members scoffed: “You mean was there a policy that made it easier to visit him? No! I’ll pay you money if you can find one. I cannot think of anything they do that is conducive to facilitating visits.” (Heidi). Thus, respondents were eager to share policy suggestions that encourage visitation and family connectedness. Their suggestions echo what has already been voiced by visitation scholars (Cochran et al., 2014; see also Baker et al., 1978; Casey-Acevedo & Bakken, 2002; Ella Baker Center, 2015; Light, 1993; Tewksbury & DeMichele, 2005). These included how MDOC could adopt a customer-service approach and be more welcome to families once they arrive for visits ($N=2$); how information related to the dress code should be readily available ($N=5$); that the Department should offer travel vouchers to help mitigate the distance and cost they are impacted by ($N=3$); that visitation should be expanded to seven days a week and provide flexible hours for those who work or visit with children ($N=6$); how visitor processing could be made more efficient by avoiding scheduling visitation so close to shift change, count time, and other administrative duties ($N=7$); and how the Department should also offer a sensitivity training class for their staff to help understand what families experience and go through during incarceration ($N=1$). Several of these suggestions, and others, were also made during both FAB and MI-CURE meetings, and have been explicitly stated through CPR’s annual priorities that aim to reduce barriers to family involvement.

Interview participants involved with FAB ($N=4$) were noticeably frustrated as they regularly offered help in reviewing current administrative rules and policy directives concerning

the prisoner-family relationship. Yet, their input was rarely considered as the Department usually seemed to have more pertinent policy concerns than family connectedness. Taking prisoners' families up on their offer may have been worthwhile, however, especially before updates were implemented to their mail policy, which went into effect November 2017. Essentially, these updates were meant to better control contraband coming into the facility through the mailroom and restricted the use of color ink, crayons, the use of stickers, and pictures printed on photo paper¹². This sparked increased scrutiny of mailed items, which led to excessively delayed deliveries, lost items, or their outright rejection. Family members were left confused and angry over books, letters, and other personal items their incarcerated loved ones failed to receive, therefore igniting a crisis of information in attempting to navigate these policy changes. Diane, whose son went to prison the same month the new mail policy went into effect, remembered the difficulty she had in sending him letters from their relatives: "I couldn't reach him for about two and a half or three months. A few letters got to him ... I also had issues with sending him books. I followed their rules and included a gift receipt, but they were returned back to me and I don't understand why."

Over six months later, the Department – and prisoners' families – were still dealing with the aftermath of this policy change. During a quarterly FAB meeting held in June 2018, Pete reiterated that this was an area where family members could have helped. He suggested that the Department could have run their new policy by them and again reminded them to increase their advisory input on any policy initiatives affecting families:

¹² The contraband in question was suboxone film strips to help moderate opioid addiction. During a quarterly FAB meeting held in March and June 2018, the Legislative Liaison to MDOC explained that this substance could be melted down and placed on paper products for consumption by inmates. Instead of restricting mail, FAB representatives inquired about the Department seeking a different form of distribution of suboxone instead.

Due to our unique perspective, many issues identified after a policy rollout could be avoided if our input is at least considered ahead of time. Exhibit A being the mail policy. Many of the issues/questions MDOC ran into after the policy was finalized (both the first and second time) were apparent to those of us who deal with this on a daily basis. Certainly at least portions of these types of policies could be safely discussed with this board ahead of finalization. Earlier engagement with FAB could make our involvement (and MDOC's processes) more proactive, and less reactive on these types of issues.

Lastly, when asked their thoughts towards future directions of visitation, nearly all participants ($N=27$) expressed worry that the process was only going to get worse¹³. Family members were concerned that MDOC would implement video visitation and begin to cut back on face-to-face visits ($N=10$). Furthermore, these respondents were critical towards the modality of video visitation and described it as not being a "real visit." For example, Charles exclaimed the importance of face-to-face visits, or visits where physical contact is involved:

If you were to watch the vast majority of visits ... there's no question how important they are. And *physical visits*. Not on the internet or TruTv or plate glass or on the phone. That's not a visit. That's not the contact that's needed resume a productive life when you get out. It's just not!

Pete agreed and was adamant in during his interview and across several CPR meetings that, "It's not a video visit. It's a *video call*." Some were at least open to the idea (Kathie), but were wary it would eventually replace face-to-face visitation:

It's a step backward for communication and keeping close to family. And the reason they're doing it is to save money. Now if they could *add* video visitation in addition to regular visitation that could improve communication for people that can't get to the prison. But I'm worried they will do it instead of a face-to-face visit.

Whereas others (Jim) saw video visitation as a way for correctional departments to avoid the "hassle" that visitors showing up to facilities can cause while simultaneously increasing their financial burden of maintaining the prisoner-family relationship:

¹³ As interviews took place between June and September 2018, the upcoming midterm elections of November 2018 were on the mind of several participants and anxiety lingered over who the newly elected governor would be.

The reason I think we're going to see video visitation is that you can make families pay for it, just the phone calls. I mean, that's a profit making thing. All of this stuff being done is on the backs of the prisoners or prisoners' families ... The hidden motive is punishment. If you look at these policies, they don't reflect any desire to engage in truly rehabilitating the family and the prisoner. It's only gotten harder to visit in the past 13 years that I've been visiting.

Results from the fourth research question indicate that despite their best efforts to rally together for social change and get involved politically, family members of prisoners continue to remain largely forgotten. While sample participants were able to form working relationships with prison administration and state legislators and make *some* change, it was not enough for the years of hard work and advocacy that went in to drafting legislation and presenting policy suggestions. Thus, findings confirm what UK scholars (Codd, 1998; Light, 1993; Light & Campbell, 2007; Matthews, 1983) have been touting for decades. However, future examinations should focus on the political and social movements that prisoners' families may involve themselves in to further explore their advocacy efforts.

CHAPTER 6: DISCUSSION AND CONCLUSION

Barriers to visitation has been a long-standing problem because of the potential impact visits can have towards fostering social bonds and ties, as well as providing opportunities to increase the social capital of inmates. Investing in policies, programs, and practices that increase visitation has the potential to not only reduce offending, but to also increase order within prison facilities and other reentry outcomes such as increased employment, reduced homelessness, and improved family functioning (Bales & Mears, 2008; see also Berg & Huebner 2010; Hairston et al., 2004; Jiang & Winfree, 2006; Reed & Reed, 1997; Tewksbury & DeMichele, 2005). While extant literature on visitation programs has quantitatively demonstrated they are crucial to the enhanced social adjustment during both the period of incarceration and release (Casey-Acevedo & Bakken, 2002; Duwe & Clark, 2013), qualitative evidence demonstrating the difficulties associated with completing a visit are still needed.

Prior to this study, only a handful of qualitative examinations existed. However, there is reason to continue gathering responses from prisoners' family members and friends as little is known about the visitation process from their perspective. More evaluative research documenting visitors' perceptions of the structure, process, and experience of visitation is needed (Tewksbury & DeMichele, 2005). As family members of prisoners have long been recognized as the "forgotten victims" of the criminal justice system, their experiences (and their voices, respectively) tend to remain ignored by prison officials, politicians, and other criminal justice stakeholders when it comes to drafting and implementing policies surrounding prison visitation. In response to this neglect, prisoners' families have created their own resources; namely, in the form of support groups (Condry, 2007). Therefore, examinations of barriers to visitation should continue to discover the extent of the obstacles they face when trying to maintain the prisoner-

family relationship. As Condry (2007) research was based in the United Kingdom, comparative evidence of prisoners' families involved in support groups is needed.

Acknowledging these gaps in the literature, this study used a qualitative design to examine how family members of prisoners navigate and manage the visitation process, as well as how they address barriers to visitation – including barriers created through policy – through their involvement in support groups. Data was collected in the form of participant observation of support groups ($N=36$) and interviews with their members ($N=31$). The goals for qualitative analysis were to increase understanding of the visitation process; further identify the various barriers that family members of prisoners experience along the way; their use of support groups as a resource to address these barriers; and how those connected to these groups address problems related to inefficient policies and practices surrounding visitation.

In answering the research questions posed, this study addressed four gaps in existing literature. First, it focuses on family members of prisoners, a group that is repeatedly overlooked in the research. Second, it further investigates the strategies they use, which helps confirm what is already known regarding barriers to visitation, as well as insight to how family members of prisoners navigate and manage the visitation process. Third, it introduces original data to discover how being active in support groups can help them cope with this process. Fourth, it also examines how support group membership can aid in identifying visitation policies that are restrictive or detrimental, and provides firsthand accounts from prisoners' families as to efforts that encourage and strengthen the prisoner-family relationship.

The concluding chapter begins with a summary of research findings and follows with a discussion of limitations of the study. Next, recommendations for future research are provided, as well as a presentation of policy implications.

Summary and Discussion

The first research question led to further examination of how family members of prisoners navigate and manage the visitation process. In other words, how do they find the information they need, how do they plan their visit, and what strategies do they implement, if any, to address the various barriers to visitation they encounter along the way. The first challenge was simply finding information and navigating where to go, when, and what items they were allowed to bring with them. Results demonstrated that family members of prisoners active in support groups are socialized into a network where they can request and share information with one another. This was equally helpful for both interview participants and members observed during support group meetings as responses gathered from each revealed the frustration prisoners' families felt by the lack of (accurate) information provided by correctional departments. If information was provided, it was discovered to be overwhelmingly inconsistent and varied depending on the facility. Already feeling distrustful of the accuracy of the Department, they turned to other family members involved in these groups to answer their questions and validate information received. In turn, this aided in navigating the visitation process in other manners such as successfully completing a visitor application and the logistics surrounding planning the visit. If a support group was not available within their proximity, interview participants described how they found similar support from online networks, specifically private Facebook groups.

In regard to managing barriers to visitation, results showed that prisoners' families reported experiencing the following barriers to visitation: distance, cost, time, institutional barriers, emotional barriers, and other barriers related to employment, taking care of depending children or elderly relatives, and health issues that exacerbated the pains of visitation. While

these barriers have been recognized in existing literature, this study enhanced the understanding of each, along with which barriers posed the most challenge and some of the various strategies family members utilized to manage them.

Barrier management also revealed how family members were generally treated by prison staff, which they recounted as disrespect, disdain and disparage. Each interview participant recalled at least one negative encounter they experienced during visitor processing, while several recalled encounters from nearly each time they came to visit. Although participants shared when they had a positive experience or described a time when a correctional guard was helpful and courteous, these moments were outliers as they rarely occurred. A few seasoned visitors (Meredith, Kathie, John, Jim, Pete and Jane) who were fortunate to have their incarcerated loved one remain at the same facility explained how they would make an effort to form relationships with prison staff in hopes of easing tensions. Regardless, firsthand accounts from prisoners' families substantiate the concept of *secondary prisonization* (2003) and how treatment by prison staff can act as an additional barrier to visitation.

Notably, as the sample is largely female, women who were interviewed reported disturbing accounts during visitor processing related to dress code, the hypersexualization of their bodies, and in one particular case, the strict regulation of feminine hygiene (Lena). Women coming to visit their boyfriends, fiancé or husband were subjected to inappropriate comments from staff about their relationship and questioning its worth. Relatedly, mothers who visited their daughters in the only women's correctional facility in the state reported horrendous wait times and visiting room conditions due to overcrowding. Thus, a unique discovery of this study is the recognition of *gendered barriers* to visitation and the additional challenges both female visitors and inmates face in maintaining the prisoner-family relationship.

The results from the second research question explored the advantages and disadvantages of support group membership. To begin, advantages of support group membership provided family members of prisoners with feelings of *normalization*, which essentially helped them normalize the situation and cope with the shame and stigma associated with having an incarcerated loved one. Finding “like-minded people” also aided in accepting the current situation and recognizing that it is perfectly acceptable to love a prisoner. Feelings of normalization thus led family members to justify the reasons for why they visit. In turn, this helped *motivate* them to keep visiting their incarcerated loved one irrespective of barriers.

While few participants described disadvantages of support group membership, one particularly stood out: emotional burnout. Primarily experienced by seasoned support group members (expert visitors), results from observation of CPR and FAB meetings revealed how those who have served a significant amount of time in voluntary Board of Directors positions are exhausted from the amount of emotional labor that is required of them to lead these groups. They are also irritated and discouraged over the lack of progress in implementing helpful policies and practices surrounding visitation. Therefore, some are left feeling emotionally burnt out and questioning if they can continue their involvement. While support groups for family members of prisoners reported several advantages, including major assistance in the navigation and management the visitation process, these results point to how a lack of support from prison officials and politicians can lead to prisoners’ families fighting an uphill battle, and to some extent, to their wits’ end.

The goal for the third research question was to explore how support group membership can assist in addressing barriers to visitation. Both informational and emotional support were crucial in helping family members of prisoners address barriers to visitation. Support group

meetings allowed them to request and share information related to the incarceration experience, including information related to the visitation process and how to stay in contact with their incarcerated loved ones. These meetings would also allow prisoners' families to share what strategies worked for them – or have not worked – when completing a visit. Sharing visitation strategies, both the good and bad, helped family members to learn from one another and in turn, more knowledgeable in navigating and managing the visitation process. As prisoners' families became more seasoned visitors, many would pass on their expertise with those who were new and inexperienced. Taking the previous two research questions into consideration (RQ2 and RQ3), results ultimately demonstrate how prisoners' families active in support groups are able to navigate and manage the visitation process *together*.

Support group meetings were also a place where family members could express their pains and frustrations related to the incarceration experience and in turn, gain emotional support. Specifically, these were deemed safe spaces where prisoners' families could simply vent to one another, which helped alleviate the agony and anger felt by some participants. For instance, in recognizing the seriousness of emotional burnout, CPR recently implemented sharing circles meetings every other month to allow for fluid discussion of how members are feeling and to perform an emotional check-in with one another. This allowed for further bonding to occur, thus nurturing understanding, encouragement and solidarity among participants.

One unique outcome of support group membership is that it can lead to prisoners' families choosing to become an advocate for their incarcerated loved one. These participants became more politically involved addressed barriers to visitation legislatively. Through their advocacy efforts, family members involved in both CPR and FAB have formed relationships with state legislators to help spread awareness related to how incarceration impacts them

personally, the family unit as a whole, the offender, and their community. Additionally, it provides avenues to discuss the shame and stigma they experience from others due to the lack of understanding and general support surrounding the prisoner-family relationship.

The fourth, and final, research question examined how can support group membership assist in addressing visitation policy. As efforts of Annual Legislative Education Day and the Family Advisory Board have been summarized, results from this study support the long-held contention of UK scholars: that family members of prisoners remain “forgotten victims” who must fend for themselves by creating their own support groups while calls for support services and social inclusion remain unanswered (Codd, 1998; Light, 1993, Light & Campbell, 2007; Matthews, 1983). In the United States, there is little recognition of inmates family members as “forgotten victims”, which creates greater difficulty in addressing their needs through support services, and more importantly, policy. However, findings also demonstrate that prisoners’ families don’t necessarily have to fend for themselves alone and that by coming together as a group, differences can be made. More importantly, family members of prisoners can be a vital source of knowledge and information for correctional departments and other criminal justice stakeholders, yet they remain unrecognized. It is unclear why their knowledge and expertise remain underutilized, or why they continue to be left out of current prison debates and discussions related to criminal justice policy. It is clear, however, that advocacy and support groups are attempting to make meaningful change, even if such change happens slowly.

Taken together, results from this study provide additional insight as to how family members of prisoners are able to foster social ties through the act of visitation. The fact that visitation is associated with reduced recidivism suggest that inmates, at least those who serve shorter sentences, may indeed benefit from social ties to society, namely their family members

and friends (Mears et al., 2011). Furthermore, inmates who are visited regularly, especially early in their prison stay, are able to build their social capital (Cochran, 2012). A lack of visitation, for example, may indicate that an inmate lacks strong social bonds and thus may be more likely to recidivate (Cochran, 2012). However, social ties and bonds are tenuous at best due to the various barriers that can make the visitation process all the more challenging.

For instance, while Mears and colleagues (2011) discovered that greater amounts of visitation can contribute to even greater reductions in recidivism, potentially diminishing returns were present after just three or four visits. In other words, visitation can taper off for some inmates and become less frequent the longer they are incarcerated. Additionally, previous qualitative studies have highlighted the economic and emotional strain felt by prisoners' families when attempting to complete a visit, yet they have also touted the necessity of visitation for maintaining familial bonds (Pleggenkuhle et al., 2017; see also Arditti, 2005; Casey-Acevedo & Bakken, 2002; Christian, 2005; Christian et al., 2006; Comfort, 2003; Fishman, 1990). Interview participants in this study disclosed times when they considered slowing down or temporarily stopping their visitation due to the distance they have to travel, the significant amount of time it takes to complete just a single visit, the rude treatment they experienced from prison staff, as well as the amount of money that is required to spend to maintain the prisoner-family relationship. Similar to extant research, results from this study demonstrate the complexity of the visitation process and thus by extension, the complexity of maintaining social bonds.

Notably, as this study provides insight from prisoners' families, it is important to think about the social capital of family members in conjunction with offenders. As inmates have frequently cited a lack of economic capital as a barrier to visitation, the same can be said for visitors (Pleggenkuhle et al., 2017). While all interview participants lamented over the costs

related to visitation, a few (Alicia, Rita and Heidi) provided detailed accounts of how visits have directly affected their financial well-being. Previous studies have also suggested that families may go through visiting cycles that are partly determined by the strain put on their economic and emotional resources (Christian et al., 2006), results demonstrate the lengths some family members are willing to go to pay for visits. More specifically, as sample participants were older, had more time due to retirement, reported higher levels of education, and earned higher annual incomes than the general state population, results may provide initial insight how those with more privilege choose to invest in their incarcerated loved one but are simultaneously divesting from themselves. However, this may create a catch-22 situation where social bonds may be strengthened for the prisoner during their incarceration, but at the potential cost of stifling or depleting the financial or economic capital of their family member. Decreased levels of economic capital could lessen the likelihood of success post-release. There is, however, a flip side to this predicament. Even though previous scholarship has recognized how prisoners' families have small social networks they can draw from to help them overcome barriers to visitation (Pleggenkuhle et al., 2017), results from this study suggest while family members of prisoners are losing social capital financially perhaps their involvement in support groups like CPR can help them make gains in social capital *politically*.

Results from this study also relate to the concepts of shame, stigma, and secondary prisonization. Stigma and feelings of shame have long been recognized as a consequence that families may face while their loved one is incarcerated (Abbas et al., 2016; see also Codd, 2007; Condry, 2007; Murray, 2007). Condry (2007) goes into depth about secondary stigma, shame, and blame. Relatives of (serious) offenders were shamed in response to a two-fold sense of failure. First, it is their proximity to the failure of their offending relatives to adhere to society's

most fundamental norms. Second, it is their perceived failure to achieve ideal family roles and relationships, therefore they attract blame from others for their perceived role in the criminogenic events that have occurred. Similar accounts rang true in this study. Sample participants described how they felt outcasted by relatives, friends, and even neighbors. Some even experienced anger, jealousy, and resentment from their own children for not being more present in their lives because they spent most of their personal time visiting their incarcerated loved one.

Moreover, family members were shamed all over again by prison administration once they arrive to correctional facilities. In other words, perceptions of shame and stigma were transformed into behavior through the concept known as secondary prisonization (Comfort, 2003). Rude and disrespectful treatment by prison staff left family members feeling shame for simply visiting their incarcerated loved one in the first place, which manifested perceptions of distrust, fear, and the fact that visitors often felt that punishment meted out to the prisoner was extended to them in the form of retaliation. Condry (2007) described similar results, especially for family members who had not visited a prison before. Therefore, shame, stigma, and secondary prisonization can act as additional barriers to visitation. Due to their “forgotten victim” status, some prisoners’ families feel hopelessly lost and abandoned in their situation thus making an already difficult situation worse. These emotional barriers often prevent them seeking help (Light, 1993). However, for those involved in support groups, results from this study demonstrate how family members of prisoners may be able to gain some control or *agency* in a situation that typically remains outside their control.

Related to secondary prisonization, this study recognizes the special challenges that gendered barriers can produce for women who visit. For instance, women who were interviewed expressed overwhelming frustration in trying to manage institutional barriers related to dress

code and the hypersexualization of their bodies. Therefore, it is crucial to recognize the gendered barriers to visitation and the importance of examining visitation from a feminist perspective. This includes a specific focus on women who visit and the women who get visited as currently and formerly incarcerated women leaders have long advocated that mass incarceration is, in fact, a gender justice issue (Burton & Lynn, 2017; Essie Justice Group, 2018). Furthermore, Comfort (2003) observed The Tube at San Quentin as primarily a *female space* and calculated that during the time of her study, “approximately 95 percent of the several hundred daily adult visitors at the facility” were women coming to visit their male partners, sons, and relatives (pg. 81). In other words, it is “the wives, girlfriends, mothers, daughters, and other female kin and kith of prisoners” who visit (pg. 79). This female space, however, is highly monitored and controlled, especially when operating in male prisons. This primarily begins with dress code policies and controlling what women can wear on a visit. Christian (2005) confirmed similar rules and restrictions during her visits to prison: “... clothing cannot be skimpy, including no short skirts or low cut tops, shirts cannot show more than half the back, and sleeveless tops are not allowed” (pg. 37-38).

Therefore, there should be an increased focus on who women visit, and specifically a broadening of this perspective outside that of prisoners’ wives. In the current age of mass incarceration, at least 1 in 4 women has an incarcerated loved one (Lee, McCormick, Hicken & Wildeman, 2015). Wondering what mass incarceration is doing specifically to millions of women who have loved ones behind bars, researchers at Essie Justice Group (2018) concluded that mass incarceration is 1) a direct cause of significant to extreme psychological distress and trauma, and 2) a serious obstacle to the financial health and economic agency of women with incarcerated loved ones. More importantly, they argue that the sum total effect of the social

condition of women with incarcerated loved ones experience leads to their *political isolation* from society. Introducing this concept to the collateral consequences of mass incarceration, political isolation occurs when a system of control socially isolates a significant number of historically and currently oppressed people, and their social isolation reinforces a hierarchy that is based on race, gender, and class (Essie Justice Group, 2018). In turn, this limits collective action, punishes deviance, protects those in power, and ultimately upholds the status quo (Essie Justice Group, 2018). For women with incarcerated loved ones, two particular agents of political isolation that tends to silence them are blame and shame (Essie Justice Group, 2018). It is hopeful, however, that results from this study can perhaps demonstrate how women may be able to avoid political isolation through their involvement in support groups for family members of prisoners and learning how to become an advocate for their incarcerated loved one.

Limitations and Recommendations

As no research design is perfect, limitations of the study need to be highlighted and discussed. First, results may not be particularly generalizable as demographics of sample participants do not necessarily reflect the population of Michigan, nor the prison population of the state. Specifically, demographics for both participant observation and interviews indicated greater racial/ethnic homogeneity (80.6% White), an overwhelming number of female respondents (83.9%), higher socio-economic levels (35.5% reported income over the median of \$52,668), and higher levels of education when compared to the general population of Michigan (70.9% of participants have earned a Bachelor's degree or higher compared to 28.1% of state residents). While the population of Michigan remains nearly three-fourths White (74.9%), the Black/African American population (14.1%) was not adequately represented in the sample, nor those who identify as Hispanic or Latino (5.2%). Other racial and ethnic groups of color present

in the state that were not accurately sampled include Asian (3.4%), American Indian and Alaska Native (0.7%), Native Hawaiian and other Pacific Islander (>0.5%) and residents who identify as being two or more races (2.5%) (Michigan Census Bureau, 2018).

As for the prison population of Michigan, the sample is skewed towards White (and majorly female) individuals who visit men. Thus, the prison visitation experiences in this dataset do not depict an accurate representation of Michigan prisoners. For instance, while the prison population is indeed nearly all-male (94.57%), White prisoners comprise 44.1 percent of this group. This is far less than the 53.1 percent of Black men and women currently incarcerated within MDOC prisons. Unlike gender, race variables for incarcerated loved ones were not specifically captured in this project, and therefore the race or ethnicity for prisoners being visited cannot be assumed nor identified.

Based on purposive sampling and selection criteria of interview participants, however, these results are not surprising. Notably, Condry (2007) reported similar demographics in her sample of relatives of serious offenders, which was also primarily comprised of White women visiting imprisoned men. While there do not appear to be other studies published at this time examining support group membership for family members of prisoners, previous examinations of support groups for cancer patients found that they tend to be utilized by White, educated, and middle-to-upper class women (Bauman, Gerverey & Spiegel, 1992; Cunningham & Edmonds, 1996; Gottlieb & Wachala, 2006; Taylor, Lichtman & Wood, 1984).

This is an important limitation to address, as diversity and inclusion remains a concern for support group members. CPR Board of Directors are aware of these racial dynamics, or lack thereof. CPR has attempted to reach out to the Prison Fellowship program in Detroit, but distance, time, and conflicting schedules have not allowed for much collaboration between the

groups. Because some participants expressed dismay in not seeing themselves or feeling represented in the support groups included in the sample, racial demographics and dynamics of support groups in general should be further examined, especially those which focus on issues that disproportionately affect people and communities of color like mass incarceration. If more Black participants and people of color were included in the sample, findings from this study would have perhaps demonstrated how *racial barriers* affect visitation. Extant literature on visitation have highlighted how minority inmates typically have fewer years of formal education, socioeconomic disadvantage, and have had more frequent contact with the criminal justice system when compared to White inmates (Cochran et al., 2014; see also Pettit, 2012; Wacquant, 2001; Wakefield & Uggen, 2012; Western, 2006). Their potential visitors – including family and community members – are likely to share these characteristics. (Cochran et al., 2014). Therefore, incarcerated minority groups may experience less visitation because their outside social ties have fewer social and economic resources and experience greater difficulty navigating and managing the visitation process (Cochran et al., 2014). It is strongly recommended that future research explore the racial dynamics of visitation. If racial dynamics are to be explored, however, concepts related to class and socioeconomic status need to be explored as well as the two are inextricably linked.

A second limitation is that participants active in support groups and those interviewed for this study were self-selecting in that they actively choose to visit. In other words, participants who did not visit were not included in the study. This is a crucial population of prisoners' families that needs further examination to understand the complexities of the prisoner-family relationship. Christian and colleagues (2006) highlighted some of these issues when they examined the social and economic implications of family connections to prisoners. However,

they primarily discussed the juxtaposition that most prisoners' families find themselves in, which has been recognized as the "double bind" of choosing whether to maintain connections with their incarcerated loved one, or to devote time and resources to the family's life in the community (Christian et al., 2006, pg. 450). Similar results were discovered, as no participant interviewed or observed for this study admitted that they stopped visiting because they lost interest in doing so. Choosing to not visit was simply not an option for a majority of the sample. However, at least three interview participants (Edith, Mora and Sandra) admitted that they entertained the idea of temporarily stopping visits. These individuals stated that they did not enjoy visiting due to the time and excessive cost involved, or because it was their loved ones' second incarceration and they did not have nearly as much patience or sympathy. Other family members (Melissa, Mora and Rita) described instances where they had to "do without" and wait on making purchases for themselves or the household in order to continue to afford visits. These circumstances certainly influenced visitation, but did not stop it. Thus, another recommendation for future research is to focus on the complexities of the prisoner-family relationship and the various trade-offs that family members endure and negotiate in order to maintain their regular visitation schedule. Furthermore, it is important that we also hear from the family members who do not have a connection to their incarcerated loved one or those who have chosen to terminate their relationship with them. Results may provide more insight into the shame and stigma related to incarceration and how prisoners' families members both internalize and externalize this shame. Perhaps one form of externalization is the refusal to visit.

Third, the types of prisoner-family relationships present in the sample are limited in their scope. For example, only one sibling relationship was captured (sister/brother), and only three out of 31 participants visited women who were incarcerated (mother/daughter). It is crucial to

include additional types of prisoner-family relationships including extended family, friends, pen pals, and volunteers. These relationships were difficult to capture in the current research setting due to administrative rules and policy directives that strictly defined which individuals were considered “immediate family members” and were thus allowed to visit. However, the current limitations on understanding the various types of prisoner-family relationships has the potential to spark several recommendations for future research. Beyond family members and friends, there is more to know about the relationships and intimate partnerships that withstand incarceration. For instance, it was discovered that Jalee and her fiancé had separated during the writing of this dissertation. Thus, research should also include boyfriend/girlfriend relationships, those who are engaged, and those who decide to break up and reunite. It would be useful to examine how incarceration may strain these relationships, and in particular, the ones that may be perceived as the most vulnerable to separation. Friendships and platonic relationships should also be explored.

Related to issues that arose for female participants and the increased difficulties brought about by gendered barriers to visitation, the idea of the prisoner-family relationship should also expand beyond cisgender and heterosexual relationships. Just as feminist theory, methodologies, and epistemologies are needed to examine barriers to visitation, it is crucial that they also recognize the fluidity of gender. This also comes at a time where, similar to imprisonment rates of women, trans, queer and gender-non binary individuals are being incarcerated at increasingly alarming rates (Stanley & Smith, 2011). Thus, queer theories and transfeminist methodologies are in demand just as much as feminist theories methodologies are, and visitation research should look beyond *cissexist* and *gender identity blind* research practices that further marginalize transgender people (Johnson, 2015). While this study did not explicitly come across issues related to transgender identity within the sample, it does not mean that *transgender barriers* to

visitation do not exist. In addition to exploring gendered barriers to visitation, future scholarship should expand beyond the findings of Stanley and Smith (2011) as hardly anything is known about the visitation experiences of incarcerated people who are transgender. If society is willing to recognize the fluidity of gender, correctional departments should as well. Based on the current treatment of transgender prisoners, however, this is one particular limitation that will be difficult to address but – also like prisoners’ families – an issue that will not go away or disappear when forced into binary categories of gender.

As this study focused on state prisons and did not inquire about visitation in county jails or federal correctional facilities, it is important to look into these areas as visitation in Michigan county jails is primarily restricted to non-contact video visits. There was grave concern among the sample that state prisons would begin implementing video visitation. While MDOC has denied this form of visitation across state facilities, family members remain anxious this is the direction the future of visitation is moving towards. If both correctional departments and policy makers would listen to family members, they may learn more about their preferences in how their visit is facilitated. For instance, Tartaro and Levy (2017) discovered that when given preference in their visitation modality, family members reported that they would accept a video visit over no visit at all, but if given the opportunity to have a face-to-face visit, this was their overwhelming preference of choice. More importantly, video visitation is another additional cost that prisoners’ families members must take on in order to maintain communication. Since these fees are not regulated, the cost of online video visitation varies depending on the facility. For example, the Pennsylvania Department of Corrections (PDOC) utilizes one of the oldest videoconferencing visitation programs on the U.S. and charges families \$20 for a 55-minute visit, while the Virginia Department of Corrections (VDOC) offers \$15 for a 30-minute visit and

\$30 for a 60-minute visit (Boudin et al., 2013). Calculating all other costs involved to maintain the prisoner-family relationship, video visitation is additional charge that some prisoners' families cannot afford.

Visitation across federal prisons is also important to examine as these facilities are scattered across the United States, thus making it more difficult for family members to visit. Due to the distance involved, video visitation may be more of a viable option for some prisoners' families. Regardless, the increased distance imposed by the sparse locations of federal facilities likely aggravates already existing barriers to visitation. It is also recommended that future research compare and contrast visitation across types of correctional facilities, as well as the type of visitation they receive whether it be face-to-face or non-contact through video conferencing. These examinations should also include private prisons as little is known about the visitation process within these correctional spaces.

Another recommendation for future research involves the examination of online support groups and how prisoners' families utilize social media platforms such as Facebook, Twitter, Instagram, and others to gain informational support, emotional support, or advocate online for their incarcerated loved one. As some participants engaged with only online support groups, more attention should be paid to how family members of prisoners access these groups virtually. This study did not collect any online data or engage with any Facebook groups for prisoners' families, but future studies should do so. In fact, how family members of prisoners utilize social media could easily garner its own study with its level of popularity, convenience, and variety of platforms that are available for free. Another bonus of utilizing multiple social media platforms is that users can link all these accounts together and spread information and awareness to a global audience. For example, notable Instagram accounts have gained notoriety for providing an

outlet to share families' incarceration experiences and to simply discuss what it is like to have loved one behind bars. One account, @strongprisonwives has 11,000 followers and has recently reached 501(c)(3) non-profit status. They are a support network created to help prison wives and families defy stigma and reduce recidivism. By "joining the family," wives and families have online access to both information and emotional support, but also have the ability to volunteer their time and get involved in the organization.

Another Instagram account, @bluebaglife, has nearly 8,000 followers and chronicles the relationship between Lisa and her incarcerated partner, Elliot, who is nearing the end of serving a two-year sentence in the United Kingdom. Throughout his sentence, Lisa has utilized her account to share their visitation experiences, the trials and tribulations involved of maintaining the prisoner-family relationship, and how she has largely navigated this process on her own. In addition to spreading awareness, educating others on drug addiction and mental health, and advocating for changes to criminal justice policies surrounding incarceration, Lisa utilizes this account for emotional support for both herself and Elliot by sharing her personal experience and connecting with others in similar situations. Results from these future studies also have the potential to be cross-national when compared to earlier work in the UK by Condry (2007) and Sharratt and colleagues (2014).

Finally, as this study utilized constructivist grounded theory (Charmaz, 2000, 2014), this topic would be ideal for further examination of social support theory (Cullen, 1994). Meyers and colleagues (2017) have recently done so. This is a useful theory to include in the study of visitation, as it has been applied to examine the role of relationship dynamics among inmates and their visitors (Meyers et al., 2017). While both supportive and unsupportive visitors were identified in the study, Meyers and colleagues (2017) discovered that inmates with visitors

characterized as supportive had an increased expectation of instrumental support available to them upon release. Thus, they conclude that social support theory can further our understanding of visitation and its effects, which also provide useful directions for policy and practice (Meyers et al., 2017). A notable theoretical contribution, Meyers and colleagues (2017) made improvements to visitation research. To better test this theory, it is recommended that future studies include interviews from both prisoners and the family members who visit them, including their children. Even more desirable would be to include interviews from prison staff at the correctional facilities where the visitation occurs. Ideally, a mixed-methods research design would be able to incorporate data from all four sources as well as incorporating official data from correctional departments. While significant strides have been made in examining prison visitation, there is much left to do, and across several avenues.

Conclusion and Policy Implications

Although research on prison visitation has been conducted for over half a century, evidence is still lacking on the experience of family members of prisoners. Few studies have examined how prisoners' families navigate and manage the visitation process and only one other study thus far has examined their use of support groups to cope with the incarceration experience. While exploratory, this study improves existing research in several ways. First, the longitudinal nature of participant observation allowed for prolonged examination of prisoners' families active in support groups, which aided in achieving credibility of results, especially as data gathered from participant observation could be checked and re-checked alongside responses gathered in interviews and documents obtained during support group meetings. Second, utilizing qualitative methods and implementing the strategies of triangulation and reflexivity assisted in the confirmability of results. Results from this study also corroborate what has previously been

discovered in the literature. Third, while the sample size was small and homogenous, this study provided insight into family members who were experiencing incarceration for the first time and how they utilized resources available to them. Even if sample participants are considered to be outliers when compared to the general population, their experiences and narratives should not be discounted. Transferability of the study could be increased with a more diverse sample.

Results from qualitative analysis suggest that prisoners' families encounter a variety of barriers to visitation but those involved in support groups receive informational and emotional support from fellow members that help them normalize their situation and motivate them to continue visits. In the absence of receiving any support from MDOC, support groups provided a safe space where family members could ask questions, receive advice and guidance on a particular situation, vent over the incarceration experience, and bond with others in the same situation. As a majority of participants were experiencing incarceration for the first time, these groups were vital for learning strategies to help them navigate and manage the visitation process. More importantly, support groups also provided opportunities for prisoners' families to get involved politically by learning how to become an advocate for their incarcerated loved one and address barriers through legislative means. Despite losses in economic capital due to the high costs associated with visitation, family members of prisoners may be able to make up for this loss through increased political capital.

Overall, findings from this study suggest four major directions for policy. First, this study agrees with previous recommendations that corrections systems can use a wide range of strategies to help reduce barriers to visitation. These include but are not limited to: housing inmates closer to their communities; improve public transportation efforts to and from facilities; expand visitation to 7 days a week and offer flexible hours for visitors who work; make facilities

more child-friendly by offering childcare as well as offering books, toys, games and other activities in the visiting room; allow for overnight family visiting or consider furloughs so inmates can visit their families on the outside; and lifting visitation bans for people with convictions (Cochran et al., 2014; see also Baker et al., 1978; Casey-Acevedo & Bakken, 2002; Ella Baker Center, 2015; Light, 1993; Tewksbury & DeMichele, 2005). Sample participants echoed similar suggestions when asked what policies they deemed to be helpful and actually support visitation efforts. Recognizing the severe lack of effective visitation policies within the MDOC, respondents could only point to a single example: In the event of overcrowding, MDOC staff will begin to terminate visits with the exception of visitors who have traveled 400 miles or more round-trip. This policy was helpful for several participants (Alicia, Meredith, Charles and Connie, John and Kathie), and especially those who traveled from out of state (Heidi and Tiffany) or internationally (Lena). However, if the visiting room is still too full, those who have traveled 400 miles or more can be terminated to relieve overcrowding.

Correctional systems should also consider outreach and educational efforts for prisoners' families before, during, and after incarceration. These efforts should focus on providing information to families about the significance of social support for inmates and how to negotiate rules for visitation as well as logistical challenges associated with it (Cochran et al., 2014). Implementing some or all of these efforts to promote visitation would make great strides in fostering the prisoner-family relationship. In turn, investing in policies, programs, and practices that increase visitation can aid in the formation and/or strengthening of social ties, thus solidifying social bonds and cultivating social capital. In other words, if prison officials are concerned with increasing the overall health of inmates, their educational and employment

opportunities, as well as reducing recidivism, they should make family visiting more accessible, more affordable, and more frequent.

Second, specialized training should be provided to correctional officers and prison staff to help them better understand family connectedness and the importance of visitation. Increased understanding can also be achieved through the appointment of a social worker or departmental representative for prisoners' families. Notably, both of these options have been suggested to MDOC by FAB representatives utilizing models akin to the Family Services Program operated by the Washington State Department of Corrections (WSDC). Washington has acknowledged the vital role families play during incarceration and the reentry process and has since strived to identify the challenges faced by prisoners' families and provide support and services relative to their needs (Washington State Department of Corrections, 2019). In addition to offering Family-Centered Programming, this program has created a professionalized position known as Family Service Specialist. While there are only four operating across all Washington correctional facilities, Family Service Specialists work with family members of prisoners to supply them with information about family-centered activities and events, help them navigate the correctional system, connect them to services, and provide assistance in finding what they need (Washington State Department of Corrections, 2019). This program provides a more customer-service based approach towards prisoners' families, which would be a positive change from the lack of services currently available from a majority of correctional departments. Providing continuity of care to prisoners' families may lead to them feeling more welcomed when they arrive for visits, which can hopefully lead to an environment that is more accepting and respectful of their needs. It is important to address visitor satisfaction as results demonstrate the fear and anxiety treatment by prison staff can cause.

Third, while this study recognizes the importance of social support for inmates, results also demonstrate the vital need for correctional systems to listen to family members of prisoners and foster a working relationship with them. Providing a more welcoming and understanding atmosphere is a good place to start. However, prison officials should examine if models for recidivism and offender success incorporate opportunities for family connectedness. For instance, the mission of MDOC's Offender Success Model is to "... reduce crime by implementing a seamless plan of services, supervision, and opportunities" yet this mission is accomplished "... by targeting service provision to meet the identified needs of returning offenders, thereby reducing their risk of recidivism and enhancing employment opportunities" (Michigan Department of Corrections, Offender Success, 2019). While providing education and job training for future employment is necessary for successful reentry, their model does not acknowledge the importance of the prisoner-family relationship – at least beyond visitation, which is highly restricted under current policy directives. Family members of prisoners are an underutilized and essentially untapped source of knowledge, and should therefore be consulted in the drafting and amending of visitation policies and those concerning the prisoner-family relationship. Being more inclusive towards prisoners' families and other potential visitors may have a direct impact on social support for their incarcerated loved ones, but may also potentially provide the social support they need themselves in order to maintain their visits. However, these are not new issues as several of these policy recommendations were made in the 1970s, when Baker and colleagues (1978) first suggested correctional departments listen to the needs of prisoners' families and aid in providing transportation and travel expenses. Realizing these requests went unanswered, Casey-Acevedo and Bakken (2002) reminded prison administration and state governments again for the need to expand resources "... because families and friends of

inmates do not have the means to visit” (pg. 68). Nearly twenty years later, results from this study amplify, yet again, the need to listen to these forgotten victims.

Finally, as evidence increasingly points to the benefits of inmate visitation, it is important to consider what results could mean for future sentencing practices and policies. For instance, should a prison be located too far away for a family to travel, or if they prove themselves to be indigent and cannot afford the costs associated with visitation, then perhaps a greater use of intermediate punishment might be called for. Placing the offender on probation, house arrest, or utilizing day release or day reporting would all be ways of meting out punishment that would not necessarily take them out or away from their home and family. This would also provide additional opportunities to include prisoners’ families in both the discussion and decision-making process, as well as utilize their knowledge and expertise in developing policies that are beneficial for all involved. As Lois and other CPR and FAB members would repeatedly remind MDOC, “The real punishment is keeping families apart.”

APPENDICES

APPENDIX A

Description of Support Groups

Citizens for Prison Reform (CPR)

Citizens for Prison Reform is a grass-roots, family-led initiative that engages, educates, and empowers those affected by crime and punishment to advance their constitutional, civil and human rights (Citizens For Prison Reform, 2019b). It is an organization made up of prisoners' loved ones and concerned citizens, and assists prisoners' families and friends in navigating the corrections system. Formed in 2011 by Lois Pullano, a mother whose 15-year-old son was incarcerated in an adult prison, CPR originally began as a letter writing campaign in 2008 aimed to educate state legislators and spread awareness of the treatment of juveniles in the Michigan Department of Corrections (MDOC) adult prison system.

CPR holds monthly educational and support meetings in Lansing and is operated entirely by volunteers. They are also responsible for organizing and hosting Legislative Education Day, which brings together family members, friends, advocates, those who are formerly incarcerated, and state legislators each year at the Michigan State Capitol (Citizens for Prison Reform, 2019b). CPR is currently funded by private donations and small grants, and became a nonprofit organization with 501(c)3 status in September of 2012.

In addition to monthly meetings, CPR also engages in a fair amount of online participation as several members live more than 2 hours away from Lansing and cannot attend every meeting. By making video recordings of meetings available for download on their website, as well as using social media platforms such as Facebook and Twitter, members can stay in touch virtually if they are not able to regularly attend meetings in person. More importantly, online access can further open up membership not only statewide, but also nationally and globally. For example, CPR's public Facebook group page currently has 5,416 members, a higher amount than any other support group observed in the sample. Some members have even presented at the International Prisoner's Families Conference held annually in Dallas, Texas. A total of twelve ($N=12$) interview participants are currently active members of CPR, with three of these participants also holding positions on the CPR Board of Directors. If you count interview participants who utilize the CPR Facebook page, this number increases to nineteen ($N=19$).

Family Advisory Board (FAB)

An extension of the Family Participation Program pilot program, the Family Advisory Board was created and held its first quarterly meeting with MDOC administration in May 2015. Meetings continue today and are held in downtown Lansing in a conference room located within Department's main office building. Like CPR and FPP, their work is accomplished on a volunteer basis by those currently serving as board members. Members of the board are purposively made up of family members of prisoners, returned citizens, and those who have been impacted by incarceration at some point in their lives. In addition to meeting quarterly with the Legislative Liaison to MDOC, FAB board members engage in monthly conference calls, as well as intermittent work assignments and/or research to assist in promoting family connectedness, as well as efforts to maintain the prisoner-family relationship across MDOC facilities. Four ($N=4$) interview participants currently volunteer as FAB Board Members.

Family Participation Program (FPP)

The Family Participation Program was created as a grant-funded project by members of CPR. Lois, the mother who started CPR, was selected as a 2014 Soros Justice Fellowship recipient to continue this work. Her aim was to implement a family support network within MDOC correctional facilities. Thus, FPP was launched within four pilot prisons across Michigan: Ernest C. Brooks Correctional Facility and West Shoreline Correctional Facility in Muskegon; Macomb Correctional Facility in New Haven; and Central Michigan Correctional Facility in St. Louis. Within these facilities, volunteer family advocates were trained to work with families visiting at the pilot sites, as well as any families or loved ones referred to the program via email or phone. Workshops were also held in various communities located in Lansing, Metro Detroit, and Muskegon, and aimed to reach out to those who are currently dealing with incarceration or for individuals who would like to assist those who are incarcerated (Family Participation Program, 2019). I was able to observe one of the workshop sessions held in Lansing in 2015 as part of my qualitative field research for my graduate course (SOC 985).

In short, FPP is concerned with “helping families and other loved ones of the incarcerated navigate the system, get connected, and stay connected” (Family Participation Program Facebook, 2019). FPP meets its goals by providing a space in which families of prisoners feel supported and can be given the tools necessary to have a more positive experience. However, when funding for FPP ended, CPR continued the work started by FPP. Families originally connected through FPP continue to receive assistance from trained volunteers, but workshops are no longer held. Instead, family members are encouraged to attend CPR monthly meetings and get involved with that group if they are able. Funding to provide full-time support to families is currently being sought by CPR Board of Directors, and efforts to expand the FPP are planned once additional funding is obtained (Family Participation Program, 2019). One ($N=1$) interview participant in the sample also serves as an FPP volunteer in addition to their work with CPR and the Family Advisory Board.

Humanity for Prisoners (HFP)

Formed in 2001 by a defense attorney, Humanity for Prisoners (HFP) is a nonprofit organization that provides, promotes and ensures personalized, problem-solving services for incarcerated persons in order to alleviate suffering beyond the just administration of their sentences (Humanity for Prisoners, 2019). They are particularly focused on wrongful convictions and the overall health and wellness of prisoners. For instance, their “action with compassion” plan relies on a team of volunteers across professional fields to addresses issues surrounding medical care, terminal illness, mental illness, disability issues, and preparation for upcoming reviews, hearing, or meetings with the parole board (Humanity for Prisoners, 2019). As 90% of Michigan prisoners will eventually be released, a major goal of HFP is practical assistance to help prepare citizens for reentry (Humanity for Prisoners, 2019).

While this organization does not host monthly support group meetings, HFP does have a heavy presence on the both the north and western side of Michigan and frequently works with prisoners incarcerated in facilities located in the Upper Peninsula. Similar to CPR, they also have a strong online presence. In addition to an informative website, members can also access each other through a public Facebook group page. Eight ($N=8$) interview participants were active in HFP and cited this group for helping them navigate and manage the visitation process, for providing them with education and awareness towards mass incarceration and the criminal

justice system, and in turn, eventually learning how to better deal with their incarcerated loved one's sentence.

Prison Ministry Support/Re-entry Group (Prison Fellowship)

Prison Fellowship is the world's largest Christian nonprofit organization for prisoners, former prisoners, and their families. They also serve as an advocate for justice reform. Their mission "... seeks to restore those affected by crime and incarceration by introducing prisoners, victims, and their families to a new hope available through Jesus Christ" (Prison Fellowship, 2019). They typically accomplish this through trainings to inspire church and communities – both inside and outside of prison – to support the restoration of those affected by incarceration (Prison Fellowship, 2019).

Outside of prison, this group collaborates with churches, para-church organizations, and local service providers to support families with incarcerated loved ones and people affected by crime (Prison Fellowship, 2019). One of these collaborations is with Hope Community Church located in Detroit, Michigan, and its Prison Fellowship chapter is known as the Prison Ministry Support/Re-entry Group. Meetings are held twice a month on first and third Friday evenings. Besides being active in their church, members of this support group are concerned with prisoner reentry in the Metro Detroit area and connecting parolees and their families to resources available in the community. Although several members of this group were recruited to be interviewed, only one participant ($N=1$) completed an interview who was active in this group.

Michigan Chapter of Citizens United for the Rehabilitation of Errants (MI-CURE)

MI-CURE is a chapter of the national grassroots justice reform organization, CURE, and works from a bottom-up approach in that it does not hire professional leaders. Instead, its leaders are typically from the ranks of those who are formerly incarcerated, as well as their family members and friends (CURE, 2019). Thus, members of CURE are also largely prisoners, ex-prisoners, and family members and friends of prisoners. Members work to educate and inspire individuals to advocate for themselves and for improvements in the Michigan criminal justice system. This is done through the publication of a quarterly newsletter, self-help literature, and hosting an annual membership meeting. MI-CURE and CURE do not advocate on behalf of individuals, provide legal assistance, or direct services. Their work is done on small budgets without paid staff to ensure that both leader and members act with their best interest in mind (CURE, 2019). Another important feature of CURE is that it is secular, and all should feel welcome, regardless of their religious beliefs or lack of religious affiliation (CURE, 2019).

The President of MI-CURE currently publishes newsletters out of her home in Kalamazoo and bi-monthly meetings are held in Lansing for Board Members. Notably, this group is very small but reaches many touched by incarceration across the state of Michigan through their quarterly newsletters. While no members of MI-CURE were interviewed for this study, the researcher volunteers her time to the Board, which helped provide additional insight related to barriers to visitation and MDOC policies and practices. Other board members have previously been involved in CPR and continue to update the group on issues related to visitation and family connectedness. Approved meeting minutes for MI-CURE proved to be beneficial in triangulating both participant observations and interview responses.

Michigan Citizens for Justice

Michigan Citizens for Justice (MCJ) is an advocacy and support group for Michigan sex offenders and their families. The mission of MCJ is to “provide support, encouragement and information that will be a positive tool for working together to reform the current law and policies, so that they will be fact-based and will not only promote public safety, but honor human dignity, and offer holistic prevention, healing, and restoration” (Michigan Citizens for Justice, 2019). The overall goals of MCJ are to provide support, advocacy, and public education. An affiliate organization of Reform Sex Offenders Laws, Inc., it is also one of the 50 organizations part of the nationwide movement to reform sex offender laws in the United States (Michigan Citizens for Justice, 2019).

Support groups are peer-led and provide a safe space where rejected and hurt people can be a community to each other (Michigan Citizens for Justice, 2019). Monthly meetings are currently held in Ann Arbor and Kalamazoo. While support group crossover was observed between CPR and MCJ members, due to the nature of this group and need for increased levels of privacy, meetings for this specific support group were not observed. However, three (N=3) interview participants happened to be members of this group and were able to at least discuss benefits of being a member of MCJ.

Michigan Families Along for the Ride with Pride

Another virtual space for family members to connect, Michigan Families Along for the Ride with Pride is a private Facebook group for families with inmates in the MDOC. It serves as a safe place to ask questions, seek and gain information on how MDOC facilities work, look for support, and to simply just talk. A take on the phrase “ride or die,” this group recognizes that they are riding alongside their incarcerated loved one with pride and to not be ashamed by their sentence. The group currently has 1,271 members. Similar to Michigan Citizens for Justice, this online support group was not accessed out of respect for privacy of its members. A small amount of interview participants (N=4) disclosed utilizing this private Facebook group in addition to their membership to CPR or other related support groups.

APPENDIX B

Interview Questionnaire

These first questions are more general in nature and help me become more familiar with the relationship between you and your incarcerated loved one, including how long they have been incarcerated, what facility they are currently being held, and what your current visitation pattern and process looks like.

General Background

1. Can you begin by telling me a little bit about your relationship with your incarcerated loved one?

PROMPTS:

- How long have they been incarcerated?
- What correctional facility are they currently being housed at?
- What security level is your incarcerated loved currently assigned to?
- What is the current visitation schedule for your incarcerated loved one?

2. When did you first start visiting your incarcerated loved one?

PROMPTS:

(Probe for detail depending on how many facilities they have visited in the past year)

- What does your current visitation schedule look like?
- How often do you visit? (Approximate times per month)

Thank you for sharing your experiences. This next set of questions continues to focus on your experiences with navigating and managing the visitation process. In other words, the process you go through before, during, and after each visit. This can also include any tips or tricks you might have learned along the way, or resources you may utilize to help guide you through this process.

Navigating the Visitation Process

3. Thinking back to when your loved one was first incarcerated; how did you initially try to obtain information regarding visitation?

PROMPTS:

- What did you do?
- Where do you remember first looking for information?

4. What does your current planning process look like when making a visit?

PROMPTS:

- In other words, can you walk me through what happens “before” the visit?
- Where do you start?

5. Again, thinking back to when your incarcerated loved one was first incarcerated, did you use any resources to help you navigate this process? If so, what? Please explain.

PROMPTS:

- Do you remember when you first started using resources to help with visitation?
 - What prompted you to seek them out?
 - What was the outcome?
 - Did you find this helpful or hurtful? Please tell me more about your experience(s).
- Did you utilize or ask for help from other family members and friends?
 - What prompted you to seek out this resource?
 - What was the outcome?
 - Did you find this helpful or hurtful? Please tell me more about your experience(s).
- Did you utilize any support groups for family members of prisoners?
What prompted you to seek out this resource?
 - What prompted you to seek out this resource?
 - What was the outcome?
 - Did you find this helpful or hurtful? Please tell me more about your experience(s).

Again, thank you for sharing your experiences in detail. These next questions will focus on how you manage barriers to visitation. We will highlight the areas of distance, cost, time, barriers created by administrative rules and/or prison staff once you arrive to facility, as well as emotional barriers you may experience before, during, or after a visit. If there are other barriers that you experience that are not mentioned here, you will have a chance to discuss them openly towards the end of this section.

Managing Barriers to Visitation

These first questions will focus on distance and how far you must travel to visit.

Distance:

6. You mentioned that you currently travel to [*INSERT NAME OF FACILITY HERE*] correctional facility, can you begin to describe the average distance you travel roundtrip to complete a visit? (Approximate hours or miles per visit)
7. Thinking back on all your previous visits, what is the shortest distance you have had to travel to complete a visit?
8. And similarly, thinking back on all your previous visits, what is the longest distance you have had to travel to complete a visit?
9. How do you get to and from the correctional facility?

PROMPTS:

- What is your primary mode of transportation?
- Would you say your transportation is reliable?
- Have you used any other type of transportation to make a visit? If so, can you tell me more about your experience?

10. How can transportation be a barrier for visitation to you? Please explain. (*If applicable*)

PROMPTS:

- How do you think transportation can serve as a benefit for you? In other words, do you find anything positive in your current transportation situation when completing a visit?

11. How can distance be a barrier to visitation for you? Please explain.

PROMPTS:

- How do you think distance can serve as a benefit for you? In other words, do you find anything positive in how far you must travel to complete a visit?

12. Relatedly, how can transportation be a barrier for visitation to you? Please explain.

PROMPTS:

- How do you think transportation can serve as a benefit for you? In other words, do you find anything positive in your current transportation situation when completing a visit?

These next few questions will ask you about some of the various costs involved when completing a visit, including costs related to maintaining communication.

Cost:

13. Thinking back on all your previous visits, how much does a single roundtrip visit to prison typically cost you? What is your best estimate?
14. In general, can you tell me how you plan (or budget) for the cost it takes to complete a visit?
15. What other costs have you incurred to maintain communication with your incarcerated loved one?

PROMPTS:

- In other words, how else do you spend your money?
 - Commissary account?
 - Phone calls? (GTL)
 - Email account (J-Pay)
 - Letters/postage
 - Sending a Secure-Pak?
 - Any other costs?

16. How can cost be a barrier to visitation for you? Please explain.

PROMPTS:

- How do you think cost can serve as a benefit for you? In other words, do you find anything positive in how much you must spend to complete a visit or maintain communication with your incarcerated loved one?

These next questions focus on the issue of time and long it takes you to complete a visit, including the travel time to get to the correctional facility, visitor processing, and other “waiting time” once you arrive.

Time:

17. Can you begin by taking me through the timeline of your visit from when you A) start your commute to the correctional facility, until B) the moment you return home? Please feel free to describe in as much detail as needed.

PROMPTS:

- What does that process look like?
- How long (in hours) does a single roundtrip visit typically take?

18. Thinking back on all your previous visits, how long (in minutes/hours) does it usually take to process you through the facility and into the visiting room?
19. Once you arrive to the visiting room, how long does a typical visit last once you sit down with your incarcerated loved one?

PROMPTS:

- Does this amount of time vary with each visit?
- Do you feel like you get enough time during your visit?

20. How can time be a barrier to visitation for you? Please explain.

PROMPTS:

- How do you think time can serve as a benefit for you? In other words, do you find anything positive in how much time it takes to complete a visit?

These next questions will ask your opinions and experiences related to administrative rules and issues with prison staff that may affect visitation with your incarcerated loved one.

Administrative Rules and/or Issues with Prison Staff

21. Has there ever been a time that you have been denied a visit upon your arrival?

PROMPTS:

- What happened? Please explain.
- Which correctional facility did this event(s) occur at?
- Was the issue resolved in any way? How?
- If it was not resolved, what did you do afterwards?
- How often has this happened in the past 12 months?

22. Has there ever been a time that your visit has been terminated early?

PROMPTS:

- What happened? Please explain.
- Which correctional facility did this event(s) occur at?
- Was the issue resolved in any way? How?
- If it was not resolved, what did you do afterwards?
- How often has this happened in the past 12 months?

23. Thinking back on all your previous visits, have you ever experienced any correctional facility closures and/or consolidations?

PROMPTS:

- What happened? Please explain.
- Which correctional facility did this event(s) occur at?
- Was the issue resolved in any way? How?
- If it was not resolved, what did you do afterwards?
- How often has this happened in the past 12 months?

24. Thinking back on all your previous visits, have you ever experienced having your incarcerated loved one transferred to another facility?

PROMPTS:

- What happened? Please explain.
- Which correctional facility did this event(s) occur at?
- Was the issue resolved in any way? How?
- If it was not resolved, what did you do afterwards?
- How often has this happened in the past 12 months?

25. Thinking back on all your previous visits, have you ever experienced a loss of visits or having your visits taken away?

PROMPTS:

- What happened? Please explain.
- Which correctional facility did this event(s) occur at?
- Was the issue resolved in any way? How?
- If it was not resolved, what did you do afterwards?
- How often has this happened in the past 12 months?

26. Has there ever been a time that your visit was affected by dress code regulations?

PROMPTS:

- What happened? Please explain.
- Which correctional facility did this event(s) occur at?
- Was the issue resolved in any way? How?
- If it was not resolved, what did you do afterwards?
- How often has this happened in the past 12 months?

27. Besides the experiences you already provided, has there ever been a time when you felt an administrative rule or policy presented additional barriers to visitation? In other words, did a rule or policy prevent you from visiting your incarcerated loved one in some way?

PROMPTS:

- What happened? Please explain.
- Which correctional facility did this event(s) occur at?
- Was the issue resolved in any way? How?
- If it was not resolved, what did you do afterwards?
- How often has this happened in the past 12 months?

28. Besides the experiences you already provided, has there ever been a time when you felt issues with prison staff or their treatment towards you presented additional barriers to visitation? In other words, have prison staff prevented you from visiting your incarcerated loved one in some way?

PROMPTS:

- What happened? Please explain.
- Which correctional facility did this event(s) occur at?
- Was the issue resolved in any way? How?
- If it was not resolved, what did you do afterwards?
- How often has this happened in the past 12 months?

29. How can administrative rules be a barrier to visitation for you? Please explain.

PROMPTS:

- How do you think administrative rules can serve as a benefit for you? In other words, do you find anything positive in current policies or administrative rules surrounding visitation?

30. How can issues with prison staff be a barrier to visitation for you? Please explain.

PROMPTS:

- How do you think prison staff can serve as a benefit for you? In other words, do you find anything positive in engaging with prison staff when completing a visit?

We're almost done with this section. Thank you for remaining patient as we get through these questions. These next set focuses on emotional barriers you might experience. Please know that these questions are in no way intended to upset you, cause any emotional harm, or feelings of hurt or discomfort. Sometimes family members tend to see the physical barriers and do not always recognize some of the emotional barriers that may influence their visitation. If at any time you wish to stop answering these questions, or wish to refuse, please tell me and I will move on to the next question, or the next section if need be.

Emotional Barriers:

31. Can you begin by first telling me how you typically feel *before* making a visit to see your incarcerated loved one?

PROMPTS:

- What emotions or feelings arise as you prepare to see them?
- When do you start to feel these emotions before your visit?
- How long do these feelings typically last?
- Do these feelings ever cause you to rethink your visitation in any way? How so?
- How often has this happened in the past 12 months?

32. Can you tell me how you typically feel *during* a visit with your incarcerated loved one?

PROMPTS:

- What emotions or feelings arise as you sit down with them in the visiting room?
- When do you start to feel these emotions during your visit?
- How long do these feelings typically last?
- Do these feelings ever cause you to rethink visitation in any way? How so?
- How often has this happened in the past 12 months?

33. Can you tell me how you typically feel *after* completing a visit with your incarcerated loved one?

PROMPTS:

- What emotions or feelings arise after your visit is over?
- When do you start to feel these emotions after your visit?
- How long do these feelings typically last?
- Do these feelings ever cause you to rethink your visitation in any way? How so?
- How often has this happened in the past 12 months?

34. Can you tell me how you typically feel when you are not able to complete a visit for some reason, denied a visit with your incarcerated loved one, or have your visit terminated early?

PROMPTS:

- What emotions or feelings arise as when you cannot see them?
- When do you start to feel these emotions before your visit?
- How long do these feelings typically last?
- Do these feelings ever cause you to rethink your visitation in any way? How so?
- How often has this happened in the past 12 months?

35. Has there ever been a time that you decided to stop visiting?

PROMPTS:

- If so, why? Can you tell me more about that?
- How long did you stop visiting?
- Did you begin to visit again at some point? If so, when?
- How often has this happened in the past 12 months?

36. Do you feel there are any complexities in the relationship between you and your incarcerated loved one?

PROMPTS:

- How does this relationship make you feel? What emotions or feelings arise for you?
- How long do these feelings typically last?
- Do these feelings ever cause you to rethink your visitation in any way? How so?
- How often has this happened in the past 12 months?

37. How can your emotions be a barrier to visitation for you? Please explain.

PROMPTS:

- How do you think your emotions can serve as a benefit for you? In other words, do you find anything positive in the various emotions that arise when completing a visit?

While we have covered several categories of barriers to visitation, here is where I would like you to tell me what *other* barriers you have personally experienced that I have not yet asked you about.

Other Barriers to Visitation:

38. Are there any other barriers to visitation that you have experienced? What are they? Can you tell me more about them?

PROMPTS:

- Do you work? If so, part-time or full-time? Can employment or your work schedule be a barrier to visitation for you? Please explain.
- Do you have dependent children? If so, how many? Can raising children, securing childcare, or visiting with minor children be a barrier to visitation for you? Please explain.
- Do you have elderly family members that are dependent on you? Can taking care of them, securing supervision, or visiting with elderly family members be a barrier to visitation for you? Please explain.
- What about the physical wear and tear of the body? Can physical reactions of your body be a barrier to visitation for you? Please explain.

Thank you for taking the time to dig deep and share the barriers that you attempt to manage. Our final section focuses on how support groups can affect your visitation process. For these next few questions, I want you to think about your membership and experiences with support groups for family members of prisoners – or any other groups that you might be active with or utilize in your process.

Support Group Membership

39. Are you currently a member of a support group for family members of prisoners?

PROMPTS:

- If YES, what is the name of the group(s) you are a member of?
- When did you first learn about this group?
- When did you first join the group?
- How long would you say you have been a member?
- Are you a member or active with any additional support groups?

40. Can you tell me a little bit more about why you joined the group? What interest did you have in joining?

PROMPTS:

- Would you consider yourself to be active in the group? Please tell me more about your membership and participation.
- How often do you attend meetings?

41. What does this support group mean to you?

PROMPTS:

- In other words, how has being a member of this group affected how you navigate or manage your visitation process *now*?

42. Do you feel being a member of this support group (or other support groups) has taught you something about ***navigating*** the visitation process?

PROMPTS:

- In other words, have you learned anything new related to finding visitation information or planning your visit?

43. Do you feel being a member of this support group (or other support groups) has taught you something about ***managing*** various barriers to the visitation process?

PROMPTS:

- In other words, have you learned anything new related to addressing the barriers of distance, cost, time, dealing with administrative rules or prison staff, or managing any emotional barriers?

Finally, these last questions are simply to ask you what else can be covered. I know we talked about a lot, but I would like to know what other areas related to prison visitation needs to be discussed. I want to thank you again for all your time, knowledge, energy, and expertise to complete this interview with me. I look forward to analyzing our discussion and will be in touch for any feedback or clarification I may need.

In the meantime, though ...

Miscellaneous Questions / Checking in with Participants:

44. Are there any other issues or barriers to visitation we did not cover today that you would like to discuss?
45. Are there any other questions related to prison visitation this interview did not ask that you think it should?
46. If given the chance to share your experience with someone who does not have an incarcerated loved one, what would you want them to know about your experience or want them to understand?
47. Where do you see issues surrounding prison visitation going in the future or what are some of your concerns?

APPENDIX C

Interview Participant Classification Questions

Classification Questions/Demographics

C-1. What is your date of birth? ____/____/____

C-2. What is your race/ethnicity?

____ White (Non-Hispanic) ____ Hispanic/Latino ____ Other (Please specify):
____ White (Hispanic/Latino) ____ Black ____ Don't know
____ Asian ____ Native American ____ Refused
____ Native Hawaiian/Pacific Islander

C-3. What do you consider to be your gender?

____ Male ____ Don't know
____ Female ____ Refused
____ Other (please specify)

C-4. What is the zip code of your current place of residence?

C-5. What is the highest level of education you have completed?

____ Some elementary school	____ Associates' Degree (2 yr degree)
____ Graduated elementary school	____ Bachelor's Degree (4 yr degree)
____ Some high school	____ Some graduate studies
____ Graduated high school	____ Obtained graduate degree
____ GED	(Master's, Ph.D., J.D. M.D.)

C-6. Which of the following ranges best describes your annual household income?

<input type="checkbox"/> \$0 to \$14, 999	<input type="checkbox"/> \$45,000 to \$59,999	<input type="checkbox"/> Don't know
<input type="checkbox"/> \$15,000 to \$29,999	<input type="checkbox"/> \$60,000 to \$74,999	<input type="checkbox"/> Refused
<input type="checkbox"/> \$30,000 to \$44,999	<input type="checkbox"/> More than \$75,000	

C-7. What is your current marital status?

<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Separated
<input type="checkbox"/> Divorced	<input type="checkbox"/> Widowed	<input type="checkbox"/> Intimate Partnership
<input type="checkbox"/> Never Married	<input type="checkbox"/> Don't Know	<input type="checkbox"/> Refused

C-8. How many dependent children do you currently live in your household?

<input type="checkbox"/> 1 – 3	<input type="checkbox"/> 7 – 10	<input type="checkbox"/> Don't know
<input type="checkbox"/> 4 – 6	<input type="checkbox"/> Over 10	<input type="checkbox"/> Refused
<input type="checkbox"/> 5 – 7	<input type="checkbox"/> No dependent children	

C-9. What is the relationship between you and your incarcerated loved one?

<input type="checkbox"/> Spouse/Intimate Partner	<input type="checkbox"/> Sibling	<input type="checkbox"/> Other relation or kin
<input type="checkbox"/> Inmate Partner	<input type="checkbox"/> Parent/Child	<input type="checkbox"/> Friend (No relation)

Specify Relationship

Participant:

Incarcerated Loved One:

Example: Husband/Wife, Boyfriend/Girlfriend, Mother/Son, Brother/Sister, etc.

C-10. What is the gender of your incarcerated loved one?

___ Male

___ Don't know

___ Female

___ Refused

___ Other (please specify)

APPENDIX D

Master Codebook

Name	Description
RQ1: Navigating the Visitation Process	The parent node of NAVIGATING THE VISITATION PROCESS refers to the process family members of prisoners go through before, during, and after each visit. This can also include any tips or tricks learned along the way, or resources prisoners' families may utilize to help guide them through the visitation process. Navigating the visitation process also includes identifying the barriers they may face when trying to schedule a visit.
Finding Information	The child node of FINDING INFORMATION refers to the moments when family members of prisoners are finding and requesting information related to the visitation process.
Planning the Visit	The child node of PLANNING THE VISIT refers to the moments when family members of prisoners logistically organize themselves and the various strategies they use to get ready and ensure everything is in place before they leave.
Visitor Application Process	The child node of VISITOR APPLICATION PROCESS refers to the moments when family members of prisoners submit their application to be approved for visitation. While it sounds like a simple process, it takes time, knowledge, skill, and the ability to follow directions that are not always clear.
RQ2: Managing Barriers to Visitation	The parent node of MANAGING BARRIERS TO VISITATION refers to the barriers they must consistently manage to continue or keep up their visitation. These barriers include distance, cost, time, institutional barriers, emotional barriers, and other barriers such as employment, medical issues, and visiting with children or elderly family members.
Distance	The child node of DISTANCE refers to how far family members of prisoners must travel to complete a visit.
Cost	The child node of COST refers to the amount of money family members of prisoners must spend in order to complete a visit, including costs related to maintaining communication such as phone calls, letters, emails, putting money into commissary accounts and other related expenses.

Name	Description
Time	The child node of TIME refers to how long it takes family members of prisoners to complete a visit, including the travel time to get to and from the correctional facility, how long it takes to get processed into the visiting room, and other various “waiting time” once they arrive.
Other Barriers	The child node of OTHER BARRIERS refers to additional barriers that impede the visitation process such as employment, caring for dependent children or trying to obtain childcare, visiting with an elderly family member, or medical issues that can prevent addition challenges to planning and/or completing the visit.
Employment	The child node of EMPLOYMENT refers to the other barriers that can arise when completing a visit due to being employed and/or maintaining a work schedule.
Medical Issues	The child node of MEDICAL ISSUES refers to the other barriers that can arise when completing a visit due to medical issues such as needing to use a wheelchair, supportive device, or to take medication at a certain time.
Visiting with Children and Minors	The child node of VISITING WITH CHILDREN AND MINORS refers to the other barriers that can arise when completing a visit with children and approved minors.
Visiting with Elderly Family Members	The child node of VISITING WITH ELDERLY FAMILY MEMBERS refers to the other barriers that can arise when completing a visit with senior citizens and/or elderly family members who may need additional care or support during their visit.
Institutional Barriers	The child node of INSTITUTIONAL BARRIERS refers to additional barriers that impede the visitation process related to administrative rules and issues with prison staff. Institutional barriers also include secondary prisonization (Comfort, 2003) and how family members of prisoners are treated by correctional staff.
Forming Strategic Relationships	The child node of FORMING STRATEGIC RELATIONSHIPS refers to a response to institutional barriers that family members or prisoners may choose to engage in when completing a visit. Examples of forming strategic relationships include getting to know prison staff that process visitors, as well as becoming familiar with prison staff that supervise the visitation room.

Name	Description
Loss of Visits	The child node of LOSS OF VISITS refers to a type of institutional barriers that family members or prisoners may experience when completing a visit. Notably, the Michigan Department of Corrections has an administrative rule allowing the revocation of visitation privileges for the following: substance abuse tickets, contraband, or sexually inappropriate behavior.
Secondary Prisonization and Treatment by Prison Staff	The child node of SECONDARY PRISONIZATION AND TREATMENT BY PRISON STAFF refers to a type of institutional barrier that family members of prisoners may experience when completing a visit. Examples of secondary prisonization include rude treatment by prison staff, the application of strict and repressive rules for prisoner's families, and the assumption that they are "guilty by association." In short, the attitudes and behavior projected onto these "underserving victims."
Terminating Visits	The child node of TERMINATING VISITS refers to a type of institutional barriers that family members or prisoners may experience when completing a visit. Similar to the child node of Loss of Visits, the Michigan Department of Corrections has an administrative rule allowing the termination of visits for violating rules and policy directives, but also if visiting room conditions are overcrowded.
Emotional Barriers	The child node of EMOTIONAL BARRIERS refers to additional barriers that impede the visitation process related to how family members of prisoners may feel before, during, or after completing a visit. While the physical barriers of distance, cost and time are easily recognized, the emotional barriers that may arise due to the complexities of the prisoner-family relationship are not so easily detectable. Additionally, how family members feel can in turn influence their visitation schedule.
After the Visit	The child node of AFTER THE VISIT refers to how family members of prisoners feel after completing a visit and the feelings that may arise as they get ready to leave the correctional facility and drive back home.
Before the Visit	The child node of BEFORE THE VISIT refers to how family members of prisoners feel before leaving for their visit and what feelings may arise as they get ready for their arrival to the correctional facility.

Name	Description
During the Visit	The child node of DURING THE VISIT refers to how family members of prisoners feel during their visit and what feelings may arise as they spend time with their incarcerated loved one.
Emotions as Motivation	The child node of EMOTIONS AS MOTIVATION refers to the various ways in which family members of prisoners may choose to utilize their emotions as a source of motivation to continue their visits and maintain the prisoner-family relationship.
Riding an “Emotional Rollercoaster”	The child node of RIDING AN EMOTIONAL ROLLERCOASTER refers to the various emotional responses family members of prisoners may experience during their incarceration, as well as how they feel about maintaining the prisoner-family relationship.
RQ3: Benefits of Support Group Membership	The parent node of BENEFITS OF SUPPORT GROUP MEMBERSHIP refers to the various reasons why family members of prisoners seek out and join support groups, as well as what they generally get out of being a member. In other words, this node aims to capture perceptions of what support group membership means to prisoners' families and how they utilize the groups they are involved in.
Finding “Like-Minded” People	The child node of FINDING LIKE-MINDED PEOPLE refers to a benefit of support group membership where family members of prisoners can meet others in similar situations and know that they will understand what they are going through.
Normalization	The child node of NORMALIZATION refers to a benefit of support group membership where family members of prisoners begin to feel normalcy in having an incarcerated loved one as they realize that every day people are also going through the same thing. Other examples of normalization also include shedding or letting go feelings of stigma or shame related to having an incarcerated loved one.
Support Groups as Advocacy	The child node of SUPPORT GROUPS AS ADVOCACY refers to a benefit of support group membership where family members of prisoners may choose to engage in a leadership role, develop more of a political identity, and learn how to become an advocate for their incarcerated loved one from other family members active in support groups.
Support Groups as Motivation	The child node of SUPPORT GROUPS AS MOTIVATION refers to a benefit of support group membership where family members of

Name	Description
	prisoners are able to generate motivation to continue visits and maintaining the prisoner-family relationship.
Supports Groups as a Lifeline	The child node of SUPPORT GROUPS AS A LIFELINE refers to a benefit of support group membership where family members of prisoners are able to provide vital emotional support and proving to a be a “lifeline” for some members.
RQ4: Addressing Barriers Through Support Groups	The parent node of ADDRESSING BARRIERS THROUGH SUPPORT GROUPS refers to how family members of prisoners operate and learn from one another, which in turn helps them navigate and manage barriers to visitation. In other words, how family members of prisoners can build community and break down barriers to visitation together through their support group membership.
RQ5: Addressing Barriers Through Policy	The parent node of ADDRESSING BARRIERS THROUGH POLICY refers to how family members of prisoners getting politically involved with their state legislators and advocating for policy change. Examples of addressing barriers through policy include Citizen for Prison Reform's annual Legislative Education Day, the formation of the Family Advisory Board, and the importance of listening to prisoners' families and implementing their policy suggestions surrounding visitation.
Annual Legislative Education Day	The child node of ANNUAL LEGISLATIVE EDUCATION DAY refers to the various ways family members of prisoners address barriers to visitation through policy. Specifically, family members active in Citizens for Prison Reform use this annual event to present the goals and priorities of the group to local media, politicians, and key community stakeholders. Each Legislative Education Day focuses on a theme related to the prisoner-family relationship and the importance of family connectedness during incarceration.
Family Advisory Board	The child node of FAMILY ADVISORY BOARD refers to the various ways family members of prisoners address barriers to visitation through policy. Specifically, the Family Advisory Board (FAB) was created at the beginning of 2015 and meets quarterly with the Legislative Liaison to the Michigan Department of Corrections (MDOC). It is entirely volunteer-based, and its memberships include family members of prisoners, returned citizens, former correctional employees, and concerned citizens across Michigan.

Name	Description
Listening to Forgotten Victims	The child node of LISTENING TO FORGOTTEN VICTIMS refers to the various ways family members of prisoners address barriers to visitation through policy. Specifically, it is critical to acknowledge prisoners' families as "forgotten victims" and listen to their needs and policy suggestions surrounding the visitation process and maintenance of the prisoner-family relationship.
Standardization of Patient's Authorization for Disclosure of Health Information	The child node of STANDARDIZATION OF PATIENT'S AUTHORIZATION FOR DISCLOSURE OF HEALTH INFORMATION refers to the various ways family members of prisoners address barriers to visitation through policy. Specifically, this has been a major accomplishment related to policy that both CPR and FAB have been responsible for.

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