

'Lockdown's changed everything': Mothering adult children in prison in the UK during the COVID-19 pandemic

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Abstract

The COVID-19 pandemic occurred at a time when families of prisoners were gaining visibility in both academia and policy. Research exploring the experiences of families of prison residents has tended to focus on intimate partners and children, despite parents of those in prison being more likely than partners or children to maintain contact. The small body of work focusing on parents has identified their continued care for their children and highlights the burden of providing this care. With the ethics of care posing an ideological expectation on women to provide familial care, the care for adult children in custody is likely to fall to mothers. However, with restricted prison regimes, the pandemic has significantly impeded mothers' ability to provide this 'care'. Adopting a qualitative methodology, this paper explores the accounts of mothers to adult children in custody during the pandemic across two UK prison systems, England and Wales, and Scotland; exploring the negotiation of mothering in the context of imprisonment and the pandemic and highlighting important lessons for policy and practice.

Keywords

Mothering, prison, families of prisoners, lockdown, COVID-19

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Introduction

The COVID-19 pandemic had a global impact on prisons and prisoners (Blogg et al., 2021; Lemasters, McCauley, Nowotny and Brinkley-Rubinstein, 2020; Testa and Fahmy, 2021). Often overcrowded environments, characterised by congregate living, with limited health care provision, disease can spread easily (Lemasters et al., 2020; Mehay et al., 2020). With those residing in prison being from some of the most marginalised groups in society, they are also at greater risk of suffering more significantly from COVID-19 (Lemasters et al., 2020; Mehay et al., 2020).

The pandemic broke at a time when the needs and experiences of families of those in prison were gaining more visibility in both academia and policy (Booth, 2020; Woodall and Kinsella, 2017). In England and Wales, the Farmer Review (2017) concluded that prisoners' families were the 'golden thread' to effective resettlement. The review noted the importance of visits for maintaining and/or developing family ties (Farmer, 2017). However, during the pandemic face-to-face visits were suspended in most jurisdictions, impeding the maintenance of familial relationships (Testa and Fahmy, 2021). Equally, the increased risk of COVID to those in prison has resulted in families experiencing extreme anxieties (Testa and Fahmy, 2021). With families of prisoners across the globe equally more likely to have complex health needs themselves (Lockwood et al., 2021; Raikes et al., 2019; Woodall and Kinsella, 2017), the distress experienced is likely compounded by concerns for their own health and well-being during the pandemic.

Despite the growing awareness of the needs and experiences of families of prisoners, academic focus tends to be on intimate partners or children (Hutton, 2019). Whilst this is an important body of work, there is a dearth of knowledge in relation to the needs and experiences of parents of those in prison (Hutton, 2019). This gap in knowledge is significant as international research identifies that over half of parents in custody receive no visits from their children (Lockwood et al., 2021; Poehlmann-Tynan, 2015), and intimate partner relationship breakdown is common (Hutton, 2019); with parents more likely to maintain contact (Murray, 2003). The 'ethics of care', in which women are considered more likely to foster and maintain interpersonal relationships, poses an ideological expectation on women to provide familial care (Souza et al., 2019); the 'care' for adult children in custody is therefore more likely to fall to mothers. However, the pandemic has inevitably impeded mothers' ability to provide this 'care'. This paper adopts a qualitative methodology, bringing the accounts of mothers to adult children in custody in two different UK prison systems, England and Wales, and Scotland, during the COVID-19 pandemic to the centre of discussion.

COVID and the prison

Globally, prisons witnessed consistently higher COVID-19 infection and death rates than within the general population (Pagano et al., 2020; Vest et al., 2021). Those in prison are disproportionately from economically marginalised communities, and

therefore more likely to be exposed to COVID-19 (Lemasters et al., 2020). In most jurisdictions, prison residents also tend to have poorer health than the general population making them likely to suffer more acutely from the virus (de Oliveira Andrade, 2020; Lemasters et al., 2020; Mehay et al., 2020; Vest et al., 2021). The prison environment can also amplify the risk of infection with close living conditions and overcrowding making physical distancing challenging (de Oliveira Andrade, 2020; Pagano et al., 2020). Simpson and Butler (2020) note that 59% of all countries worldwide operate prisons at levels exceeding their capacity and link overcrowding to transmission of infection.

Early release procedures were approved in several jurisdictions for prisoners deemed high risk, with significant early releases noted in Brazil (de Oliveira Andrade, 2020), Turkey (Pakes, 2020) and Iran (Simpson and Butler, 2020). However, expected release figures were not realised in most countries. In America, Lemaster et al. (2020) identified that on average prison populations only decreased by 5%. Similarly, early release figures from the UK and Italy were also reported to be insufficient to limit infection spread (Pagano et al., 2020).

Although implemented at differing rates and intensity globally (Pakes, 2020), a range of restrictions and procedures were introduced within prisons, including physical distancing, increased cell time, suspension of face-to-face visits, mask wearing and increased cleaning (Blogg et al., 2021; Collica-Cox and Molina, 2020; de Oliveira Andrade, 2020; Lemasters et al., 2020; Pagano et al., 2020; Vest et al., 2021). Consequently, some prison systems were able to minimise the spread of the virus (New York, Collica-Cox and Molina, 2020; New South Wales – Australia, Blogg et al., 2021). Yet, many systems lack infrastructure to implement such measures; for example, de Oliveira Andrade (2020) note that Brazilian prisons have inadequate quarantining systems and rely on families of prison residents to bring in supplies, impeding their ability to limit infection spread. Similarly, reports highlighted an initial lack of personal protection equipment available to those residing in and working within prisons (Dutheil et al., 2020).

The pandemic also presented significant challenges to mental health and wellbeing (Carbone, 2020). The higher rates of mental disorder amongst those in prison coupled with the restrictive prison regime and lack of social support has increased prisoners' psychological vulnerability to the pandemic (Dutheil et al., 2020). Many prisoners have endured conditions consistent with indefinite solitary confinement, exposing them to the associated negative psychological effects (Shalev and Edgar, 2015). In England and Wales, prison residents reported more frequently using drugs and adopting other unhealthy strategies to manage their isolation (HMIP, 2021). Prison riots have also been witnessed in Italy (Pagano et al., 2020), Brazil (de Oliveira Andrade, 2020) and Sri Lanka (BBC, 2020). Significant negative consequences of the preventative strategies implemented in prisons during the pandemic have therefore already been identified (Dutheil et al., 2020; HMIP, 2021); and Dutheil et al. (2020) argue that these consequences will inevitably outlast the virus.

Families and the prison

Academic interest in families of prisoners has gained significant momentum over recent years (Hutton and Moran, 2019), particularly in jurisdictions such as America and the UK, that have experienced mass incarceration (Lanskey et al., 2019). The emergent body of academic work has brought attention to the social invisibility of families of those in prison; the financial and emotional impact of familial imprisonment (Jones et al., 2013; Long et al., 2019); disruption to roles and relationships (Lanskey et al., 2019); health implications (Hedwig et al., 2014); challenges of maintaining contact (Jones et al., 2013; Long et al., 2019); and stigma (McGinley and Jones, 2018). Gueta's (2017) meta-analysis of qualitative research incorporating parents of prisoners identified four key themes: parenting from a distance; the burden of care; troubled parental identity; and social reaction. Highlighting the global commonality of experience, the analysis drew on papers from the UK (Howarth and Rock, 2000; May, 2000; Holligan, 2016), America (Turanovic et al., 2012; Tasca et al., 2016), Portugal (Granja, 2016) and Australia (Halsey and Deegan, 2015). Building on Gueta's (2017) key themes, Hutton (2019) also identified parents as human rights protectors and acknowledged the psychological harm this labour causes.

There is limited research focusing specifically on the experiences of mothers with an adult child in custody (Condry, 2013). However, broader literature in relation to mothers to adult children identifies that although mothering can change, it often remains a significant role and identity for women as their children transition to and experience adulthood (Gilligan et al., 2015). However, nuanced understandings are identified. Where mothers identify that their children have successfully achieved an adult status, a more positive mothering identity is constructed (Smith, 2016); yet children's increased independence and absence can simultaneously negatively impact mothering identities (Green, 2010). Mothering adult children often involves providing ongoing support (Francis-Connolly and Sytniak, 2015). Yet, providing support for 'difficult' adult children can be constructed as a violation of maternal expectations with a sense of anger, disappointment and self-blame (Smith, 2016). Mothers of adult children in custody are at the juxtaposition of many of these complexities. As mothers often bear the burden of 'guilt by association', self-blame is common (Condry, 2013). Equally, their children are physically absent, whilst continually dependent. This is compounded by women's limited capacity to participate in mothering owing to their child's imprisonment. The pandemic has further impeded mothering owing to lockdown restrictions, potentially heightening and intensifying the challenges faced.

Methodology

This paper draws on in-depth qualitative interviews with mothers to adult children in custody during the COVID-19 pandemic across the prison systems of England and Wales, and Scotland. The research was supported by the University of Salford with formal approval secured from the university ethics committee. Participants

were provided with an information sheet and consent form to consider before agreeing to participate. Where possible, consent forms were signed and returned electronically, where not possible, consent was negotiated verbally and audio recorded.

Access was negotiated at two voluntary sector organisations in the UK supporting families of those in prison (one in Scotland and the second UK-wide), with a further two participants recruited via snowballing. Criteria for participation were women who self-identified as mothers with an adult child in custody during the COVID-19 pandemic.

Adhering to social distancing guidelines and travel restrictions in place at the time, data was collated via in-depth qualitative telephone interviews, typically lasting between 45 min and 2 h. With women's consent interviews were digitally recorded and transcribed. In total, this paper draws on interviews with 13 women; 11 were mothers to sons in custody, and two to daughters. Their children's sentences ranged from unsentenced to life. The period spent in custody at the time of interview varied from a few months to 13 years. All mothers noted having regular contact with their child in custody prior to lockdown.

Interviews were facilitated via a series of prompts, encouraging mothers to tell of their child being in custody before and during the pandemic. Data was initially reviewed via individual transcripts and analysed thematically (Braun and Clarke, 2013). The data set was then revisited, highlighting similarities and differences between the themes.

Findings

Three themes emerged from the analysis: *'Repeated Disruption'*, *'Maintaining Contact'* and, *'Invisibility and Marginalisation'*. These themes differently highlight the negotiation of mothering adult children in prison during the COVID-19 pandemic.

Repeated disruption: 'It's going back to that first year again'

Many changes and challenges to mothering owing to the imprisonment of their children were highlighted within the mothers' stories. Mothers told of how they had adapted to a 'new normal', renegotiating relationships with their children and means of participating in 'mothering' throughout their child's sentence. The COVID-19 pandemic, however, served as a repeated disruption, increasing the loss of presence of their child, and further limiting their ability to participate in mothering. In turn, this brought back the anxieties associated with their child's initial imprisonment. Trish¹ suggested her son had *'gone back to the very beginning of his sentence'* in terms of his *'mental state'*. Worrying about her son in custody during lockdown, Linda also suggested, *'it's going back to that first year again of [his] sentence, you know, worry, worry, worry all the time'*.

'Worrying' was constructed as a key feature of mothering for women with adult children in custody during the pandemic and framed as work that was actively engaged in as part of their mothering role; however, unable to physically participate in mothering during the pandemic, 'worrying' was heightened. Several mothers spoke of how their worry changed during the pandemic from previous fears about their child's exposure to violence or risk of increased criminality, to concerns about their physical and mental health. Trish suggested she was constantly '*expecting a call*' when she heard about COVID-related prison deaths. Linda told of being '*on the ceiling with worry*' and was concerned about how her son was able to keep himself safe in prison. Emphasising the uniqueness of her mothering role, Linda explained that she worried about '*the things that only Mums would think – was he washing his hands, is he keeping his cell clean?*' Linda's worry was exacerbated by her son's '*underlying health complication*', which increased the likelihood of him suffering more severely from the virus. Several other women also told of their child having existing or previous health conditions, increasing fears for their child's physical well-being during the pandemic. Speaking of her son's health condition, Diane suggested '*I know the type of person he is ..., whether or not he's feeling ok or not, he's not going to complain, so that scares me*'. Similarly, Angela told of how her daughter's underlying health condition meant she could '*dehydrate really quick*' and owing to a weakened immune system '*her body can't fight even the common cold*'. Angela told of how prior to the pandemic, she was able to monitor her daughter's well-being during visits; '*I could tell by looking at how dark the circles were under her eyes*' and would prompt her daughter to take her medication. Unable to physically see her daughter and contribute to managing her well-being was therefore constructed as a disruption to Angela's mothering role, intensifying her worrying. This lack of physical contact was also expressed as exacerbating worry for Tina and Donna:

I couldn't see him, I couldn't be reassured ..., you need to see them, you need the reassurance that they're okay. It's really, really worrying. (Tina)

It's ok him saying 'Mum, I'm ok', but is he just saying that? I can't get to see him physically. (Donna)

The lack of physical contact therefore was constructed as limiting their ability to mother and restricting their sense of control, particularly in relation to their child's health and well-being, which in turn, intensified their worrying.

Mothers also expressed significant concerns in relation to the impact of the pandemic on their child's mental health. Margaret told of how her son '*hates being shut up*'. Margaret described her son as having ADHD and dyspraxia, which she indicated meant he needed '*pretty regular stimulation*'. Margaret explained how her son had tried to keep occupied in his cell with '*crosswords and Sudoku*' but that '*he's not got the attention span to keep that up*', concluding '*I think he's going round the bend*'.

Maria suggested that since lockdown, her son was *'getting depressed'* and that he was *'not the same'* and was *'very, very anxious'*. Linda perceived that the changes to the prison routine had contributed to his anxiety.

He's afraid that prisoners are going to become so disgruntled generally they might start kicking off. So, he's not just afraid of Covid ..., he's afraid that there will actually be riots. (Linda)

In contrast, the changed prison routine alleviated concerns for some mothers. As a head listener,² Sarah said her son was able to keep *'himself occupied'*. Sarah reflected that prior to lockdown her son *'was frightened that people were gonna try start a fight with him'* and that the pandemic had enabled him to move around the prison without fear of attack and consequently *'his confidence has come on a lot'*. The pandemic had also brought some respite for Diane, who suggested: *'I don't want [son's name] to be associating with too many people, I just want him to get his head down, do what he has to do and come home'*. Therefore, the limited association time imposed by lockdown had relieved some of Diane's concerns.

Coming towards the end of his sentence, Tina told of how her son's impending release had enabled him to remain positive during lockdown: *'he's been focused on the coming home, not the Covid situation, so it's the coming home that's made all the difference for him'*. However, Trish's son's imminent release contributed significantly to the stress and anxiety of both herself and her son. Trish's son was coming towards the end of a life sentence during the pandemic and was moved to a higher security prison for his parole hearing. Owing to lockdown he was held in isolation and remained at the prison for a prolonged period. Trish suggested that her son had mostly remained positive throughout his sentence, but since lockdown had *'turned into a shell of himself'*, concluding that *'all that strength that got him through his sentence, right at the very end it disappeared 'cos of lockdown'*. Trish's son was sentenced to long-term imprisonment at a young age, and she spoke at length of supporting him throughout his custodial period. Her mothering identity was constructed in relation to her commitment to his successful resettlement; however, this *'motherwork'* was threatened owing to the impact of the pandemic on her son's well-being.

Debbie also told of the specific impact of the change of prison routine on her son's health and well-being. Debbie described her son as *'learning disabled'* and *'autistic'* and told of how he struggled to adapt to change and understand rules and regulations, which caused him *'a lot of anxiety'*. Debbie explained that during the pandemic he used self-harm as a coping mechanism taking *'a razor to his neck'*. Debbie explained how prior to custody, she was his main carer and constructed her mothering role around keeping him safe in a community she described as *'cruel'*. Her inability to keep her son safe in prison during the pandemic manifested in worrying about the long-term impact: *'I'm worried sick, I don't know how my son's going to come out of this'*.

Owing to the increased worry for their children, some mothers spoke of how their own well-being had been impacted during lockdown, further impeding their ability to mother. Donna explained that her mental health was *'on the bare bones of its backside'*; and Linda outlined:

It has affected my mental health so much. I had to go to the doctors, and I am on anti-depressants now. My mood was just so low, I've just not been coping at all. (Linda)

Linda went on to explain:

Before lockdown, I've always had this fear of dying while [son's name] is still in prison. I just hate the thought of him attending my funeral handcuffed to prison guards and being on his own. That mental image haunts me. Covid has obviously exacerbated that a lot. (Linda)

As indicated by Linda, for some mothers, the pandemic had reinforced their own sense of vulnerability and the implications of this for their child, for whom many were their primary or only source of support. Consequently, some mothers told of the increased burden of staying well during the pandemic.

Along with the challenges of lockdown, some mothers told of embracing the imposed isolation. Margaret suggested that owing to her son's situation, she had previously struggled to be around people and that *'lockdown came almost as a bit of a relief'* and went on to suggest; *'[Lockdown] definitely gave me the opportunity to hide away and just deal with things and then kind of emerge when I wanted to'*. Similarly, Linda suggested: *'I have begun to feel quite comfortable in isolation. I don't particularly want to see anyone'*. With many of the everyday practices, such as shopping and work, that impose some level of socialisation removed, some mothers became further isolated during lockdown, with ongoing negative consequences for their physical and mental health as well as impacting their capacity to mother.

Maintaining contact: 'Lockdown's changed everything'

Despite the increasingly restrictive conditions and disruption during lockdown some mothers' accounts highlighted their capacity to participate in mothering; confronting, negotiating and adapting to the changing situations imposed by the pandemic.

Many mothers spoke of changes in the frequency and quality of contact with their child in custody. The pandemic was therefore constructed as imposing a further disconnect from their children. Josie described the lack of visits as *'increasingly hard'* and Donna suggested that not being able to see her son felt as though he was *'living on a different planet'*. Similarly, Sarah said, *'it's like he's there, but he's not there'*; and Trish explained feeling as though she was *'pining for someone that has died, but they haven't'*.

Some expressed frustration by the lack of or delay in online visits being made available to them: *'They made no provision at all for us to video call'* (Tina); *'they were so slow on the take up in the beginning'* (Samantha). Where available,

many participants explained that either they or their child did not want the visits. Linda's son had expressed his concerns about the visits as *'a prison officer sits with you the whole time'*. Angela suggested a lack of access to relevant technology prevented her from being able to engage with online visits: *'I can't do them because we only have our phones'*; and Josie told of struggling to navigate the technology: *'I tried to download that purple visits app, but it wouldn't verify me.'* Consequently, many spoke of adopting alternative forms of contact:

I've been doing a lot more of the email a prisoner scheme. (Angela)

Going back to the old-fashioned way of things, so I write to him now. (Linda)

However, phone contact was constructed as the main and often only form of contact during lockdown. For some, phone contact had remained consistent; *'It didn't change ..., he still phoned me every night'* (Tina). However, most indicated some level of change. Some prisons had provided additional phone credit during the pandemic, some had in-cell phones, and one mother told of her child being provided with a mobile phone. Therefore, for some, phone contact had increased to *'every day'*. However, owing to restrictions on movement, others suggested contact had significantly decreased. Diane explained that during lockdown her son had moved prisons impacting contact frequency: *'he's having to do two weeks isolation ..., so I didn't get as many calls'*. For Linda the quantity and quality of contact was also impeded during lockdown: *'[he's] terrified of catching Covid, he doesn't want to use the phone. So, I get a very quick two-minute phone call once a week'*. However, Linda was accepting of the restricted contact as a means of maintaining her son's safety.

Despite such changes, for many, phone contact remained their only means of providing support to their children during the pandemic. Becky suggested that being able to hear her voice was a comfort to her son during lockdown. And Angela reiterated her daughter's words: *'Mum, as long as I can hear your voice. I'm quite happy'*. Angela also told of using phone contact to keep her daughter's spirits up. Angela suggested *'with it being lock down, [daughter's name] cries a lot'* and spoke of the need to keep phone conversations positive; *'I want phone calls to be funny ... keep it upbeat'*. Others spoke of providing an outlet for their children's frustrations during lockdown:

Their concerns are very much their situation ..., [he's] finding it really difficult to focus on anything other than the fact that they've been in their cell twenty-three and a half hours. (Margaret)

Phone contact was also constructed as a means to reassure their children, and several mothers told of how they 'masked' their own concerns during calls. Becky told of reassuring her son of the well-being of herself and her wider family: *'I'm fine ..., were all fine'*. Linda told of how:

When [son's name] calls it's like the flick of a switch, you wouldn't know that half an hour earlier I've just been sitting in a mess crying. [Son's name] will never know that I'm upset, that I'm not coping because I put on that face for him ... I don't want him to worry any more than he already is ... I don't want him to be worrying about my mental health. I don't want him to take ownership and carry that for me ... he has enough to be getting on with in terms of his own mental health. (Linda)

In illustrating her strategy of 'masking', Linda affirms her identity as a 'good mother', demonstrating her emotional self-sacrifice and commitment to mothering by subverting her own needs for the sake of her son.

With a lack of information flowing from or into the prison, mothers also spoke of how phone contact was used to obtain and share information. Becky suggested her son was frustrated with the lack of information received about regime changes and requested she research if changes were compliant with guidelines: '*he was asking me to look at the guidelines for prisons because he said, "I'm sure that they still can't keep us locked up"*'. Therefore, for Becky, phone contact was used to transmit information back to her son. Several women also told of using phone contact to ascertain if the prisons were adhering to the guidelines. Samantha suggested that she was '*feeling quite relaxed*' because after speaking with her daughter over the phone concluded '*[prison name] have been very good with the virus, they've been quite stringent*'. Similarly, on reflecting on how the prison where her daughter was held had responded to the pandemic, Angela suggested: '*we've been lucky where she's ended up*'. However, others established that guidelines were not being adhered to and used phone calls to check, '*I ask my son when he calls every week*'. Similarly, others expressed how they monitored the quantity and quality of contact, and when this was limited, unexpectedly absent or raised concerns, responded to these concerns. If Sarah had not heard from her son for a while, she said '*I'll ring up and speak to the chaplain*' who would seek information and provide reassurance. Samantha told of how she would '*ring the prison and speak to safer custody*' if she had concerns about her daughter's well-being during lockdown.

Although phone contact provided a valued mechanism of maintaining contact and served as a means of participating in mothering, for some it represented an additional burden. Lockdown had changed the times and predictability of phone contact; as indicated by Debbie; '*I don't know when he's phoning. I don't and he doesn't know when he's going to phone me*'. The emotional support phone contact provided appeared to have a heightened significance during lockdown, yet the uncertainty of it could increase mothers' fears of missing it. As illustrated by Sarah, some mothers felt a responsibility to be constantly available to their children: '*I've got my phone stuck to me 24/7 no matter where I am*'. Josie told of her son becoming stressed and anxious when he could not contact her, increasing her own stress. Equally, whilst appreciating their child's need to connect during lockdown, some mothers indicated the burden of increased phone calls and having to maintain and stimulate conversation when owing to the restrictions of lockdown, they often had little to discuss:

He was ringing like every day, but there's not a lot to say ..., I'm thinking what else can I tell him about tomorrow ..., I'm just hoping the cat does summat so there's summat to talk about. (Becky)

Similarly, Angela joked: *'Just give me a couple of days off, phone somebody else'*. Therefore, phone contact was both longed for as a means of connecting and participating in mothering, whilst also at times, presenting an additional burden of care.

Invisibility and marginalisation: "We're the last ones they think about"

As indicated by Linda, many of the mothers expressed sympathy for the challenges faced by prison staff during the pandemic: *'I can only imagine how busy they are and how difficult it must be for the staff at this time'*. Similarly, some highlighted the practical things prisons had facilitated to ease the impact of lockdown, including the provision of phone credit, free access to video libraries and sending photographs home. However, there was an overwhelming sense of frustration owing to the perceived invisibility and marginalisation of both themselves as mothers and their children in custody. Some mothers identified a lack of strategic planning: *'[the prison service] don't have a plan. They just seem to be running around like headless chickens'* (Linda). As indicated by Margaret, this was met with anger and frustration; *'[the pandemic] has exposed the [prison service] as the bucket of excrement that they are'*; and a sense that the prisons were actively working against families; *'anything that could have been made more difficult has been made more difficult by them'* (Margaret). This sentiment was echoed by Tina; *'nobody is making any effort really to make this any easier'*.

Mothers expressed concern that their children were being neglected. Maria suggested, *'as far as I'm concerned, they haven't done nothing'*. Linda suggested *'In my opinion the prisoners haven't been well supported, in fact, I don't see that they have been supported at all'*. This was echoed by Josie who suggested her son had been provided with *'nothing. Absolutely nothing'* to ease the impact of lockdown. Left with a broken TV in his cell, Margaret was frustrated that her son was in *'this horrible situation'* with *'nothing to distract himself with'*. She told of how *'he asked, and he asked, and nothing happened'*. Margaret went on to explain how she phoned the prison to complain and *'within half an hour [he] had a TV'*; yet Margaret told of how this was accompanied with *'lots of shouting'* from the prison, *'don't ever ask your mother to interfere again'*. Margaret concluded that the prison was very *'defensive'* during the pandemic, which *'only made things worse'*.

Many mothers also spoke of their children *'being lost in the system'* during the pandemic. Sarah noted postponements in sentence progression had repeatedly delayed her son's transfer to open conditions. Similarly, with court cases and legal advice largely delivered online during this time, Margaret indicated her son's case was impeded:

Legal calls with his lawyer and ones where he had to go to court were pretty poor ..., he couldn't tell what was going on and he couldn't hear what was being said or know if they could hear him. (Margaret)

This was reiterated by Debbie who spoke of her son's trial being postponed owing to lockdown and described the constant delays as '*horrific*' and concern that her son '*couldn't get contact with his lawyer*'. Tina spoke of the impact of the pandemic and associated restrictions on her son's pending day release: '*day-release was all delayed and put off and not happening because they weren't releasing anybody*'. When day-release was then reinstated Tina was frustrated with their facilitation and lack of consideration of the implications of social distancing for managing contact:

He's not even allowed into my home ..., they're not allowed to go into a property because of the Covid restrictions ..., [we] can only meet up in a pub ..., I'm looking at places with the biggest outside space³ ..., you can't walk indefinitely around a park when it's raining and it's cold. And so, at some point something's got to give. (Tina)

The mothers consistently attributed this lack of facilitation to a disregard for their children: '*it's like no one cares*' (Donna); '*as far as the system is concerned, they are there and that's it*' (Diane); '*when you're in prison, you're just forgotten about, you're nobody ..., you're like scum to people*' (Maria).

Many of the mothers also attributed the prison's neglect of social distancing measures to this lack of care:

I'm not so sure that the officers even care if they are bringing it in and passing it on or if prisoners have got it. (Samantha)

The staff themselves are definitely not observing the two-meter guidelines. And they're moving prisoners around in between cells willy nilly. So how can they be? It's a piece of nonsense. (Margaret)

Owing to the perceived neglect of their children's well-being, some mothers positioned themselves as protectors, emphasising their maternal instinct to protect. Linda told of hearing that '*prisoners were being let out [outdoor exercise] 30 to 40 at a time rather than 10⁴*' and being '*really quite angry at that*'. She told of how she contacted the prison and how '*they've not been flouting the guidelines since*'. Highlighting their frustrations emphasised their commitment to mothering and promoted the value of their child; vocalising their concerns was constructed as a practical way of participating in mothering.

Some mothers perceived that the pandemic was being exploited to ensure compliance and maintain order. Donna suggested that when some restrictions were eased the prison '*continued to keep [prisoners] behind their door*' because '*it's*

easier to manage'. Margaret argued that provisions to improve family contact during lockdown were being manipulated to ensure prisoner conformity:

They were asked to sign something ..., which basically rescinded their rights to complain ..., it was clearly a way of not allowing prisoners to express their concerns over things like the twenty-three and a half hours [in their cells] or the no visits.

For many, the biggest frustration expressed related to their perceived sense of political invisibility and marginalisation. In relation to information relayed from the government, Linda suggested '*I listen to the daily updates and [they haven't] mentioned prisoners or families of prisoners once, it's like we don't exist*'. Similarly, Debbie suggested:

They don't [mention] what is happening in the criminal justice system on any of the briefings ..., it's hardly mentioned, as if these people don't exist, they spoke about care homes ..., if it wasn't care homes, it was schools ..., nobody mentioned about people in prison. (Debbie)

The lack of recognition was constructed as invalidating their children and consequently their mothering. Owing to the lack of information, Linda referred to contacting relevant stakeholders with limited success, reinforcing her sense of invisibility:

I've emailed the Justice Secretary ..., my local MP. None of them even replied, because at the end of the day, I'm just a mother of a prisoner ..., It's sad and it's frustrating, it's maddening that we are so marginalised, and I think the [pandemic has] compounded that, 'cos the government by ..., not acknowledging that we exist ..., we feel very cheated ..., completely disregarded and that is unfair and in a lot of ways it's quite cruel. I feel very let down by the government. (Linda)

This sentiment was echoed by Maria, who described the lack of recognition as reinforcing her existing sense of invisibility: '*it brings it back again that you're just scum and its awful ..., and that's our justice system*'. Similarly, Debbie and Tina expressed their sense of being forgotten with their needs deprioritised during the pandemic:

As usual, I think we're the last ones they think about. (Debbie)

I don't feel they ever take us into consideration. I really don't think they ever, ever think about us. I can't think of anything they've ever done that makes me believe that I was a priority. (Tina)

Whilst some mothers were able to mobilise their mothering role to instigate change and have their voices heard at an individual level, their lack of broader acknowledgement and consideration compounded their sense of marginalisation.

Discussion and conclusion

The COVID-19 pandemic has significantly impacted prison regimes and the physical and mental health of those who work and reside in them. Against a background of policy recognition of the significance of maintaining familial ties during custody, and the dearth of literature in relation to mothers of those in prison, this paper presents new knowledge by exploring the challenges experienced by mothers to adult children in custody during the pandemic.

Consistent with global understandings of parents of prisoners (Gueta, 2017), this research has identified the significant burden of care placed on mothers of adult children in custody. However, with lockdown restrictions further impeding practical ways to participate in mothering, the manifestation and amplification of this burden in the context of the pandemic are identified. Mothers expressed a sense of repeated disruption and further disconnect from their child in prison during the pandemic. 'Worrying' was constructed as a significant part of 'motherwork' (Francis-Connolly and Sytniak, 2015) and served to highlight the disruptive impact of both imprisonment and the pandemic on themselves and their children. Although consistently present, 'worry' manifested in different ways often dependent on the different situations of both the mother and her child in custody. For example, although the sample of mothers with daughters in custody was small, these mothers indicated more confidence in the prisons' response to the pandemic. This may be owing to more positive relationships between prison staff and women in custody and their families (HMIP, 2019). However, further research is required to explore the specific experiences of women in custody and their families as HMIP (2020) note increased levels of self-harm of women in custody during the pandemic which the Prison Reform Trust (2021) suggest is undoubtedly linked to the suspension of family visits. For mothers with children nearing the beginning or end of their sentence, worry was often exacerbated by delays in processes and an increased sense of uncertainty. With restricted opportunity for reassurance, worry was difficult to appease, and mothers told of the significant impact on their well-being. The pandemic reinforced mothers' sense of their own health vulnerabilities and the implications of this on their ability to continue to care for their child in custody; 'care' in this context, therefore, also manifested as a burden to keep well. Despite the worries expressed, the restricted lockdown regime offered respite to some mothers' concerns prior to lockdown. However, it is important that such respite is recognised as indicative of the 'brutal reality' for mothers of having a child in an already 'crisis ridden' prison system, characterised by overcrowding and high levels of violence and mental ill-health (Hutton, 2019: 401), where being locked up for over 23 h a day was considered safer.

The worry carried by these mothers was constructed as profound and all consuming; yet new knowledge is created by exploring how mothering practices were renegotiated in the face of repeated disruptions and ever-increasing restrictive conditions. Mothers emphasised their agency and capacity to participate in mothering through adapting their communication strategies. The significance and value of the continuing role in their children's lives was reiterated. Consistent with existing

literature in relation to mothers of adult children, mothering in this context was constructed in relation to offering emotional support (Francis-Connolly and Sytniak, 2015); keeping check (Lockwood, 2020); and protecting their children's rights (Hutton, 2019). Therefore, this study highlights that even in the most limiting and restrictive situations, mothering practices were able to be renegotiated and reconstructed. That is not to absolve the prison system of their responsibility to facilitate quality familial contact. Indeed, the pandemic has seen the implementation of practices previously prohibited owing to concerns regarding risk (video visits; prisoner mobile phones); and therefore, an opportunity for meaningful reform is presented. However, the lack of face-to face contact was consistently constructed by mothers as the most challenging and disruptive aspect of the pandemic, with mothers questioning the legitimacy and fairness of this approach. Despite prisons reportedly being safer owing to lockdown restrictions (HMIP, 2021), it is essential that the newly adopted modes of contact, if maintained, complement rather than replace face-to-face contact. A critical and reflective review of familial contact is therefore required to ensure the facilitation of meaningful contact to avoid further harm to those in prison and their families, should future lockdowns occur.

The evolving mothering practices expressed within the research were set against a consistent theme of invisibility and marginalisation of the mothers and their children in custody. The perceived lack of care, compassion and political recognition afforded those in prison and their families during the pandemic (in comparison to other vulnerable groups) was constructed as reinforcing the already stigmatised position of families and, in particular, mothers of prisoners. The pandemic has significantly impacted mothers' ability to provide care for their children in prison; yet, with restricted prison regime and limited access to support services during the pandemic, mothers often identified themselves as the primary (sometimes only) support to their children during this time. This study therefore builds on existing research which calls for the harm caused to parents of prisoners to be acknowledged and respected (Howarth and Rock, 2000; Hutton, 2019). Recognition of their role and consequent harm experienced during the pandemic is required, with the 'tokenistic' communications facilitation replaced with more meaningful ways for women to participate in mothering and support their children in custody.

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Notes

1. Pseudonyms have been used for all participants.
2. Listeners are prisoners who provide emotional support to their peers who are struggling to cope (Samaritans, nd).
3. Tina's interview was during the time when restaurants were open for outside dining only.
4. As per public health guidelines in situ at the time.

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