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Psychic Disorders of Pregnant Incarcerated Women during and after Pregnancy

Konstantina Kotsaki*

Psychologist, MSc, University of Central Lancashire, Training in Forensic, Investigative and Criminal Psychology, Session chair, speaker, and moderator in many webinar/conferences, UK

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*Corresponding author: Konstantina Kotsaki, Forensic, Investigative and Criminal Psychologist, England, UK

Mini Review

Based on 2012 evidence more than 200.000 of 700.000 incarcerated women were held in USA prisons [1]. The USA has the highest number of incarcerated women compared to international imprisoned women [1]. It reached circa 1/3 of global women kept in prison [1]. The psychic disorders - mainly depression and anxiety - accompany pregnancy even in nonincarcerated cases [2-5]. Therefore, the presence of psychic abnormalities during pregnancy is predictable and unavoidable. Contrary to that, the development of these disorders depends on many variables, is unpredictable and avoidable. A vulnerable psychic state comprises a criminal's characteristic feature [6]. It gets clear that the incarcerated women experience psychic abnormalities before beginning their sentence in prison. Thus, when transferred to prison many women had already initiated to experience grave psychic disorders [7]. No health care service was available to many women before imprisonment [8]. According to 2009 recordings from International Committee of the Red Cross the absence of these services followed the subjects even during incarceration [9]. Indeed, the pregnant incarcerated women receive a less satisfactory health care service compared to free citizens [10]. The non-proper treatment of these abnormalities means the deterioration of these disorders [11]. A recent study about the COVID-19 quarantine's impact on people's psychic health proved the negative effect of isolation on someone's psychic stability [12]. Let alone imprisonment that comprises severe isolation. Incarceration as a strict isolation leads the inmates to experience an increasing tendency, compared to free pregnant women and non-pregnant incarcerated women, to suffer serious psychic diseases [13,14]. As a result, it has a serious negative effect on prisoners' psychic health. Indeed, the imprisoned women were diagnosed with severe psychic abnormalities [11,15,16]. A great part of incarcerated women was not allowed to keep their children during the first days after the birth [17]. It comprises a significant factor associated with the deterioration of incarcerated women's psychic deficiencies

[11,18]. Knowing that they will not have the possibility to be with their child and care of their babies was proved to negatively affect the mothers' psychic calmness [18]. Albeit at first it comprises a stimulator to the existing psychic agitation of these women, it could not be evaluated as a wrong action either for the mother's or baby's benefit. As mentioned, incarcerated women experience developed psychic agitations. Taking into account that childhood comprises the basis of someone's character and personality and that the mother's influence on the child affects to an important degree the latter's character and psychic situation not separating a newborn baby from a mother being in a vulnerable psychic situation is followed by an agitated psychic condition of the child. A characteristic feature of a criminal's psychic condition is the need to prove to themselves and to the third parties that they could dominate other's life. If the health experts, part of restorative justice system, in prisons, do not estimate the psychic condition of a woman to be free of her criminal tendencies and stable enough to behave in a quiet and non-dangerous way for her and the baby leaving the child with the mother might be dangerous either for the mother or the child. Not separating an incarcerated mother from her child means stimulating her existing criminal tendencies because someone that is unable to be defended is a good victim. The inmate for a period has not the opportunity to express her violence. She has not the opportunity to satisfy her criminal nature. If there was not reached a significant improvement of the psychic condition the subject's vulnerability will not permit a normal reaction even to non-significant disturbances like a baby crying. A representative example of dangerous situation is the harm caused to the baby because the mother as an offender responds violently. In case of a continual baby crying the mother might be violent to the child. After being violent the mother might repent her actions and harm herself because of what she did to the child. Especially after the effectiveness of restorative tools, applied to return the subject to a normal psychic state being aware of her behavior's impact on her child the mother will feel guilty that she caused harm to her child.

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In this case, permitting an incarcerated woman to keep her child is equivalent to committing crimes, including harm to the child's and mother's psychic condition. The solution of reducing the separation time of mother and baby could be the frequent and effective treatment of mother's psychic abnormalities. Unfortunately, the health care services in prisons are provided by private companies and are proved inefficient [19,20]. Another factor to which should be paid attention is the mentality of the inmates toward medical care services in prison. Even when being available the inmates do not frequent these services [8]. Thus, there should be serious attempts to assure the incarcerated women that the medical care services are there for them and it is their indisputable right to have access to the services. They should be convinced that instead of not frequenting the health care services it would be better to denounce any illegality toward them - like racism, underestimation of their health and their lives. It gets clear that many factors stimulate the deterioration of incarcerated women's psychic illnesses when they are pregnant. However, imprisonment is not always a trauma for women. Some women in prison not only don't lose anything [8], but they stop experiencing different tormenting conditions like poverty, racism, and various kinds of violence [8,21].

References

- 1. Walmsley R (2015) World female imprisonment list. Inst Criml Pol Res 3: 1-13.
- Almalik MM, Mosleh SM (2017) Pregnant Women: What do they need to know during pregnancy? A descriptive study. Wom Bir 30(2): 100-106.
- Bennett HA, Einarson A, Taddio A, Koren G, Einarson TR (2004) Prevalence of depression during pregnancy: Systematic review. Obstet Gyn 103(4): 698-709.
- Ross LE, McLean LM (2006) Anxiety disorders during pregnancy and the postpartum period: A systematic review. J Clin Psychi 67(8): 1285-1298.
- Staneva A, Bogossian F, Pritchard M, Wittkowski A (2015) The effects of maternal depression, anxiety, and perceived stress during pregnancy on preterm birth: a systematic review. Wom Bir 28(3): 179-93.

- Kocsis NR (2006) Criminal profiling: principles and practice. Humana Press, New Jersey, USA, pp. 297.
- 7. Young D (1998) Health status and service use among incar¬cerated women. Fam Com Heal 21(3): 16-31.
- 8. Fearn NE, Parker K (2005) Health care for women inmates: Issues, perceptions and policy considerations. Cal J Heal Prom 3(2): 1-22.
- 9. International Committee of the Red Cross (2009) Health in prison: Looking after women in a man's world.
- 10. Van den Bergh BJ, Gatherer A, Fraser A, Moller L (2011) Imprisonment and women's health: Concerns about gender sensitivity, human rights and public health. Bulle Wor Heal Organ 89(9): 689-694.
- 11. Harner HM, Riley S (2103) The impact of incarceration on women's mental health: Responses from women in a maximum-security prison. Qual Health Res 23(1): 26-42.
- 12. Brooks KS, Webster KR, Smith EL, Woodland L, Wessely S, et al. (2020) The psychological impact of quarantine and how to reduce it: rapid review of the evidence. Lanc 395(10227): 912-920.
- Bloom BE, Covington S (2008) Addressing the mental health needs of women offenders. In: Gido R, Dalley L (ed.), Women's mental health issues across the criminal justice system, pp.1-30.
- 14. Fogel CI (1993) Pregnant inmates. J Obstet Gynecol Neonatal Nurs 22(1): 33-39.
- Goldkuhle U (1999) Health service utilization by women in prison: Health needs indicators and response effects. J Corr Heal Ca 6(1): 63-83.
- Lindquist CH, Lindquist CA (1997) Gender differences in distress: Mental health consequences of environmental stress among jail inmates. Behav Sci Law 15(4): 503-523.
- 17. Yager S, Prison born (2015) The Atlantic.
- 18. Shelton BJ, Gill DG (1989) Childbearing in prison: A behavioral analysis. J Obstet Gyn Neonat Nurs 18(4): 301-308.
- 19. Dober G (2014) Corizon needs a checkup: Problems with privatized correctional healthcare. Prison Legal News.
- 20. Tripp A, Holbrook N, Walen RC, Walsh RR (2007) Tolerating failure: The state of health care and mental health care delivery in the Michigan Department of Corrections. Amer Frie Serv Comm; Pris Leg Serv Mich Inc 1-107.
- 21. Douglas N, Plugge E, Fitzpatrick R (2009) The impact of imprisonment on health: What do women prisoners say? J Epidem Comm Heal 63(9): 749-754.



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