Adverse Childhood Experiences and Mental Health Among Incarcerated Womxn

Mariah Maldonado

University of Illinois at Urbana-Champaign

Abstract

Introduction:
This study uses the term “womxn” instead of “women.” This alternative spelling to women is inclusive of trans and non-binary womxn. Once womxn are incarcerated, they are often forgotten and do not receive adequate support to deal with any pre-existing trauma or mental health conditions. Mental health services in prisons can be inadequate or non-existent. There is a lack of research on incarcerated womxn. Research has failed to adequately study the mental health of those incarcerated, their pathways to prison, their Adverse Childhood Experiences (ACES) and how those experiences affect their long-term mental health. Specifically, the author looks at ACES and mental health of the womxn and how that can vary by race (specifically Black/African American and White womxn).

Method:
832 womxn (49.2% White, 35% African American) who were currently serving a sentence at Logan Correctional Center in 2017 and 2018 were interviewed. Womxn were asked about their ACES using the Patient Health Questionnaire-Depression to assess depression and anxiety and the Patient Health Questionnaire – Anxiety for Post Traumatic Stress Disorder (PTSD). The writer conducted multiple regressions using SPSS software.

Result:
42.8% of womxn experienced clinical levels of depression, 64.5% experienced clinical levels of PTSD, and 28.7% of womxn experienced clinical levels of anxiety. On average, womxn experienced 4.54 ACES. Womxn’s ACE scores were significantly associated with depressive symptoms (B=0.47, p<0.001), PTSD (B=0.522, p<0.001), and anxiety (B=0.631, p<0.001). In these models, race was not significantly related to mental health symptoms.

Discussion:
These results illustrate womxn’s correctional facilities should consider providing more mental health services that are trauma informed and cognizant of past adversity. By integrating such services in womxn’s correctional facilities, it would allow the incarcerated womxn to understand their mental health and find ways to cope, destress, and heal from past trauma. Previous lack of access to mental health services could have played a vital role in their pathway to prison.

Keywords: Mental Health, Womxn, and Prison.
INTRODUCTION

According to “Women’s Mass Incarceration: The Whole Pie 2019” from October 2019, there were 200,000 womxn incarcerated in the United States. However, this remains an under-researched population in the empirical literature.
United States and physical abuse events and to depression, mization and are considered a ls to be developed practices into erated. (Karlsson, et al., 2018; more evidence-ow to support same treatment are an important of negative mental risk for trauma and triggers that are left unresolved, which can be a catalyst for mental health disorders or heightened symptomatology.

The Current Study
This study investigates ACES of womxn who have been incarcerated in relation to their mental health symptoms, including Post Traumatic Stress Disorder, Depression, and Anxiety.

Based on the previous literature, it is hypothesized ACES do affect mental health outcomes of womxn who are
