UC Irvine
UC Irvine Electronic Theses and Dissertations

Title
WHEN THE NUMBERS SPEAK: Pain of Imprisonment, Coping, Recovery, And Social Responsibility

Permalink
https://escholarship.org/uc/item/9k4321t8

Author
Rosales, Gabe Joseph

Publication Date
2022

Supplemental Material
https://escholarship.org/uc/item/9k4321t8#supplemental

Peer reviewed|Thesis/dissertation

eScholarship.org Powered by the California Digital Library
University of California

WHEN THE NUMBERS SPEAK: Pain of Imprisonment, Coping, Recovery, And Social Responsibility

Gabe J. Rosales

University of California, Irvine

Word count: 8,305

ABSTRACT: The COVID-19 pandemic has exacerbated and exposed conditions in our carceral facilities that create health hazards for those housed inside and the surrounding communities. Utilizing prison sociology scholarship on the deprivations of incarceration as the foundational framing, this article explores prisoner's socially responsible response to the unintended impacts of pandemic protocols. Drawing from prisoners' lived experience in California prisons from UC Irvine's PrisonPandemic oral archive, this analysis reveals how the COVID-19 era of the pains of imprisonment caused prisoners to act in socially responsible ways as a method of coping while also recovering from trauma.

Keywords: covid-19, prison, responsibility, coping, trauma

BACKGROUND

In December of 2019, a new mutation of the Coronavirus was identified in Wuhan, China. This previously unknown Coronavirus strain (COVID-19) quickly made its way around the globe, crippling populations in a matter of months. By March 11th, 2020, the World Health Organization (WHO) declared the virus a global pandemic (American Journal of Managed Care n.d.). Due to the highly contagious nature of COVID-19, and the wide variety of symptoms experienced throughout the international community, the virus spread undetected among many asymptomatic people (Centers for Disease Control and Prevention [CDC], 2019).

The international community responded with enhanced personal hygiene and masks. Stay-at-home orders were implemented by local governments and social distancing became an aspect of daily life to curb the spread of infection. As life came to a grinding halt for the world, it meant further isolation for incarcerated communities. With pre-pandemic estimates of the incarcerated population in the United States being roughly 2.3 million people (Montoya-Barthelemy et al. 2020), a toll on a large population of Americans began to unfold.

United States prisons created exclusive dangers for our incarcerated populations such as overcrowding, inadequate health care, limited cleaning supplies, and a lack of high quality ventilation (Mortaji et al. 2021; Nelson and Kaminsky 2020). In addition to the large elderly population (Montoya-Barthelemy

et al. 2020; Wilper et al. 2009), prisoners suffer disproportionately from higher rates of reoccurring health conditions, mental disorders, and substance abuse (Johnson et al. 2021; Kinner and Young 2018; Waight et al. 2021). They are also at higher risk for disease transmission due to overcrowding, and have no direct access to personal hygiene and personal protective equipment (Burton, Morris, and Hirschtritt 2021). Because of congregate housing and other challenges, the infection rates in prisons exploded far beyond the national average (The COVID Prison Project, 2020; The Marshall Project, 2020). The overloaded and underprepared prisons in California (Abraham, Brown, and Thomas 2020; Lauer and Long n.d.), as well as the California Department of Corrections and Rehabilitation (CDCR) transfers of infected prisoners, created some of the worst prison outbreaks in the country at 49,395 cases of infections statewide (Duarte et al. 2022).

CDCR CONDITIONS

Despite the 22,687 people released since March of 2020 in CA in response to the Covid-19 pandemic, prisons remained inundated at 103% capacity with 91,297 people (Population Reports [California Department of Corrections and Rehabilitation], 2021). Though state law establishes COVID-19 prevention mandates, CDCR's 24,000 staff members have varying levels of adherence. During institutional lockdown, infections in prisons were largely caused by prison staff as they were the only ones who interact with the surrounding communities when they return home from their respective prison

institutions (Cerrato et al. 2021). It follows that infection rates in prison are dependent on how earnestly the staff protected themselves and how strictly they adhered to protocols (Wallace et al. 2021). With an underfunded prison healthcare system (Montoya-Barthelemy et al. 2020), these conditions contributed over 50 thousand infections and 260 deaths, making the infection rate in California's state prisons 4.4 times that of the entire state overall (Duarte et al. 2022; Marshall Project 2021).

Early in the COVID-19 pandemic, CDCR initiated a statewide lockdown and suspended daily routines to mitigate the spread of infection. Family visits and academic and rehabilitative program providers were forced to transition into distance operations during the crisis. Extraordinarily little communication between the incarcerated population and the public had taken place. Our understanding of the spread of the disease, mitigating actions to stop the spread or lack thereof by prison administration and incarcerated people, and the effect it has had on an already vulnerable population, is incomplete. CDCR has regularly updated infection and mortality data on their website, but these numbers did not describe the personal experiences of the people housed inside, how they coped, how they will mentally recover, and what actions they took to protect themselves and each other.

This paper will expand on emerging scholarship addressing the following questions: How did the additional levels of isolation and COVID-19 protocols change the experiences of our incarcerated, further contributing to our

contemporary understanding of the pains of imprisonment (Crewe 2011; Sykes 2021)? What is the relationship between the pains of imprisonment during a pandemic and prisoners acting socially responsible?

THEORETICAL MOTIVATIONS

The motivation for this research is three-fold. As prison scholars, we currently lack a contemporary understanding of how the pains of imprisonment, prisoner relationships, perceptions, and social cohesion are exacerbated during a pandemic. Second, it is important to hear from prisoners in their own words about how they navigated the struggles that the pandemic caused, regarding their actions to help lessen the spread of infection while also maintaining human connection. Lastly, there has been little understanding about how prisoners addressed the trauma of being incarcerated during the pandemic.

PRIOR RESEARCH ON PAIN OF IMPRISONMENT

There has been extensive research analyzing the effects of the prison environment on incarcerated people, covering physical as well as mental effects of incarceration, over the past 70 years. This scholarship has had to evolve in tandem with the mutating prison system as calls for reform and legal battles have reshaped the carceral social environment following the unprecedent prison and incarceration boom throughout the end of the 20th century (Banks 2017; Gilmore 2007).

Gresham Sykes pioneered the concept of the “pains of imprisonment,” in his 1958 classic *Society of Captives* well before the explosion of mass

incarceration in the United States and more specifically, California. Sykes' early prison sociology illuminated how the physical torture of prisoners gave way to punishment through deprivation from the 18th century and on. Sykes discussed the penal burdens associated with incarceration through a series of deprivations, highlighting the attacks on people's sense of self-worth[1], their liberty, sexual relations, safety, and autonomy (Suhomlinova et al. 2022; Sykes 2021). Building on this, academics identified a list of other stressors experienced by the incarcerated population, including but not limited to the strain of uncertainty, extreme violence, self-governance or "staying out of trouble," and constant psychological assessment (Crewe 2011; Maycock 2022). The multitude of effects of prison life on the residents has been canonized into a specific language describing the carceral experience. Current scholarship has elaborated on this language to identify specific parameters that can be applied to Sykes' original explanation of the pains of imprisonment (Crewe 2011; Kerr and Dube 2021; Maycock 2022; Rocheleau 2013).

Prison life can be understood through descriptions of "depth, weight," and more recently, "tightness" (Crewe 2011). The dynamics of the differing relationships between staff and other prisoners and the *survivability* of a prison create an unrelenting pressure that was generally described by the term "weight" (Sykes 2021). This weight and pressure has not evolved much since the

[1] Sykes wrote this book about a New Jersey Maximum Security Prison during the Cold War to highlight a totalitarian form of governance within the United States.

beginning of the penal project in the United States (Haney 2006), and has arguably gotten worse in some instances up until most recently where the rehabilitative model has again captured ideological attention.

The classic pains of imprisonment are intensified by a consistent new set of circumstances during a global pandemic. Incarcerated people have been indefinitely deprived of visitation from their loved ones. Person-to-person contact through family visits are some of the most important activities for the incarcerated population as it helps fortify their humanity as well as it creates a bond with free society. Research has shown that family visitation for incarcerated people has led to less stress, anxiety, and depression. Prisoners are also less inclined to break the rules to avoid jeopardizing their visits (Bou-Rhodes 2019). For this study, weight has an added condition of the COVID era: consistent, indefinite deprivation of visitation.

Additionally, all in-person prison programming came to a halt and all classes changed to distance learning. Prison policy scholarship documents the efficacy of in-prison programming but also identifies person-to- person interaction as *the* key element in assessing the results (Peterson et al. 2017). When the incarcerated are missing this vital personal contact in their rehabilitation, the defining terms of the pains of imprisonment are further expanded. This lack of meaningful human contact and suspended purposeful daily routine has taken a toll on our incarcerated communities (Stewart, Cossar, and Stoové 2020). We do not understand how the weight of the pandemic has affected incarcerated

people’s sense of self, their connection to their families and their community cohesion.

Though lockdowns are not new to most all the prison population in the United States, the element of uncertainty because of an airborne virus is. As the virus affects every individual differently, the prisoner population did not know how they would fare if infected, with limited sub-par health care. Not only were visits and programs halted, but communication with the outside was also severely reduced. Limited phone use, and quarantine time for postal mail left much of the population with out-of-date information from family. Incarcerated people feared for the health and well-being of their loved ones with little to no correspondence. They also had no recourse to protest conditions when they did not receive adequate medical care. If infected, many of them were further isolated from their housing units and placed in administrative segregation. This means a positive COVID-19 test potentially lead to added deprivation and isolation, further jeopardizing mental health. All these factors contribute to our working definition of “weight” in this essay.

Coping in Prison

The theories of the pains of imprisonment have also given rise to scholarship explaining how the incarcerated cope with these struggles (Vanhooren, Leijssen, and Dezutter 2018). With the little control prisoners have over their lives while incarcerated, they must evolve to survive, and this includes adjusting to new social, institutional, and mental processes. Relevant coping

strategies for this paper are elucidated by Leonel Goncalves et al. in Carla Reeves' book, *Experiencing Imprisonment.* In the Goncalves contribution*, Prisoners' Coping Strategies in Portugal,* the strategies are highlighted as: adhering to prison life or avoiding unnecessary conflicts, managing stress and emotions, keeping safe, passing time, faith, and finding support (Reeves 2015). During the pandemic, keeping safe took on a new meaning as an airborne virus was capable of infecting prisoners. They had extremely limited options to avoid infection, and get support because staff shortages were common place (Novisky, Narvey, and Semenza 2020).

To unpack further, these methods of coping differ in frequency across social and spatial contexts, as well as differ when incarcerated people experience different levels of weight, dependent on the situation (Van Harreveld et al. 2007). As the descriptions of weight seek to chronicle the daily strains on incarcerated people in "normal" or functional times, there is an additional sense of panic and anxiety during a global pandemic which also alludes to modifications of coping strategies. The level of uncertainty of daily life in the free world during the pandemic caused all populations to reevaluate and evolve. Prisoners' adjustments were exceptionally dramatic (Stewart et al. 2020).

Of these coping mechanisms, a solid social support system or network can help someone experiencing incarceration stay grounded and avoid withdrawing (Van Harreveld et al. 2007; Vanhooren et al. 2018) while they are serving their time. As losing one's understanding of the meaning of life is

common as a pain of imprisonment, social networks are a method of coping to help combat this (Gullone, Jones, and Cummins 2000; Reeves 2015; Van Harreveld et al. 2007; Vanhooren et al. 2018). Social networks allow incarcerated people to rebuild a sense of meaning in their lives (Joseph 2012) and during a pandemic, a sense of meaning can come into question again with prolonged isolation.

The unknowns and stress of the COVID era is traumatic and studies of post-traumatic growth find a correlation between people experiencing extreme tension and engaging in self leadership, as well as changing health behaviors (Yun et al. 2014). This process can help highlight our understanding of how prisoners in California find purpose in acting socially responsible under the weight of the pandemic, while also using added responsibility as a method of coping.

Trauma and Recovery

Building on our understanding of the weight of imprisonment and social responsibility co-occurring during the pandemic, we can look to restorative justice research to further fortify the link. Expanding scholarship in the restorative justice sphere has documented the needs of victims of crime and how they process and ultimately recover from a traumatic event. When people are victimized or experience severe trauma - which generally starts with physical trauma that leaves lasting psychological effects (Bolívar 2019; Sered 2019) - they have a variety of needs to help them become “restored,” or in other words, return to the

way they were before the trauma. In restorative justice mediation processes, when asked what forms of justice they are seeking, victims of crime or abuse overwhelmingly want to stop a wrong-doer from inflicting the same harm on anyone else (Sered 2019). Trauma and recovery literature (Bolívar 2019) also suggest that many victims of harm and trauma openly express a need to be "externally recognized as victims of wrong-doing" (p134).

Responsibility in Prison and in a Pandemic

In the highly racialized, security-level segregated, California prison environment, groups have had a common understanding of hierarchy and collaboration on yards. This has developed as means of keeping the peace, personal protection and group trade of goods (Skarbek 2010; Weide 2020). This system is based on all members of one faction being responsible for the actions, conduct, and debt of any single member (Roth and Skarbek 2014; Skarbek 2016).

Over the past seven years of CDCR policies, the group cohesion and community networks have drastically changed where each prison yard in California is its own community. The main prison factions that have controlled many institutions in California since 1960 have been diluted by new CDCR policies giving prisoners needing higher protection from the general population new housing (CDCR 2021). Despite these changes, each yard must still maintain an equilibrium using the same types of collaborative dynamics focused on keeping the peace, facilitating trade, and group support. This community

environment is the foundational structure of this analysis considering anyone who enters any carceral system in California will be subject to the local politics of the yard (Buentello, Fong, and Vogel 1991).

With CDCR lockdowns, the prison community's interactions with each other were reduced to smaller groups that were housed together only. In this environment, deprived of the larger community, incarcerated people would increasingly rely on their immediate group for safety and support (California 2022). This is another condition of the COVID era.

The human phenomenon of environmental condition coupled with perceived locus of control to prevent harm is operationalized in Low et al.'s (2022) study on the social responsibility as a public response to the COVID-19 pandemic. According to Low et al. (2022), people who are exposed to the COVID-19 outbreak conceptualize their obligation to act to help those around them from two dimensions. First, they perceive their roles in society, and second, the individual perceives their "circle of responsibility" (p4). The perceived roles individuals play in society define which actions they take, and the extent of the action is based on a person's perceived circle of responsibility. Both these personal understandings of positionality in the world are bargained with the person's perceived risk of infection or severity of the disease (Becker and Maiman 1975; Bish et al. 2011; Fall, Izaute, and Chakroun-Baggioni 2018). Through this negotiation of risk assessment and positionality, Low et al. asserts that we can determine an individual's personal level of social responsibility.

In the prison context, and in the general population, social circles are dependent on the perceptions of the relationships and fulfilling promises. However, there is little to no scholarship detailing community responses and the social responsibility perception of the prison population with the threat of infectious diseases, thus, little is known about the prison community's beliefs and efforts to also help mitigate the spread. Understanding incarcerated people's perceptions of themselves, their community, and their perceived risk of infections are paramount in this responsiveness to act for community safety.

MODIFIED GROUNDED THEORY METHODOLOGY

As I had broad, open-ended questions for my initial inquiry about COVID era pains of imprisonment coping and social cohesion, I engaged in a multi-step coding process to analyze data presented in this paper.

Data Source

At the University of California, Irvine, I have been a core team member on an oral archive project called, "*PrisonPandemic©,*" where we have systematically conducted outreach to collect thousands of testimonies from incarcerated people in California. The focus of testimonies was first on CDCR and the thirty-five prisons in the state, then later outreach expanded to Federal facilities, immigration detentions centers, and all county jails.

UC Irvine's *PrisonPandemic©* created a call line that accepted collect phone calls from incarcerated people throughout the state every weekday evening from 5pm until 9pm. The team conducted years of outreach through

personalized letters sent to every carceral institution in California, asking for stories. Each of the prisoner responses were meticulously anonymized by a student redaction team, where all identifiable information was removed for the safety of the participants. Additionally, I was the creator of an ethics advisory board of seven members, the majority of whom were formerly incarcerated, along with some systems-impacted individuals and one program provider. These members surveyed the collection of stories processed and the project's responses to the incarcerated population after we received testimonies.

After the collections process was complete, the testimonies were presented anonymously for public consumption on a website, along with readings of the letters and voicemails. Although the goal of the archive was to create an open living repository of testimonies of the incarcerated in California during the pandemic, outreach materials included a range of questions about personal impressions and perceptions: experiences in specific respective facilities during COVID-19, experiences coping with the crisis, and ideas about what the facility could do better.

Identifying the Prisons

I purposively sampled specific prisons to capture a range of characteristics: location, population demographics, and institutional characteristics. Geographic setting of rural and urban environments were an important distinction due to the availability of programs and the prison's accessibility for visiting family members. All this considered, I wanted to capture

testimonies from both male and female facilities in both rural and urban areas. Additionally, the age of prisons was important to me, as some of the older prisons may have had more difficulty moving infected prisoners. The lockdown experience in an older building with aging plumbing and no air conditioning may contrast with the experience in newer facilities. Lastly, a prison's proximity to the California capital is relevant because prisons closer to the capital tend to get more visibility and attention from legislators. This is important during a pandemic when family, and the public are concerned with family members or releases during a pandemic.

I chose the High Desert State Prison (HDSP) due to its extraordinarily isolated geographic location in the mountains of Susanville, a small town of 16,728 people, where half of the population work at the three prisons in local area. Because of its location, I labeled this prison a "rural prison." I chose San Quentin (SQ) for a variety of reasons. It is the oldest prison in California, built in 1852, and it has exemplary programming opportunities that, once suspended during the lockdown, have most likely had a noticeable effect on the population. SQ has had one of the highest Covid-19 mortality rates in the state and has high visibility to California legislators. It is also located near the major California cities of San Francisco and Oakland, rendering it an "urban prison." I chose the California Institute for Women (CIW) to include an incarcerated female perspective. CIW is near Los Angeles establishing it as an urban prison. Lastly, I chose Richard J Donovan state prison (RJD) in San Diego as it is extremely

close to the international border, and it also has one of the highest mortality rates in the California prison system. RJD is close to San Diego making it an urban facility, and a hub for programs. It is the farthest away from the California Capitol and is the least visible prison to legislators.

Open Coding

The best method of analysis for this endeavor was a modified form of Grounded Theory (GT). Founded by Anselm Strauss and Barney Glaser, GT is a method of research where the researcher uses the data to *inductively* create new theories and answer questions, as opposed to beginning with a theory and *deductively* looking to explain it through observations (Corbin and Strauss 2008). I approached the analysis with some general knowledge from an initial literature review to familiarize myself with current scholarship about the pandemic and prisons, however I was not sure about what themes I would find once I began coding.

My foundational question was centered around identifying further pains of imprisonment created by the pandemic. To understand the experiences of those incarcerated in California, I had to analyze their experiences from their own words through a hybrid of letters and vocal testimonies (Vannier 2020). The questions, insights, and analysis evolved as I continued to code through a multi-step process (See Table 1 Modified Grounded Theory Process).

Following in the tradition of Grounded Theory, my *initial open coding* consisted of coding five randomly selected “full stories” from the PrisonPandemic

site at the four California prison institutions (Chun Tie, Birks, and Francis 2019). The full stories ranged from written letters to call-line transcriptions, all differing in detail and length. I coded for a wide range of topics encompassing personal experiences, concerns, frustrations, and institutional response. The main themes that emerged included "helplessness, institutional negligence, dedication to family," and "personal responsibility to protocols." With these themes and codes in mind, I searched for relevant theories that were applicable to analyzing more stories. While the scholarship of the pains of imprisonment has evolved over the past four decades, scholarship applying this concept during a global pandemic is still emerging. I focused on new studies as guiding posts for the next steps.

Selective Coding

Theoretical sampling is a term in GT that involves seeking out situations that could expose differing properties and dimensions of a concept (Chun Tie et al. 2019). I had initially picked a sample that would be a foundational point of reference from which to expand, then added two others to further encompass the elements of my criteria. In this new larger sample, I added testimonies from Chowchilla, and Folsom. I picked Chowchilla as it is also a women's facility but located in a rural community. Folsom is also one of the oldest prisons in California and is also located in a more rural community, in comparison to the oldest prison, SQ.

The next thematic codes relevant for this study included “weight, depth, tightness, responsibility, institutional negligence, family,” and “helplessness.” The terms of weight, depth and tightness were based on previous literature.

Emerging Themes

I extrapolated insights from my established thematic codes to further build from the data of a larger population, using the analytical computer program for mixed-methods research, “Dedoose.” I employed a comparative analysis in Dedoose to understand co-occurring codes in the testimonies of the hundred prisoners. During this process it became apparent that there was a significant co-occurrence of “responsibility” associated with “weight.” To understand the relationship between weight and social responsibility, I applied scholarship on human coping mechanisms in the prison context as well as analyzed the phenomenon from a victimization trauma and restoration research framework. These frames of reference were especially relevant because both addressed pains of imprisonment, or in the trauma context, harm, and both illustrated a clear link to acting socially responsible, as seen in the data. (See Table 1.)

ANALYSIS

After the multiple rounds of coding, the co-occurring link between weight and responsibility emerged as a focus of inquiry. Why did these new strains on the population, coded as weight, also appear frequently with an obligation to act to either slow the spread of infection, help other prisoners, or focus on self-

improvement? Significant findings from carceral coping mechanisms and trauma response literature helped cement a linkage to this phenomenon in the data.

As prison protocols and other administrative actions exacerbated and created new pains of imprisonment and trauma, prisoners had to rely on specific forms of coping while also needing to heal. Incarcerated spoke of acting in a socially responsible manner (i.e., aiding those around them, wishing to help family, and self-improvement) to feel connected to a social network and recover. This claim is further reinforced by prison community cohesion literature, and more recent scholarship operationalizing community understandings of positionality and perceived harm, into action. Regarding the trauma response and the need to recover, the PrisonPandemic platform allowed incarcerated people to fulfill two needs imperative for victims: (1) An opportunity to air grievances to prevent future harm; (2) the need to be heard and have trauma validated. Prisoner's correspondence with the PrisonPandemic archive to be heard and address harm, manifested as responsible conduct from the unrelenting weight of the pandemic (See Table 2 Social Responsibility Process).

Weight

Drawing on incarcerated people's struggles relative to their limited personal autonomy, the constant imposition of authority, the infringement of personal space, the uncertainty of a regular schedule, the fear of retaliation from staff and of other incarcerated people, and other institutional stressors (Crewe 2011; Maycock 2022), I focused on "weight" as a code to describe these events

where mentioned in the archive as well as the new strains created by the pandemic (Rocheleau 2013; Suhomlinova et al. 2022). For this study, the term weight was expanded to explain the added stressors of pandemic life which include indefinite lockdowns, infection rates, no visitation, no programming, no personal protective equipment (PPE), fear of infection, and fear of solitary confinement from a positive test. “Weight” was coded a total of 485 times within the sample of 100 stories with San Quentin, RJ Donovan, CIW, and Folsom consistently showing the highest number of “weight” codes in stories. This code’s prevalence was the highest among the other two pain-associated descriptive codes of “tightness,” and “depth.”

Prisons in California have had guaranteed yard time, programming, and visitation for its inhabitants over the past 20 years through a series of prisoner led litigation (Coleman v Brown, 1995; Plata v Brown, 2011; AB109; Prop 47; Prop 57). Differing levels of autonomy have been a part of prison life. With COVID-19, the prisoner population were placed under strict lockdown measures to mitigate the spread for long periods of time with no clear understanding of when it would be lifted. Here the concept of pandemic-related weight is exemplified in the following quotes detailing lockdowns, no visitation, or programs, and feeling helpless with the threat of fatality from an infectious disease. While suffering from the extended lockdowns, people were in fear of being neglected by an understaffed healthcare system:

> We're totally locked down. No church, library, groups, most of all no visits. As well, medical staff is very limited and slow coming. – Chowchilla, *PrisonPandemic*

In other words, the respondent knows that if they get sick, they will have late or no support from medical staff which could have deadly repercussions.

With slow moving postal mail, limited phone accessibility, and few other options to contact family members, prisoners were disconnected from family. Prisons have been slow to incorporate video visitation (McLeod and Bonsu 2018) and this lack of contact during an uncertain time adds an additional stress to the population:

> I have had to remain at this prison because it is close to my parents, and mother had medical problems. During the year without visits, my parents had to move to Washington so my brother could help them. It was very difficult for my mother. – Donovan, *PrisonPandemic*

This prisoner felt powerless as his family, his support, were forced to relocate. This exacerbates the feelings of "being forgotten" (Suhomlinova et al. 2022) and the need to assert self-worth and humanity.

Some of the prison staff's flippant attitudes about the lives of the incarcerated further reinforced feelings of unworthiness, and helplessness as prisoners had such little control over their predicament. Dynamics between correctional staff and the incarcerated have always been unstable but as most prisoners have mentally prepared to be incarcerated for a finite number of years, a possible demise from an invisible virus perpetuated by staff creates further trepidation. A prisoner at High Desert explains:

> One of the CO's made a comment of, 'you're gonna catch it anyways, so who cares, get it over with.' How can you say something like that? They're not treating this virus like it's real. This is life or death! I was sentenced to six years, not death. - High Desert, *PrisonPandemic 2021* 20210208_345

Not only were prisoners dealing with extended lockdowns, the nature of an infectious disease ravaging the country also burdened incarcerated people with the realization that they may never see family members again. Furthermore, in some facilities, incarcerated people were being coerced to work, putting their lives in danger. A woman from CIW explains how they were being coerced to put themselves in harm's way because the institution relies on prisoner labor. These encounters leave the prison population to decide between potentially getting infected or having a mark on their permanent file that could lead to a parole denial:

> Let me say that for the record, a lot of people were not wearing their masks properly, nor practicing social distance! You run into and bump into people all the time! I just mentioned to my boss that I was scared to be at work. Then I was told, "if I do not go to work during the pandemic, I would be written up." – CIW, *PrisonPandemic* 2021

The choice between putting themselves in harm's way and jeopardizing the possibility for release is another pressure unique to this COVID-19 situation. The compounding of all these factors in California prisons spurred prisoners to seek ways to rehumanize themselves by finding connection, stopping the harm, and finding validation.

Coping

These examples from the data illustrate the variation in experiences past our traditional understanding of pains of imprisonment, however, they also manifest new methods of coping from irregular circumstances. Coping styles are generally dependent on specific settings (Reeves 2015; Van Harreveld et al. 2007). Where prisoners have less autonomy than free peoples, they are unable to exercise problem-focused coping strategies to alleviate "the problem." Rather, they rely on emotion-managing methods of coping (Reeves 2015). The prisoner class felt unseen, disappeared, disconnected, and voiceless.

As social networks are used as a means of coping to find meaning in their lives (Vanhooren et al. 2018), prisoners renewed this focus as they were challenged with extended lockdowns. The drive to "reconnect" with family, community, and self, manifested in the population as proclamations of self-improvement, and action to protect self and others. An incarcerated man from High Desert explains how his method of coping helped him focus on bettering himself:

> I keep in contact with family through phone calls and letters. Though it's hard, I can't hug them or see them. But that's the consequence of sin. I'm truly grateful for all the love and support they've been showing me since day one of my calamity. I cope by just doing the best I can to better myself by reading the Bible and getting involved in the self-help packets. I keep some of their pictures up on the wall for motivation when I have difficult days. In all good conscience, I can't be lazy or complacent on my rehabilitative efforts when they have done nothing but show me their love and support – High Desert, *PrisonPandemic 2021 20210129_377*

He asserts that he cannot be “lazy” or “complacent,” after explaining how his method of coping is bettering himself to reassert self-worth after his “calamity.” Though he has not physically seen his family, he maintains his feeling of connection through personal responsibility to show of gratitude for their support.

This woman in Chowchilla state prison explains how she uses her faith to overcome the pain. This method of coping galvanized her to aid her fellow prisoners through the crisis, connecting her pain to a sense of collective responsibility:

> Due to my spirituality it has caused me to not be afraid. To face these challenges with the most courageous heart and help other women find peace in the midst of such crisis. I wish I could say it's like this from every woman in here but, that's not the case. It breaks my heart to see so many women give up and have no desire of change. I'm here to be an example and maintain strength as an extended voice to give hope and light. – Chowchilla, *PrisonPandemic 2020 20201217_204*

She expresses that she “is here,” alluding to life-meaning, to be an example to other women. She regulates negative emotions from the pandemic by finding a renewed purpose to lead.

In Donovan State prison, a person describes in detail how their coping method includes mindfulness - understood as managing emotions (Reeves 2015) - and being of service to others:

> My way of coping with the crisis was by staying mindful of my surroundings and the pandemic situation, praying for myself and others aboard, reading books, listen to music

> (Jazz particularly), exercising, writing letters, and repairing various things for needy inmates. – Donovan, *PrisonPandemic 2021 20210427_826*

These stories accentuate the prison populations need to find meaning in their lives by focusing on helping others and being a better version of themselves for other prisoners and their families. Through this lens, the weight of the unique elements created by the pandemic helps to frame social responsibility as a method of coping. Furthermore, the existence of PrisonPandemic as a viable option to voice concern can also be understood as a method of coping and healing from trauma.

Trauma Recovery

For many people who experienced COVID-19 spreading throughout California prisons, survival became an everyday concern. Many were aware of how outbreaks began but had restricted ways of prevention. As they were shuffled among their respective facilities, options to voice their concerns and file institutional grievances were inadequate at best. As previously mentioned, the human need to address injustice and be heard, was evident in many testimonies. Having a venue, through PrisonPandemic, to speak on the issues allowed prisoners to: (1) find a sense of connection to a community who cared; (2) address the harms they were experiencing to prevent future harm; (3) be validated through public exposure. Confirmation of this is illustrated in this story from a woman in Chowchilla:

> I have not been handling this crisis very well. And again for me it is not about family visits that gets me through. It is the ability to talk to other inmates who are my support and encouraging friends that I have not seen in months. So I think they need to change a lot of things but I want to thank you for even caring and listening – Chowchilla, *PrisonPandemic 2020 20201201_79*

This man in San Quentin considers the PrisonPandemic project an avenue to further reinforce his actions to acknowledge and create change for the entire California prison population. The grievance process in California's prisons can be at times very ineffective (Jenness and Calavita 2018). In an environment where a population's pain is seen as less important (Sered 2019) and nonexistent or invisible to the outside community, a platform to be heard is therapeutic.

> I'm hoping that whoever is out there listening can help advocate on our behalf and get this change because we're filing grievances, but we're not being heard. – San Quentin, *PrisonPandemic 2020*

The need to express wrongdoing to advocate for the community, while under duress, is epitomized in a story from a woman in Chowchilla. She expresses the dire circumstance where the population were unable to protect themselves from the incoming virus from prison staff, tracing the outbreak in her institution for public record:

> At the onset of COVID in March 2020, our staff did not wear masks, or if they did, wore them improperly. We did not get any masks until June or July while staff were coming to work and testing positive, we could do nothing to protect ourselves. Scary because the staff brought the virus and now inmates are testing positive, and we don't get a ventilator.

> We don't get proper medication. They don't even provide inmates the proper masks. – Chowchilla, *PrisonPandemic* 2020 20201223_218

She explains how the population could "do nothing to protect" themselves, then she explains how they did not get adequate care when they get infected. This is an attempt to prevent harm while also advocating for her population.

A man in High Desert State prison acknowledges how reporting his experience aids him in his processing of the situation. He expresses gratitude for the platform to illuminate the plight of his community during this difficult time. He feels he is doing a public good by heeding the call for stories while also fulfilling an emotional need to feel connected and be heard.

> I just want to highlight how less than human we are being treated. And this also helps with venting frustrations on paper of our current treatment…I hope that this brief missive can and will shine some light on the hardships we deal with on a day-to-day basis. Especially during this COVID-19 pandemic. I close for now, and I thank you for your time and this opportunity to have a voice when it's desperately needed - High Desert, *PrisonPandemic 2021* 20210315_549

Prisoners from these facilities responded to the call for testimonies, consciously or not, to also heal from the traumatic experiences playing out across California. The PrisonPandemic project allowed them to address harm while also allowed them to have their respective voices acknowledged even though the testimonies were anonymized.

In the carceral space, the crisis of the pandemic caused extreme trauma and harm (Johnson et al. 2021) to most of the prisoner population across the

world (Alohan and Calvo 2020). Where UCI PrisonPandemic created the platform for incarcerated people to be heard, prisoners were able to express their concerns and demonstrate varying levels of social responsibility to potentially *prevent future harm*, while also using the platform as a means of recovering from their own trauma. This insight adds additional breadth to this analysis of the correlation of pains of imprisonment literature and social responsibility. The evolving pain of being in an ill-equipped institution during a health crisis, coupled with an available forum to express concern through PrisonPandemic, provided the incarcerated population restorative justice options. California prisoners had a public place to air grievances which helped: coping, address wrongdoing to prevent future harm, and potentially find a way to heal.

Social Responsibility

The display of testimonies above contextualizes and situates the occurrence of weight and social responsibility in the data as a product of multiple processes from pandemic tensions. The code of “responsibility” was defined as “mitigating actions to curb the spread of infections, helping others, and self-improvement.” This research has found that an incarcerated person’s actions to protect themselves during a pandemic is an aspect of social responsibility in prison because this community has a heightened awareness of the spread of infection that is dependent on their own limited actions. This sentiment is highlighted by a man housed in Donovan when he speaks of his personal practice to mitigate the spread:

> I have seriously followed the health care service provider's advice and instructions by continuing to wear my mask at all times, staying at least six feet from others, and washing my hands often to stop the continuing spread of the virus in my area or around the facility. Also, I constantly take advantage of the COVID-19 test every chance I am allowed to do so, I have taken (6) COVID-19 tests with negative results every time. – Donovan, *PrisonPandemic 2021 20210427_826*

Here, a survivor in San Quentin explains his realization of the severity of the disease and his powerlessness to help. He is frustrated by his inability to help while also demonstrating a sense of moral obligation and social responsibility to be of service:

> *If you don't eat well, or you don't stay active, or whatever, you put yourself in a compromised position. It was the worst disease that I've ever encountered, I wouldn't wish it on anybody. And the goofy thing now is I want to get back from this, I want to- I've got the antibodies, I know I've got em. But I cannot donate blood to people who are doing plasma, because I've been in prison. If you've been in prison more than 72 hours, you have to be out more than a year.* - San Quentin, *PrisonPandemic* 20201020_03_00

This San Quentin prisoner wants to be of service but is at a loss when considering the regulations placed on blood donation.

Another man from San Quentin discusses his outrage of being denied basic safety protocol as he speaks for his community:

> We beg for proper social distancing and masks. Nothing! We beg to be released. Nothing! We beg for protection. Nothing! So, we sit in our small cages and wait and watch as news media documents COVID - the Angel of Death – march across the continent toward us. – San Quentin, *PrisonPandemic,* 2020 20201201_75

This man considers himself as part of the collective and the prison is within his circle of responsibility (Low et al. 2022), as he speaks for the prison as "we." This weight of being incapacitated while the virus is proverbially "marching" towards them as they "sit in" their "small cages," illustrates how the prison is viewed as a whole entity, a community. His understanding of the severity of COVID-19 is based on what he was seeing on the news. With few options to manage the stress of this situation, the perception of the severity of the disease is focused (Becker and Maiman 1975; Fall et al. 2018). This person's perception combined with his sense of community or circle of responsibility (Low et al. 2022), results in persistent "begging" for necessities.

In CIW, a woman describes the collective drive to remain safe. She is part of a collaboration with her housing partners and as part of a group, they all contribute to cleaning duties with the limited supplies they are given for the good of the whole:

> We are OK. At the time they did give us cleaning supplies like Fabuloso, Windex, hand sanitizer, and every other day they will spray the bathroom down with bleach, and I told her I said we will be OK. We clean our area too much to get sick. – CIW, *PrisonPandemic 2020 20201202_087*

In Folsom a man explains how he feels drawn to act but is in a compromised position. He explains his sentiment about wanting to help his fellow man:

> I'm forced to watch my fellow man pass away. I owe a debt to society, I plead with the powers that be to put me on the front line of the fight. It's either that or sit here and wait

> for one of the COs to come personally hand me a case of corona. – Folsom, *PrisonPandemic 2021 20210104_294*

Incarcerated people had a heightened sense of duty to each other and to give back to their families and society as the virus spread from facility to facility. The association of weight and personal responsibility that manifested throughout these descriptions of personal action to mitigate infection rates was a renewed dedication to self-improvement and growth as prisoners were searching for meaning, finding a way to cope, and recover from the trauma.

DISCUSSION

The prisoner class, in this sample of one hundred, frequently displayed a sense of social responsibility to family, the safety of those around them, and personal progress. Despite their dire circumstances, many of them made a great deal of effort to follow protocols and be responsible within the prison setting, and despite the amount of institutional negligence they received, many of them viewed themselves as part of a larger family despite the dehumanization that is so prevalent in correctional settings. If they did not speak about their family members, they felt a sense of communal responsibility for everyone in their institution. These observations and application of coping, social responsibility, and trauma recovery scholarship are used to provide an untapped understanding of the actions of the incarcerated, during this time of emerging pandemic prison scholarship.

The UC Irvine PrisonPandemic project is the first of its kind in systematically documenting the voices of the incarcerated in every carceral facility throughout the state during one of the most tumultuous times in United States History. Having this resource has contributed to a robust understanding of the plight our prisoner population, in multiple counties, in multiple facilities, among men and women. The themes of weight, responsibility, coping, and trauma recovery were helpful descriptors to conceptualize the multifaceted dilemmas incarcerated people faced for the past few years as we all rode the waves of infections month to month.

The issues highlighted here, in the criminology, sociology, and public health sphere, serve as a descriptive understanding of the major issues facing our incarcerated populations in the 21st century. This public health, racial justice, and human rights disaster can be best described by the people living it. Though the sample was not extremely large, many of the same themes emerged across institutions.

The age, the location, and the spatial environment of each prison affected how a prison responded to the distancing, transfers, and availability of PPE. For example, in Folsom state prison, men were moved to the female facility and women were moved to tents. The first large outbreak at a prison in California occurred in San Quentin when prisoners were transferred from California Institute for Men (CIM) state prison. Eventually a class action lawsuit was filed by prisoners that resulted in a win and San Quentin had to reduce its population size

(CBS BAY AREA 2021). This action can be viewed as an act of social responsibility on behalf of all parties involved. Most all facilities did not have proper masks for incarcerated people to wear and many correctional officers did not wear them anyway. Each description from the various stories highlighted a different theme of pain and deprivation that expands our understanding of what our prison systems have the potential to inflict.

Low et al.'s grounded theoretical framework on social responsibility was published early in 2022, a few months before the completion of this paper. This concept of social responsibility is usually applied to aggregate society, most often in the corporate world, framed as *corporate responsibility*. The application of this social responsibility framework to the incarcerated population has not been done. Moreover, applying restorative justice trauma and recovery scholarship to the incarcerated as victims is atypical. These processes and insights are usually applied pre adjudication as a means of preventing incarceration.

It is important to understand how the individual person responds to crises in large institutions like prisons. The responsibility component of this paper is a testimony to the resilience of our prisoners and more broadly, a testament to the resolve of our human condition to search for meaning, seek justice, and take care of each other. The incarcerated focused on their families and the "greater good" in many instances while dealing with huge dilemmas and institutional unknowns. Sykes (2021) explained the camaraderie and sense of unity that

occurs in prison in his early works but trying to survive a pandemic together adds another layer of collaboration and solidarity.

STUDY LIMITATIONS

Strictly using the PrisonPandemic archive can be considered a convenient sample of the prison population considering the people who reached out to UCI voluntarily chose to make contact. There may be an incomplete picture of the sentiment and actions of the California prison population because the people corresponding with the archive already may have had a sense of duty.

The process to encourage incarcerated people to call the phone line has also been difficult. The lack of responses from specific institutions – reducing the sample size – may be in part because of the prison population's the lack of awareness of the phone line, the transfers, and/or quarantine protocols as the virus has spread through the system. Some prisons seemingly refused to participate once a group of student's letters inundated the facility. With some missing institutional data, generalizability can be called into question.
Because the data are pre-recorded testimonies from calls and letters, I did not have an option to explore specific questions nor was I able to ask more in-depth questions about the pains of imprisonment.

Additionally, the collection of the stories for the UCI archive began in the Fall of 2020, six to eight months into the spread of the pandemic. Testimonies from earlier in the year during the first lockdown periods will be explained from memory and not real-time, as well as testimonies may be cut short because of

the nature of the state prison phone limitation to 15-minute increments. The method of theoretical sampling may be limited due to these sample issues and because I am analyzing data from the most populous state of California that has a large prison budget, the findings from this research may not be scalable to other institutions, nationally.

CONCLUSION

Academics and advocates were aware of the disaster that would occur in our California prisons when the pandemic began. As mentioned above, the state prison system has had a history of ongoing human rights abuses spanning decades. The empirical understanding of the pains of imprisonment has taken on a new dimension with events that transpired in California carceral facilities. Early in the pandemic as things were shutting down, we did not know what to expect but were hoping for the best.

By examining these experiences detailed in this paper, we can help guide legislators to implement more humane policies as well as potentially continue to de-carcerate, considering the CA prison system is still over capacity.

PrisonPandemic scholarship also accentuates the need for multiple modalities to continue in-prison programming that can adequately address a break in human contact. Similarly, it addresses why we may need adaptations to continue lines of communication with not only family members, but a wider pool of mental health providers as stated in many of the stories in the data.

These years of the pandemic will have a long-lasting effect on our state prisoners, and some of them never had a chance to make it "home." Continuing the work to uncover the events that led to infectious outbreaks and death, to take preventative action is essential. Prisons are not built for the safety of those housed inside, rather they are petri dishes for disease.

REFERENCES

Abraham, Leola A., Timothy C. Brown, and Shaun A. Thomas. 2020. "How COVID-19's Disruption of the U.S. Correctional System Provides an Opportunity for Decarceration." *American Journal of Criminal Justice* 45(4):780–92. doi: 10.1007/s12103-020-09537-1.

Alohan, Daniel, and Michele Calvo. 2020. "COVID-19 Outbreaks at Correctional Facilities Demand a Health Equity Approach to Criminal Justice Reform." *Journal of Urban Health* 97(3):342–47. doi: 10.1007/s11524-020-00459-1.

American Journal of Managed Care. n.d. "A Timeline of COVID-19 Developments in 2020." *AJMC*. Retrieved May 15, 2022 (https://www.ajmc.com/view/a-timeline-of-covid19-developments-in-2020).

Banks, Cyndi. 2017. *Prisons in the United States: A Reference Handbook*. Santa Barbara, UNITED STATES: ABC-CLIO, LLC.

Becker, Marshall H., and Lois A. Maiman. 1975. "Sociobehavioral Determinants of Compliance with Health and Medical Care Recommendations." *Medical Care* 13(1):10–24.

Bish, Alison, Lucy Yardley, Angus Nicoll, and Susan Michie. 2011. "Factors Associated with Uptake of Vaccination against Pandemic Influenza: A Systematic Review." *Vaccine* 29(38):6472–84. doi: 10.1016/j.vaccine.2011.06.107.

Bolívar, Daniela. 2019. *Restoring Harm: A Psychosocial Approach to Victims and Restorative Justice*. London: Routledge.

Bou-Rhodes, Alexandre. 2019. "Straight to Video: America's Inmates Deprived of a Lifeline Through Video-Only Visits." *Boston College Law Review* 60(4):1243–78.

Buentello, Salvador, Robert S. Fong, and Ronald E. Vogel. 1991. "Prison Gang Development: A Theoretical Model." *The Prison Journal* 71(2):3–14. doi: 10.1177/003288559107100202.

Burton, Paul R. S., Nathaniel P. Morris, and Matthew E. Hirschtritt. 2021. "Mental Health Services in a U.S. Prison During the COVID-19 Pandemic." *Psychiatric Services* 72(4):458–60. doi: 10.1176/appi.ps.202000476.

California, State of. 2022. “COVID-19 and Seasonal Influenza: Interim Guidance for Health Care and Public Health Providers.” *CCHCS*. Retrieved May 24, 2022 (https://cchcs.ca.gov/covid-19-interim-guidance/).

CBS BAY AREA. 2021. “Judge Rules CDCR Inflicted Cruel and Unusual Punishment on San Quentin Inmates During Massive COVID Outbreak.” Retrieved May 6, 2022 (https://www.cbsnews.com/sanfrancisco/news/san-quentin-covid-outbreak-cruel-unusual-punishment-cdcr-inmates/).

CDCR, Change to Regulations SNY/NDPF. 2021. “Inmate Housing and Program (SNY-NDPF).” 34.

Cerrato, Ferdinando, Michele Esposito, Agnese Drusiani, Iuri Moi, Eugenia Franciosi, Nadialina Assueri, Raffaella Campalastri, and Angelo Fioritti. 2021. “Locking out the Virus: Management of a SARS-CoV-2 Outbreak in an Italian Prison.” *International Journal of Prisoner Health* 17(3):258–66. doi: 10.1108/IJPH-12-2020-0100.

Chun Tie, Ylona, Melanie Birks, and Karen Francis. 2019. “Grounded Theory Research: A Design Framework for Novice Researchers.” *SAGE Open Medicine* 7:2050312118822927. doi: 10.1177/2050312118822927.

Corbin, Juliet, and Anselm Strauss. 2008. *Basics of Qualitative Research (3rd Ed.): Techniques and Procedures for Developing Grounded Theory*. 2455 Teller Road, Thousand Oaks California 91320 United States: SAGE Publications, Inc.

Crewe, Ben. 2011. “Depth, Weight, Tightness: Revisiting the Pains of Imprisonment.” *Punishment & Society* 13(5):509–29. doi: 10.1177/1462474511422172.

Duarte, Catherine, Drew B. Cameron, Ada T. Kwan, Stefano M. Bertozzi, Brie A. Williams, and Sandra I. McCoy. 2022. “COVID-19 Outbreak in a State Prison: A Case Study on the Implementation of Key Public Health Recommendations for Containment and Prevention.” *BMC Public Health* 22(1):977. doi: 10.1186/s12889-022-12997-1.

Fall, Estelle, Marie Izaute, and Nadia Chakroun-Baggioni. 2018. “How Can the Health Belief Model and Self-Determination Theory Predict Both Influenza Vaccination and Vaccination Intention ? A Longitudinal Study among University Students.” *Psychology & Health* 33(6):746–64. doi: 10.1080/08870446.2017.1401623.

Gilmore, Ruth Wilson. 2007. *Golden Gulag: Prisons, Surplus, Crisis, and Opposition in Globalizing California / Ruth Wilson Gilmore*. Berkeley: University of California Press.

Gullone, Eleonora, Tessa Jones, and Robert Cummins. 2000. "Coping Styles and Prison Experience as Predictors of Psychological Well-Being in Male Prisoners." *Psychiatry, Psychology, and Law* 7(2):170–81. doi: 10.1080/13218710009524983.

Haney, Craig. 2006. "The Wages of Prison Overcrowding: Harmful Psychological Consequences and Dysfunctional Correctional Reactions Prison Reform: Commission on Safety and Abuse in America's Prisons." *Washington University Journal of Law & Policy* 22:265–94.

Jenness, Valerie, and Kitty Calavita. 2018. "'It Depends on the Outcome': Prisoners, Grievances, and Perceptions of Justice." *Law & Society Review* 52(1):41–72. doi: 10.1111/lasr.12312.

Johnson, Luke, Kerry Gutridge, Julie Parkes, Anjana Roy, and Emma Plugge. 2021. "Scoping Review of Mental Health in Prisons through the COVID-19 Pandemic." *BMJ Open* 11(5):e046547–e046547. doi: 10.1136/bmjopen-2020-046547.

Joseph, Stephen. 2012. "What Doesn't Kill Us…." *Psychologist* 25(11):816–19.

Kerr, Lisa, and Kristy-Anne Dube. 2021. "The Pains of Imprisonment in a Pandemic." *Queen's Law Journal* 46(2):327-.

Kinner, Stuart A., and Jesse T. Young. 2018. "Understanding and Improving the Health of People Who Experience Incarceration: An Overview and Synthesis." *Epidemiologic Reviews* 40(1):4–11. doi: 10.1093/epirev/mxx018.

Lauer, Claudia, and Colleen Long. n.d. "US Prisons, Jails on Alert for Spread of Coronavirus." *ABC News*. Retrieved June 7, 2022 (https://abcnews.go.com/Health/wireStory/us-prisons-jails-alert-spread-coronavirus-69437696).

Low, Lee Lan, Seng Fah Tong, Ju Ying Ang, Zalilah Abdullah, Maimunah A. Hamid, Mikha Saragi Risman, Yun Teng Wong, Nurul Iman Jamalul-lail, Kalvina Chelladorai, Yui Ping Tan, Yea Lu Tay, Awatef Amer Nordin, and Amar-Singh Hss. 2022. "Social Responsibility Perspective in Public Response to the COVID-19 Pandemic: A Grounded Theory Approach." *BMC Public Health* 22(1):469. doi: 10.1186/s12889-022-12819-4.

Marshall Project. 2021. "A State-By-State Look at 15 Months of Coronavirus in Prisons | The Marshall Project." Retrieved August 29, 2021 (https://www.themarshallproject.org/2020/05/01/a-state-by-state-look-at-coronavirus-in-prisons).

Maycock, Matthew. 2022. "'Covid-19 Has Caused a Dramatic Change to Prison Life'. Analysing the Impacts of the Covid-19 Pandemic on the Pains of Imprisonment in the Scottish Prison Estate." *The British Journal of Criminology* 62(1):218–33. doi: 10.1093/bjc/azab031.

McLeod, Branden A., and Janaé Bonsu. 2018. "The Benefits and Challenges of Visitation Practices in Correctional Settings: Will Video Visitation Assist Incarcerated Fathers and Their Children?" *Children and Youth Services Review* 93:30–35. doi: 10.1016/j.childyouth.2018.07.004.

Montoya-Barthelemy, Andre G., Charles D. Lee, Dave R. Cundiff, and Eric B. Smith. 2020. "COVID-19 and the Correctional Environment: The American Prison as a Focal Point for Public Health." *American Journal of Preventive Medicine* 58(6):888–91. doi: 10.1016/j.amepre.2020.04.001.

Mortaji, Parisa, Michaele Francesco Corbisiero, Michael A. Vrolijk, Andrés F. Henao-Martínez, and Carlos Franco-Paredes. 2021. "Chronicle of Jails and Prisons COVID-19 Deaths Foretold." *The American Journal of the Medical Sciences* 361(6):801–2. doi: 10.1016/j.amjms.2021.01.002.

Nelson, Bryn, and David B. Kaminsky. 2020. "A COVID-19 Crisis in US Jails and Prisons." *Cancer Cytopathology* 128(8):513–14. doi: 10.1002/cncy.22335.

Novisky, Meghan A., Chelsey S. Narvey, and Daniel C. Semenza. 2020. "Institutional Responses to the COVID-19 Pandemic in American Prisons." *Victims & Offenders* 15(7–8):1244–61. doi: 10.1080/15564886.2020.1825582.

Peterson, Jonathan, Anita Lee, Drew Soderborg, Mac Taylor, and California Legislature Joint Legislative Budget Committee Legislative Analyst. 2017. *Improving In-Prison Rehabilitation Programs*. Sacramento, CA: Legislative Analyst's Office.

Reeves, Carla, ed. 2015. *Experiencing Imprisonment: Research on the Experience of Living and Working in Carceral Institutions*. London: Routledge.

Rocheleau, Ann Marie. 2013. "An Empirical Exploration of the 'Pains of Imprisonment' and the Level of Prison Misconduct and Violence." *Criminal Justice Review* 38(3):354–74. doi: 10.1177/0734016813494764.

Roth, M. Garrett, and David Skarbek. 2014. "Prison Gangs and the Community Responsibility System." *Review of Behavioral Economics* 1(3):223–43. doi: 10.1561/105.00000011.

Sered, Danielle. 2019. *Until We Reckon: Violence, Mass Incarceration, and a Road to Repair*. The New Press.

Skarbek, D. 2010. "Putting the 'Con' into Constitutions: The Economics of Prison Gangs." *Journal of Law, Economics, & Organization* 26(2):183–211. doi: 10.1093/jleo/ewn021.

Skarbek, David. 2016. "Covenants without the Sword? Comparing Prison Self-Governance Globally." *American Political Science Review* 110(4):845–62. doi: 10.1017/S0003055416000563.

Stewart, Ashleigh, Reece Cossar, and Mark Stoové. 2020. "The Response to COVID-19 in Prisons Must Consider the Broader Mental Health Impacts for People in Prison." *Australian & New Zealand Journal of Psychiatry* 54(12):1227–28. doi: 10.1177/0004867420937806.

Suhomlinova, Olga, Tammy Colleen Ayres, Matthew James Tonkin, Michelle O'Reilly, Emily Wertans, and Saoirse Caitlin O'Shea. 2022. "Locked up While Locked Down: Prisoners' Experiences of the COVID-19 Pandemic." *The British Journal of Criminology* 62(2):279–98. doi: 10.1093/bjc/azab060.

Sykes, Gresham M. 2021. *The Society of Captives: A Study of a Maximum Security Prison*. Princeton University Press.

Van Harreveld, Frenk, Joop Van der Pligt, Liesbeth Claassen, and Wilco W. Van Dijk. 2007. "Inmate Emotion Coping and Psychological and Physical Well-Being: The Use of Crying Over Spilled Milk." *Criminal Justice and Behavior* 34(5):697–708. doi: 10.1177/0093854806298468.

Vanhooren, Siebrecht, Mia Leijssen, and Jessie Dezutter. 2018. "Coping Strategies and Posttraumatic Growth in Prison." *The Prison Journal* 98(2):123–42. doi: 10.1177/0032885517753151.

Vannier, Marion. 2020. “The Power of the Pen: Prisoners’ Letters to Explore Extreme Imprisonment.” *Criminology & Criminal Justice* 20(3):249–67. doi: 10.1177/1748895818818872.

Waight, Nerita, Cheryl Axleby, Roxanne Moore, and David Mejia-Canales. 2021. “COVID-19: A Missed Opportunity to Reimagine the Justice System for Our People.” *Current Issues in Criminal Justice* 33(1):19–26. doi: 10.1080/10345329.2021.1885899.

Wallace, Danielle, John M. Eason, Jason Walker, Sherry Towers, Tony H. Grubesic, and Jake R. Nelson. 2021. “Is There a Temporal Relationship between COVID-19 Infections among Prison Staff, Incarcerated Persons and the Larger Community in the United States?” *International Journal of Environmental Research and Public Health* 18(13):6873. doi: 10.3390/ijerph18136873.

Weide, Robert D. 2020. “The Invisible Hand of the State: A Critical Historical Analysis of Prison Gangs in California.” *The Prison Journal (Philadelphia, Pa.)* 100(3):312–31. doi: 10.1177/0032885520916817.

Wilper, Andrew P., Steffie Woolhandler, J. Wesley Boyd, Karen E. Lasser, Danny McCormick, David H. Bor, and David U. Himmelstein. 2009. “The Health and Health Care of US Prisoners: Results of a Nationwide Survey.” *American Journal of Public Health* 99(4):666–72. doi: 10.2105/AJPH.2008.144279.

Yun, Young Ho, Jin Ah Sim, Ju Youn Jung, Dong-Young Noh, Eun Sook Lee, Young Woo Kim, Jae Hwan Oh, Jung Sil Ro, Sang Yoon Park, Sang Jae Park, Kwan Ho Cho, Yoon Jung Chang, Yeon Min Bae, Si Young Kim, Kyung Hae Jung, Zae Ill Zo, Jae-Young Lim, and Soon Nam Lee. 2014. “The Association of Self-Leadership, Health Behaviors, and Posttraumatic Growth with Health-Related Quality of Life in Patients with Cancer.” *Psycho-Oncology* 23(12):1423–30. doi: 10.1002/pon.3582.

APPENDIX A

CODEBOOK

Pains of Imprisonment (PI)
Social Responsibility (SR)
Circle of Responsibility (CR)

DEPTH (PI)	Description of the institution's physical control of their person in terms of their physical location within the prison. Ex. ad seg, lockdown, in cell, etc
LOSS OF CONTACT (PI, CR, SR)	Stress from freedoms lost, whether it be visitations, and programs
FAMILY (PI, CR, SR)	Thoughts and feelings about family and importance or lack of importance about connection.
WEIGHT (PI)	Description of the personal experience in terms of prison survivability. May include the burden of dealing with other people, including staff and other prisoners. Could be infections, deaths, arguments, and/or threats from correctional staff, no visitation, no programming, no personal protective equipment (PPE), fear of infection.
TIGHTNESS (PI)	The overall feeling of constriction that does not have to be physical, but institutional surveillance and control. Can include covid protocols.
DEPTH (PI)	Description of the institution's physical control of their person in terms of their physical location within the prison. Ex. ad seg, lockdown, in cell, etc
RESPONSIBILITY (SR)	Displays a sense of responsibility to do their part to mitigate the spread of the virus, and/or responsibility to help others or themselves (efficacy)

APPENDIX B

CODE SPREADSHEETS:

Open Code Application:

https://docs.google.com/spreadsheets/d/1v9QD1CildkCUiBe4OBQsNB-d7Yqj5bYgjduEO-q0wKY/edit#gid=0

Themed Code Application:

https://docs.google.com/spreadsheets/d/15ALbS6xnLY6OQUUCdqWWTOoVZRbH7TdK/edit?usp=sharing&ouid=101701724805185525295&rtpof=true&sd=true

Co-occurring codes:

https://docs.google.com/spreadsheets/d/1GaLDyiW7Vy6RDcAOtdRtD02TnWVLEctT/edit?usp=sharing&ouid=101701724805185525295&rtpof=true&sd=true

APPENDIX C

TABLES

Table 1.
Modified Grounded Theory Process

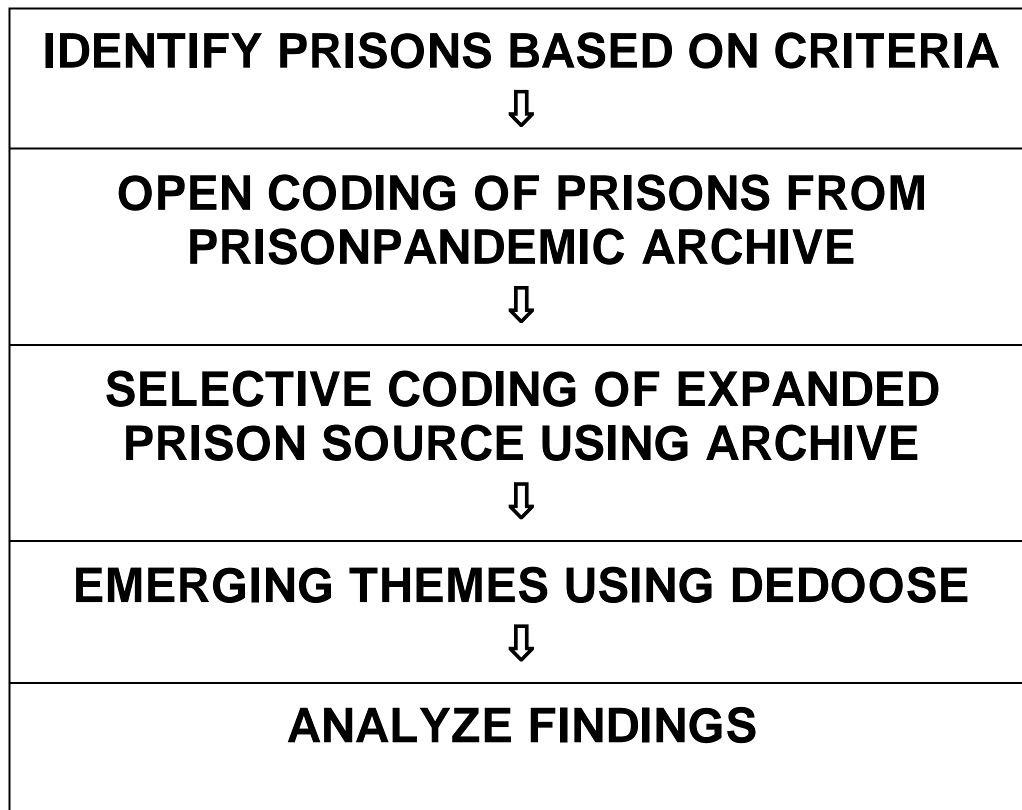

Table 2.
Social responsibility processes for incarcerated people in California. Incarcerated people are affected by the pandemic and have limited options for coping. Coupled with trauma, a need for recovery, and an available outlet through PrisonPandemic, prisoners actions manifest as social responsibility in testimonies.