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# Confinement with No Rights. Perceptions of Inmates' Relatives Regarding Measures for COVID-19 Control Implemented in Mexican Prisons

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## ABSTRACT



Based on a participatory study design, this article describes how a group of family members of people deprived of liberty (PDL) experienced the COVID-19 control measures implemented in Mexico's prisons. We conducted 28 in-depth interviews and analyzed them using ATLAS.ti. We found that the measures implemented in Mexican prisons to avoid the spread of COVID-19 focused mainly on suspension of visitation and PDL confinement. The isolation imposed on PDL impacted their living conditions, making them more vulnerable to contracting COVID-19 due to lack of access to essential services, food, and hygiene supplies. Visit restrictions and PDL isolation also impacted PDL relatives' health and socioeconomic conditions. Our findings indicate that the consequences of COVID-19 control actions in Mexican prisons differ according to the gender and jurisdiction of PDL. Women in federal prisons were more isolated, while those in local ones were more deprived of basic supplies. Imprisoned women's isolation has especially severe effects on the mental and physical health of their elderly parents and children. The results show how the measures adopted to control COVID-19 outbreaks in Mexican prisons have exacerbated the preexisting systemic violence experienced by PDL and their families and how they have failed to prevent the spread of COVID-19 in these settings. These findings provide support for the health-informed penal reform of Mexican prisons.

## KEYWORDS

Prisons; Mexico; COVID-19; sanitary protocols; gender disparities; familieIntroduction

In Mexico, COVID-19 has infected over four million people, and almost 300,000 people died of COVID-19-related illnesses from March 2020 to January 2022 ([Consejo Nacional de Ciencia y Tecnología \[CONACYT\], n.d.](#)). The first COVID-19 cases in Mexico's prisons were reported in April 2020, in Mérida and Estado de México ([Notimex, 2020](#)). In response, federal and local prisons implemented COVID-19 control protocols ([Azaola, 2020](#); [Calzada et al., 2021](#); [Marmolejo et al., 2020](#)), which disrupted prisoners' everyday lives and generated new concerns among the relatives of people deprived of liberty (PDL).

Despite the COVID-19 control measures implemented by prison authorities, between April and November 2020, 1,003 inmates were infected with COVID-19, and the mortality rate increased by 121% among the incarcerated population between 2019 and 2020 ([Vela](#)

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et al., 2021). In this context, we began to question how the relatives of PDL experienced the COVID-19 crisis and the implications that the measures implemented for pandemic control within prison settings had on their lives.

Prior studies have described early responses to the pandemic, the measures carried out by penitentiary authorities, and their struggles to implement comprehensive measures to prevent and control the spread of COVID-19 within prisons (Azaola, 2020; Calzada et al., 2021; Marmolejo et al., 2020; Rapisarda et al., 2020a, 2020b). These studies revealed that isolation and visitation restrictions were the primary measures implemented in Mexican prisons. These studies also highlight how prisons' structural conditions, such as overcrowding, elevated levels of pre-trial detention, poor infrastructure, scarcity of financial and human resources, and limited access to essential goods and services, exacerbate the risk of COVID-19 spread among inmates, visitors, and prison staff. However, there is no information on how the protocols were perceived or how they affected the living conditions of PDL and their families and the literature does not describe how the implementation of general measures for COVID-19 control varies by the gender (women versus men) and prison jurisdiction (federal versus local) of PDL.

Other studies on prisons in Mexico and Latin America have highlighted critical gendered differences in daily life in prison and prisoners' roles (Agoff et al., 2020) and the essential function of relatives and their visits in terms of the survival of PDL (Azaola, 2006; Esteban, 2018; Pérez Correa, 2014; Salinas, 2014). Although these studies were not implemented during the COVID-19 pandemic, they provide an empirical and theoretical background for expectations regarding possible gender bias in the implementation of COVID-19 control measures within prisons and their impact on inmates and their relatives.

This study aims to document how a group of relatives of people deprived of liberty (PDL) experienced the COVID-19 control measures implemented in Mexico's prisons. Specifically, we aim to answer the following questions: (1) How do the actions implemented by penitentiary authorities for COVID-19 control disrupt the lives of PDL? (2) How does this disruption in the lives of PDL within prisons affect their relatives' lives outside prison? (3) Are there any differences in implementing COVID-19 control among federal and state prisons and male and female facilities? (4) How do PDL and their relatives respond to the new challenges imposed by the health crisis? We argue that it is impossible to disaggregate the inmate's experience from that of their relatives and that changes in one setting have profound implications for the other. Moreover, the individualistic logic held by modern criminal law underestimates the effects of incarceration on families, and these effects are not taken into account when formulating public policy (Pérez Correa, 2015). Our findings highlight the fact that the support that relatives offer to PDL is crucial for the survival of PDL during the pandemic. However, this support has taken an enormous toll on the physical, emotional, and financial conditions of the families of PDL.

We first describe how the Mexican penitentiary system is organized, recount the mitigation strategies used by prison authorities to respond to the COVID-19 disruption, and discuss the unprecedented growth of the incarcerated population in Mexico during the pandemic. After outlining the methodological approach we utilized to collect and analyze our data, we describe how the families of PDL perceived the measures implemented by prison authorities and the impact of these measures on their well-being, comparing the findings by the jurisdiction (federal versus local) and gender of PDL. Finally, we conclude with some reflections on how the measures adopted to control COVID-19 outbreaks in Mexican prisons exacerbated the

already existent systemic violence experienced by PDL and their families, especially women, and detail how they failed to prevent the spread of COVID-19 in these settings. These results show the urgent need for health-informed penal reform in Mexican prisons.

## The Mexican prison system

Mexico constitutes the 11th largest prison system globally because of its extensive prison facilities and large inmate population (Rapisarda et al., 2020a). By the end of 2020, the national penitentiary infrastructure included 15 federal penitentiary centers, 273 state prisons, and 53 specialized detention centers for adolescents (Instituto Nacional de Estadística y Geografía [INEGI], 2021). The federal facilities constitute the federal prison system, while the state prisons and detention centers form the 32 local state penitentiary systems, which work independently, with their own rules and protocols (Calzada et al., 2021).

By August 2021, the total incarcerated population was 222,600; 94.3% were male, 5.7% were female, and 3.3% were indigenous (Secretaría de Seguridad y Protección Ciudadana [SSPC], 2021). Below, we provide a brief description of both federal and state prisons so that the reader can better understand the differences in the implementation of COVID-19 protocols between these two types of prisons.

### *Federal prisons*

Federal prisons include maximum-security facilities that hold people accused of committing the crimes established in the Federal Criminal Code. The primary offenses for which PDL are incarcerated in federal prison are arms-related crimes, kidnapping, and drug-related crimes (INEGI, 2021), with significant differences by gender. Among the men, the most frequent crimes were arms-related crimes (21.0%), kidnapping (14.4%), and drug-related crimes (9.9%); among the women, they were kidnapping (25.9%), organized crime (21.3%), and arms-related crimes (20.1%; INEGI, 2021).

By August 2021, the inmate population in federal prisons had reached 29,145 (SSPC, 2021). Of these, 1.4% spoke an indigenous language, 95.0% were men, 5.0% were women (SSPC, 2021). Most of the people incarcerated in these prisons were between 30 and 40 years old and had completed secondary education (INEGI, 2021a).

Generally, federal prisons are better equipped, less crowded, and provide more access to essential services than state prisons. For example, while only 0.01% of inmates in federal prisons share a cell with more than three people, in state prisons, 46.4% of inmates share a cell with more than five people (INEGI, 2021). In addition, 100% of federal inmates reported receiving medicine and other goods from the incarcerating institution, whereas among those in state prisons, the proportion was 36.0% (INEGI, 2021a).

Visits are the primary mechanism by which PDL can endure the deficiencies of the penitentiary system. However, most federal prisons' locations and security restrictions make it difficult for families to visit their incarcerated relatives. First, federal prisons are located outside urban areas, which increases visit costs. Additionally, visitors cannot enter these facilities with goods or products. If needed, they must deposit money in the prison system so that PDL can buy whatever they need in the prison store, for instance, potable water, medicine, personal hygiene products, or phone cards. The financial struggles that the families of PDL face when supporting their loved ones are among the most critical consequences of incarceration in federal prisons (Pérez Correa, 2015).

### **State penitentiary systems**

State penitentiary systems (state prisons) include 273 so-called social reintegration centers (*Centros de Reinserción Social* [CERESOS]), which are managed by local governments. Each state's criminal code establishes crimes corresponding to these facilities. These include theft, physical injury, property damage, individual fraud, sexual offenses, homicide, abuse of authority, and falsification of documents. Robbery and homicide are the felonies most frequently committed by the inmates in state prisons (32.7% and 29.8%, respectively; INEGI, 2021).

As of August 2021, the inmate population in state prisons was 194,006; 94.6% were men, 5.4% were women, and 3.5% were identified as indigenous (SSPC, 2021). Most of the people incarcerated in state prisons are between 18 and 28 years old; this means that they are, on average, ten years younger than the people incarcerated in federal prisons (INEGI, 2021a).

State prisons are characterized by overcrowding and precarious access to essential services (Bergman & Azaola, 2007; Comisión Nacional de los Derechos Humanos [CNDH], 2020). For example, 25.5% of PDL in state prisons do not have drinkable water in their cells, 27.5% cannot obtain medicines from the institution, and only 21% receive any personal hygiene items (INEGI, 2021).

Under these precarious conditions, women are even more deprived of basic resources and services. For example, men and women often share the same facilities in state jails and are separated only by walls. However, medical, recreational, and educational spaces are usually located in areas assigned to male PDL (Espinosa Morales & Giacomello, 2006). Also, women have less access than men to drainage systems (87.7% vs. 96.0%), toilets (87.6% vs. 95.7%), and medicine (65.8% vs. 72.9%; INEGI, 2021).

The primary way to gain access to essential services and products in state prisons is through visitors who bring money and items to loved ones. For instance, between 2020 and 2021, 31.9% of inmates reported paying prison staff to access drinking water, 30.0% paid for access to medicine, 23.0% paid for access to electricity in their cells, 21.6% paid for food, 18.3% paid for access to medical facilities, and 18.0% paid for access to toilets or showers (INEGI, 2021a). Families bring mainly food (79.3%), personal hygiene items (67.0%), clothes (51.1%), and money (40.2%) to their loved ones in prison during their visits (INEGI, 2021a), as, unlike federal prisons, state prisons allow visitors to enter with such vital supplies.

Scholars have documented how barriers to receiving visitors in prison affect inmates' well-being (Galván et al., 2006; De Miguel Calvo, 2014) and how incarcerated women are disproportionately abandoned in comparison to men (Azaola, 2006, 2013). Besides the impact on emotional well-being, not receiving visitors means that PDL lack access to essential goods, depending entirely on the prison system to survive (Agoff et al., 2020).

Most PDL visitors to state and federal prisons are women, who are the wives, daughters, and mothers of inmates (Azaola & Yacamán, 1996; Pérez Correa, 2015). Those who visit incarcerated women are mainly mothers, frequently aged >60 (Salinas, 2014). In addition to the financial struggles implied by providing for a relative in prison, other adversities that incarceration can bring to families include loss of employment, difficulty in acquiring credit, social stigmatization and isolation, increasing dependence on extended family, and negative impacts on physical and emotional health (Pérez Correa, 2015). This study aimed

to understand the new challenges that the COVID-19 pandemic has imposed on the families of PDL, how these challenges have exacerbated prisons' harmful effects on such families, and their strategies for facing the crisis.

### ***Sanitary measures for COVID-19 control implemented in Mexican prisons***

The measures recommended by the World Health Organization [WHO] (2020) regarding the prevention of the spread of COVID-19 in prisons were adopted, with variations among the countries of the region (Andrade et al., 2020). These actions mainly included 1) reducing the inmate population, 2) increasing hygiene and medical care measures, 3) implementing social distancing, and 4) minimizing contact with the outside world (Alvarado et al., 2020).

In Mexico, Azaola (2020) and Marmolejo et al. (2020) documented a series of measures implemented by prisons in response to the outbreak of COVID-19, such as restrictions on external visits and internal activities (recreational, educational, cultural, and labor-related), mandatory use of masks when entering the premises, distribution of disinfectants, and temperature checks at the entrance. Other measures included restrictions on the movement of PDL outside their cells and suspension of visits by members of civil society organizations (CSO), lawyers, human rights defenders, and individuals above 70 and under 18 years of age (CNDH, 2020).

Calzada et al. (2021) conducted a normative analysis of the COVID-19 control protocols designed by the Mexican penitentiary authorities. Their findings revealed that prisons did not adopt a unified protocol for COVID-19 prevention, control, and care, as Mexico has no unified centralized penitentiary system. Moreover, this study showed the following: (1) No prison in Mexico adopted the international recommendations entirely. (2) Most of the actions focused on preventing the spread of COVID-19 and caring for PDL and their visitors but did not include prison staff or the children who live in prisons. And (3) there were no actions to reduce the number of inmates per cell; ensure access to water, hygiene services, and products; improve access to health facilities; or to protect the human rights of PDL during the contingency period. In fact, there was an outbreak of growth in the imprisoned population during the pandemic.

### ***The growth of the incarcerated population in Mexico during the pandemic***

Despite evidence demonstrating that decreasing incarceration is the most effective strategy for mitigating COVID-19 outbreaks in prison settings (Rapisarda et al., 2020a), only three out of twenty-six prison systems in Latin America have made efforts to reduce the prison population (Bergman et al., 2020). In this region, Mexico had the lowest number of PDL released during the pandemic (Marmolejo et al., 2020) and, along with Brazil, it experienced the most significant increase in the incarcerated population during the pandemic (Ribeiro & Diniz, 2020).

Even with Senate's approval of the Amnesty Law in April 2020, as of June 2021, only 13 individuals had been released from prison because of this law (Observatorio de Amnistías, 2021). As of January 2021, the government secretary had reported the prerelease of 3,322 inmates, representing 1.5% of the total incarcerated population (Calzada et al., 2021). In fact, 2020 witnessed the largest annual growth in incarcerations of the decade, with a 6.6% increase (Ortega et al., n.d.).

The increase in the inmate population during the pandemic in Mexico can be explained primarily by the expansion of pre-trial detentions<sup>1</sup> and the decline in the use of alternative sanctions. Between 2020 and 2021, the number of people without sentences increased by 5.8% in federal prisons and 22.6% in state jails, while the proportion of those with sentences decreased by 10.0% in federal prisons and grew by only 0.35% within state prisons (SSPC, 2021).

Pre-trial detentions affected more women than men. For example, while four out of every ten men are in jail without a sentence, among women, the proportion is one out of two (Ortega et al., n.d.). Between 2020 and 2021, the proportion of incarcerated women without sentences grew by 24.1%, whereas the increase was 20.2% among men. Consequently, exclusively female state prisons saw a more considerable increase in occupancy during the pandemic (11.7%) in comparison to male-occupied state prisons (5.1%; Ortega et al., n.d.).

On the other hand, the data show that the number of alternative sanctions decreased by 34.1% during the pandemic (Ortega et al., n.d.). By January 2021, six out of ten penal sanctions involved prison time (Ortega et al., n.d.). Moreover, although men had less access to alternative punishments than women, from March to December 2020, the gender gap began to close, showing an increase in preventive detention for both men and women (Ortega et al., n.d.).

This study presents the perspective of family members of PDL regarding the implementation of COVID-19 control measures. We argue that the focus on inmate confinement and suspension of visits was not only ineffective in controlling COVID-19 outbreaks, as the prior literature shows (Rapisarda et al., 2020a), but these actions have worsened the financial hardships that the families of PDL face, worsened the already-precarious living conditions of PDL, and blocked their access to judicial processes, thereby affecting the physical, financial, and emotional well-being of both PDL and their relatives.

## Methodology

### *Study design and methods*

In this study, a participatory design was adopted. We created a team consisting of a women's rights activist organization (*Equis Justicia para las Mujeres*), a group of women who were former PDL, and academics. Together, we set out to document how the family members of PDL experienced the COVID-19 control measures implemented in Mexico's prisons.

This specific methodological approach reflects a general interest in prioritizing the voices of incarcerated women, who suffer the most in the Mexican prison system (Azaola, 2002; Pérez Correa, 2015), by engaging them in the entire research process as peer researchers. We intended to promote collective knowledge generation about the challenges faced by the families of PDL during the COVID-19 pandemic and the strategies they implemented to cope with pandemic-related restrictions in prisons.

We developed a semi-structured interview guide that covered two main topics: 1) the lives of PDL in prison and 2) family experiences. For each topic, the guide included questions about changes in their daily lives during the pandemic, the main effects of the pandemic on their lives, and the strategies they implemented to address the challenges they

faced. These open questions facilitated the generation of narratives about families' experiences with their relatives in prison. On average, each interview lasted about 70 minutes, with a minimum of 30 minutes and a maximum of 120 minutes.

All the interviews were audio-recorded, and the interviewees provided verbal consent beforehand. The ethics committee of the Center for Economics Research and Teaching (*Centro de Investigación y Docencia Económicas* – CIDE) approved the research protocol.<sup>2</sup>

### **Sampling and recruitment**

A two-stage sampling process was conducted. The first stage followed a purposive sampling of prisons, and we then developed a convenience sample among networks of the families of PDL.

Through *Equis Justicia para las Mujeres* we gained access to a group of 15 women leaders from community-based organizations advocating for the rights of PDL who are also former inmates. We invited activists to select four women to become members of the research team as peer researchers. The selection of peer researchers was participatory within the network, considering their availability and the characteristics of the PDL they advocate for in terms of gender and jurisdiction (state vs. federal), while attempting to maximize variation (Creswell, 1998).

The four women who became peer researchers lived in Estado de Mexico and Mexico City. One attends to PDL and their relatives in federal prisons, while the other three work with PDL and their relatives in state prisons in Mexico City, Estado México, and nationally.<sup>3</sup> Following purposive sampling logic, the recruitment procedure for peer researchers allowed us to obtain a sample that spanned various prison settings (Creswell, 1998).

We followed a convenience sampling procedure to recruit interviewees from each peer researcher's network. Collectively, we defined the selection criteria for interviewees as follows: being at least 18 years old, having at least one family member in prison, being the primary person in charge of PDL visits, and providing voluntary consent to participate in the study. Since we were looking for a common person's experiences and perceptions, we established the exclusion criteria as being activists or members of community-based organizations led by peer researchers.

Each peer researcher identified potential interviewees within their network of PDL relatives. The candidates received information via WhatsApp, which explained the research objectives and interview characteristics. Once the potential participant accepted the invitation, the interviewees and peer researchers decided on the procedure, timing of the interviews, and whether they would be conducted online or in person.

Four peer researchers conducted 28 interviews between October 2020 and February 2021 (18 online and 10 in person). As shown in [Table 1](#), except for one case (Coahuila), the prisons in which the interviewees' relatives were incarcerated were located in the central region of Mexico, mainly in Mexico City and neighboring states (Estado de Mexico and Morelos). These state prisons are among the most crowded in the country and, together, they represent almost 40% of the total national inmate population (INEGI, 2021; see [Table 1](#)).

Barring these two, all the interviewees resided in Mexico. Most of the participants were women (23 of 28), which is consistent with the literature that explains that the main PDL visitors are women (Pérez Correa, 2015). Their mean age was 40.5 years (range 18–72 years;



**Table 1.** Categories, codes and their frequencies.

Category	Definition	Codes	Freq
Prison	Prison's structural and general aspects and/or actions carried out by prison authorities for COVID-19 control	Perception of the authorities/institution	106
		Prison actions for covid19 control	99
		Perception of the covid19 situation in prison	47
		Evaluation of the prison authorities' actions for COVID-19 control	34
		Legal process	19
		Corruption	16
		Information about COVID-19 within prisons	14
		Punishment at prisons	13
		Inequality at prisons	5
		PDL's experiences during COVID-19	98
		PDL's emotional situation during COVID-19	72
		Legal status	48
		PDL's Sociodemographic characteristics	45
People Deprived of Liberty (PDL)	Daily life, physical, economic, and emotional situations among PDL; actions for COVID-19 control carried out by inmates.	PDL's economic situation during COVID-19	29
		Experience of other PDL with COVID-19	26
		PDL's physical situation during COVID-19	22
		PDL's activities during COVID-19	15
		Self-care actions during COVID-19	11
		PDL's activities prior to COVID-19	10
		PDL's individual actions for COVID-19 control	10
		PDL's Collective actions for COVID-19 control	6
		PDL's information sources on COVID-19	6

*(Continued)*

**Table 1.** (Continued).

Category	Definition	Codes	Freq
Family	Daily life, emotional, physical, economic, and social support of relatives of people deprived of liberty	Family experiences COVID-19	132
		Emotional impact	120
		Visits to the prison before COVID-19	104
		Economic impact	101
		Family perceptions	75
		Communication with PDL	61
		Family posture related to the PDL	56
		Family sociodemographic characteristics	54
		Support networks	36
		Demands to prison authorities	32
		Family actions	31
		Impacts on interpersonal relationships	31
		COVID-19 perception	28
		Visits to the prison during COVID-19	17
		Research expectations	15
Physical impacts	14		
Relatives information regarding COVID-19	6		
Vulnerability to COVID-19	4		

SD = 14.3 years), and most were employed in the informal economy. In terms of their relation to the PDL they visited, the interviewees included seven mothers, eight wives and/or partners, seven sisters, four daughters, and two friends. Five of them mentioned that they had been imprisoned at some point. The PDL visited by the interviewees were mainly men (18 men vs. 10 women), and their mean duration of incarceration was 8.4 years (range 5–18 years; SD = 14.7 years).

Interviewer positionality (being a former PDL and being acknowledged as a PDL activist) and the preexisting relationship between the interviewers and interviewees made the recruitment process smoother. It also allowed us to gather rich narratives about the various challenges faced by families with PDL during the pandemic, their feelings about these challenges, and their coping strategies. Finally, trust between the peer researchers and their interviewees facilitated conversations about the perceived failures of the penitentiary system within the context of the pandemic and the negative consequences of COVID-19 control measures.

### Data analysis

The interviews were transcribed and coded using ATLAS.ti to facilitate data management. Two researchers analyzed the transcriptions using thematic analysis and inter-judge agreement, following the methodology proposed by Strauss and Corbin (1990). The categories were produced using three iterative data-coding and analysis processes. First, we pre-identified broad themes using interview topics, such as daily life, visits, pre-pandemic routines, daily pandemic routines, challenges, and coping strategies. Second, we identified emergent codes and allocated them to the corresponding categories, for example, socioemotional impacts, economic impacts, supplies, and implemented measures. Third, we developed final categories using constant comparisons by gender and jurisdiction, highlighting the commonalities and differences from each interviewee's perspective and based on the literature. This process resulted in three thematic categories including 41 codes (Table 2).

The coding process was validated and refined through peer comparison and discussion of the critical concepts identified in the literature on COVID-19 experiences in prison settings (Andrade et al., 2020; Marmolejo et al., 2020; Raspisarda et al., 2020), the Mexican penitentiary system, and families (Azaola, 2002; Bergman & Azaola, 2007;

**Table 2.** Distribution of the PDL the interviewees visited.

Prisons	
State	Federal
Oriente Men's Preventive Detention Center (n = 10)	Federal Social Readaptation Center No. 16 (women's prison in Morelos, built under the Service Provision Contract scheme) (n = 5)
Santa Martha Acatitla Women's Center for Social Reintegration (n = 5)	Federal Social Readaptation Center No. 1 Altiplano (n = 1)
Norte Men's Preventive Detention Center (n = 4)	No. 10 Nor-Noreste Federal Penitentiary Center (n = 1)
Tlalnepantla de Baz Preventive and Social Rehabilitation Center (n = 1)	
Cuautitlán Preventive and Social Rehabilitation Center (n = 1)	

Prepared by the authors with information obtained from the interviews.

Pérez Correa, 2015). Thus, the coding process was both data-driven and theoretically informed. The category with the largest number of quotes was family (866), followed by people in prison and prison settings (369 each). The codes with the most significant number of quotes were COVID-19 control measures (134), relatives' experiences (132), and emotional impacts (120) (see Table 1). We prepared tables with all the quotes that corresponded to each generated code. Each researcher then selected the narrative they considered most exemplary of the category we were developing. Finally, we used the inter-judge agreement criteria to choose the final passages for inclusion in the manuscript.

## Results

Below, we analyze how a group of family members of PDL experienced the implementation of COVID-19 control measures in Mexico's prisons. We responded to four general questions, (1) are there any differences in implementing COVID-19 control among federal and state prisons and male and female facilities? (2) How do the actions implemented by penitentiary authorities for COVID-19 control disrupt the PDL's lives? (3) How did this disruption in PDL lives within prisons affect their relatives outside prison? (4) How did PDL and their relatives respond to the new challenges imposed by the sanitary crisis?

Diagram 1 shows the categories and codes that guided the analysis and how they relate to each other. The first category was "Prison," which describes prison characteristics and actions carried out by prisons' authorities for COVID-19 control. The findings corresponding to this category and its codes are developed under the subtitle "Uncertainty and lack of compassion. Prisons responses for COVID-19"

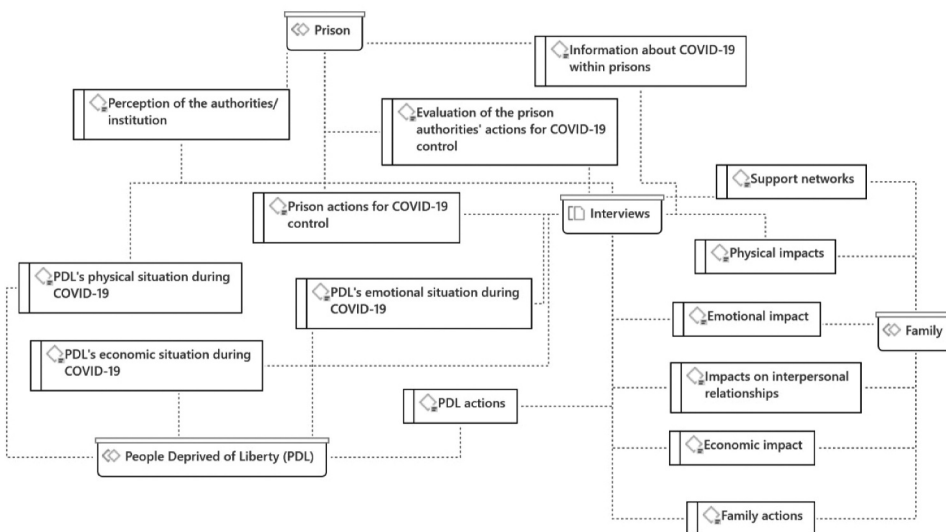


Diagram 1. Analytical relations among codes and categories

The second category was “PDL,” which documents daily life inside prisons during the pandemic from the PDL relatives’ point of view and the strategies implemented by PDL to deal with the challenges imposed by this context. The third category was “family,” which describes the daily life of the relatives of PDL and the actions taken to cope with the pressures generated by the pandemic and by penitentiaries’ responses. Findings corresponding to these two categories and their codes are developed under the subtitles *Consequences of the measures implemented by prisons,* and *Collective responses of PDL and their families to the crisis.* We did not separate the sections as we did in the codification process because we will argue how the realities and collective responses of PDL from those of their family members are deeply linked.

### ***Uncertainty and lack of compassion. Prisons responses to COVID-19***

Independent of the type of prison where PDL were located, the lack of a mechanism to inform families about the health condition of PDL and suspension of the legal process were the most common complaints among the participants.

The information provided by penitentiary authorities was limited to displays of basic information on COVID-19 prevention at the prison’s key locations. The participants reported that there was no information available on the pandemic situation in each prison. Moreover, there were no mechanisms to inform families when PDL were being kept in isolation or transferred to a specialized hospital for treatment of a COVID-19 infection.

Isolation of suspected cases was reported mainly in state prisons and was not accompanied by COVID-19 testing. According to the interviewees, COVID-19 tests were scarce in federal and state prisons, and, when employed, the prison authorities did not communicate the results to PDL or their relatives.

The interviewees commented that most PDL transferred to specialized hospitals died and that the families were often not informed until the authorities delivered the deceased’s remains. Relatives referred that penitentiary authorities show no compassion or empathy for their situation, and they explained this lack of humanity by the generalized stigma and discrimination toward the incarcerated population.

For society, inmates are not humans anymore. They are just criminals . . . Sometimes, it makes me feel like we were less than animals, and that’s why nobody gets upset when an inmate died . . . Is very sad . . . There was this mom, this old lady, that was asking for her son for weeks, and nobody gave her any information. One day, they [penitentiary authorities] called her . . . She went with the hope of finally seeing her son, and the only thing she got was a box with his ashes and nothing else . . . No psychological support, not a warm talk, nothing, just the box and, *órale*, next . . . (Friend, 58, female).

We found significant differences in how federal and state prisons implemented COVID-19 control measures, such as visit limitations and/or suspension of them, restriction of activities outside cells, isolation of PDL and their cell-mates with suspicious symptoms, transfer of ill inmates to hospitals outside the prison system, and display of basic information about COVID-19 in the facilities.

### **COVID-19 control actions in federal prisons**

Face-to-face visits were suspended in federal prisons in March 2020 and replaced by video calls with a maximum length of two hours. However, not all PDL had access to video calls, which were treated as a privilege rather than a fundamental right of PDL and their families. Only those with sentence, a record of good conduct or proof of having participated in social reintegration programs were eligible to receive this “benefit.”

In addition, access to video calls in lieu of visits did not happen automatically but required an overly bureaucratic process. Applications were made to prison authorities, and their resolution could take up to three months (Nava, 2020; Redacción Plana Mayor, 2020). Thus, bureaucracy became a critical obstacle to obtaining video calls for PDL in federal prisons, especially for those whose family members had poor knowledge of the prison system and/or a lack of money to obtain the required documents. In addition, family members had to be physically present at the prison for the video call, which, in most cases, involved traveling substantial distances. In other words, a two-hour video call required a significant investment of time and money.

Interviews with female PDL relatives more frequently featured difficulties obtaining this “benefit” than ones with male PDL relatives. It is also important to consider that, as stated in the literature, women tend to receive less support from their family members (Azaola, 2013; Pérez Correa, 2017), which could result in more difficulty in traveling to prisons to make video calls. The restrictions on communication between PDL and their families resulted in the former feeling more isolated and having less access to information about their legal proceedings. The lack of communication also has a negative impact on family members, especially children.

For access to visitation, the PDL needs their family members to do the paperwork [...] Like putting in a request for a video call visit, but such visits were granted only to those whose paperwork was complete, so the women who had been inside for five or seven years without seeing their children obviously could not avail themselves of this benefit for lack of money ... because there was no one who'd done their paperwork for them. (Friend, 31, female)

In addition to the restrictions on visits and limited access to video calls, the interviewees mentioned facing an increased waiting time when exchanging letters with PDL. Despite greater restrictions on visits and correspondence, telephone call duration and access remained unchanged at 10 minutes every four days.

### **COVID-19 control actions in states prisons**

Unlike federal prisons, most states prisons did not entirely suspend face-to-face visits. Even though there were suspensions in some facilities, they were limited to several months and were eventually permitted again.<sup>4</sup> Nevertheless, access for those aged over 70 and under 18 years was totally restricted in all state prisons at the time when we were writing this report (February 2022). In addition to the existing screening system for supplies entering prisons, new spaces were created to disinfect food and leave items for PDL to collect at prison entrances, as well as areas for hand-washing. Visitors' body temperature was screened, and the use of a face mask was mandatory for the duration of the visit.

Nevertheless, as previously stated, no structural actions have been implemented to decrease the vulnerability of PDL to COVID-19 infections. According to the interviewees, unsanitary conditions in states prisons, lack of access to sufficient food, and poor food quality persisted throughout the pandemic. In particular, the lack of water and frequent power cuts made it difficult to practice the basic hygiene practices required to keep the virus at bay, like, for example, handwashing.

Well, yes, many have fallen sick there, but the truth is that they don't know if it's COVID-19 . . . The way we cure ourselves—putting lemon drops in the nose and eyes and gargling with lemon water when we are down with a cold—I think they will continue to do the same in the absence of medication . . . Because, in reality, there's no doctor available . . . So yes, there were people who fell sick, but no, they weren't isolated as such . . . (Friend, 31, female)

There were salient differences between the measures implemented in state prisons for male and female PDL. Based on the interviewees' accounts, the actions in women's prisons were stricter. For example, only one family member was allowed to visit once a week, conjugal visits were suspended, and women were not allowed to leave their cells. In addition, screens were installed in the visiting area to separate the incarcerated women from their visitors, and physical contact between them was prohibited; that is, they could not touch, hug, or kiss each other.

You arrive hoping to see her . . . you have crossed the city imagining so many things, but then you find out that everything that was allowed during a visit earlier is no longer permitted. You can't touch her because they've put a glass barrier up . . . It's tough, having her in front of you and not being able to touch her, because you know she needs it and you need it too because that hug, that kiss is like an antidote for all the anguish we've lived through . . . but even that was taken away from us in the pandemic. (Partner, 52, female)

In contrast, the interviewees' accounts revealed that male PDL were allowed to stay outside their cells during daylight hours, and they had visits from more than one family member twice a week. There were no restrictions on physical contact between the PDL and their visitors, and conjugal visits were never suspended. Additionally, officials at men's prisons were more open to family members' demands than their counterparts at women's prisons – for example, the family members of male PDL could determine their health status, but those of female PDL could not.

Peer researchers have explained the relatively limited access to penitentiary authorities in female-occupied prisons by the fact that there are comparatively few female inmates per facility, allowing authorities to exert more control in such facilities. According to peer researchers, overcrowding in male-occupied prisons implies a risk of rebellion for prison authorities; therefore, administrators attempt to avoid any possible conflict with male inmates. This risk is perceived to be smaller in women's prisons; hence, officials show less openness to the demands of incarcerated women and their families.

### ***Consequences of the measures implemented by prisons***

From the participants' point of view, the most important consequence of the COVID-19 control measures implemented by the penal system in Mexico was the suspension of legal procedures and the consequent prolonging time in prison. From the interviewees' perspective, the second main consequence of the actions carried out inside prison was

the PDL's isolation and decrease in communication with families. Women were more affected by these consequences than men. The principal women's visitors were their mothers and children, most of them aged above 60 or below 18 years old and due to the stricter confinement measures, as previously described. These two outcomes affected both relatives and PDL's physical and emotional health and aggravated their socio-economic conditions.

### ***Prolonging the incarceration, killing the hope***

All the participants reported the suspension of legal procedures, which implied a delay in the legal process and, in the end, prolonged time in prison. According to the interviewees, delays in the progress of legal processes were caused by the closure of offices, a decrease in the number of judges and legal authorities available,<sup>5</sup> and restrictions on defense attorneys' visits to prisons. All the interviewees reported that this was the most challenging situation to cope with during the pandemic. From their perspective, the suspension of legal proceedings during the pandemic reflected the inefficiency, corruption, and inequity that characterize the Mexican judicial system. These suspensions forced the families of PDL to invest more time and money into moving the processes along.

Well, frankly, there has been no progress since the courts closed . . . I do not remember when exactly. Was it in May [2020], was it? No, earlier, in April . . . All activity was suspended, which worsened the situation . . . Even in normal times, there's an air of uncertainty surrounding legal matters . . . [...] when there has been no progress in the trial . . . So, it's like being in a kind of limbo, not being able to visualise a resolution to your issue [...] . . . let us just say it's a terrible place to be in [...] When they tell you the courts have closed, you find yourself stuck [...], but you cannot abandon hope that it will get resolved, [...] so you tell yourself, 'Well, the process will take another six months or a year . . . ' because you know there's a deadline, more or less. But if suddenly all activity stops, and there is no sign of it going back to normal any time soon [exhales], then it feels like . . . there's no hope. (Wife, 53)

Furthermore, from the interviewees' perspectives, the restrictions on and suspensions of visits by CSO members, lawyers, and human rights defenders aggravated the precarious living conditions in prisons and violations of fundamental rights faced by PDL in Mexico. Additionally, they perceived delays in the legal processes, as they could not receive proper follow-up or counsel on their cases.

[...] It is how we persevere [in the courts], is not it? By asking . . . what is the status of our problem? What is happening during this process? How's it going? It is as if they [the officials] remember only then that they have to work, and then they do so . . . [send] notifications to family members or inmates. Without this pressure, there is no advancement [...] (Mother, 54)

### ***The financial struggles and their impacts on physical and mental health***

The lack of hygiene supplies, medicine, and food increased the pressure on families to compensate for these systemic deficiencies. Moreover, the onset of the COVID-19 pandemic compounded families' financial struggles due to a decrease in their incomes and an increase in the needs of PDL.



Today, people either have enough to eat all week or [...], because it's not easy ... you [have no option but to] say, 'I'll bring you things or money ...' [...] I have had to ask, 'What do you need more, love?' [Because there are multiple things and needs] 'Yes, I have to pay for this ... you tell me whether I should or shouldn't because there are other expenses as well', [...] I have to pay for the phone now; with everybody connected nowadays, it has become essential to have a device to be able to communicate, and it has been very complicated. (Husband, 43)

Since the start of the COVID-19 pandemic, the interviewees mentioned that the living expenses of PDL in state prisons had increased,<sup>6</sup> mainly because of the increase in bribes for entry to the prison's premises, the cost of food and medicine inside, the number of telephone cards that PDL needed, and the amount of supplies they themselves had to bring. Additionally, the reduction in office hours and untimely closure of courts and law firms increased the time required for specific procedures and transportation expenses.

[The expenses incurred on a visit] have increased a lot because [the prices of] everything went up because of the pandemic [...] everything has been difficult because ... You have to bring more things because the [quality of] food is bad ... Actually, there is none ... even the water is sold [inside]. They have a water purifier, and I think they sell water; they sell everything ... They even charge for bathing. Everything costs money inside. (Partner, 52, female)

Third, the suspension of visits and cancellation of labor activities within state and federal prisons lessened the earning opportunities of PDL and significantly reduced the generation and circulation of money inside state prisons, which had previously alleviated some families' financial pressure. The means of earning income in state prisons include begging, carrying bags, offering chairs, acting as waiters, renting blankets, and offering products to visitors (Agoff et al., 2020). Other strategies include exchanging food and supplies or reselling outside goods (Agoff et al., 2020). In addition, some inmates fabricate handicrafts inside prison that their visitors sell on the outside (Agoff et al., 2020). Much of this economy fell apart without visitors, intensifying the dependence of PDL on their families.

The complicated decision to divide limited household income between PDL and the rest of the family led some people, especially those with family members in federal prisons, to suspend prison visits because of a lack of resources to cover the costs. In the case of PDL in state prisons, some family members had to reduce the amount of supplies they took with them to the prison, thus worsening the precarious living conditions and exacerbating the social vulnerability of PDL.

[I have had to] buy essentials [for the PDL] so that he can eat because the amount of food there is not adequate; so, even though I did not want to take supplies to him, I did, a little bit ... from a kilo of eggs earlier to half a kilo now, from a litre of oil earlier to half a litre now ... and other items like that, to supplement the food provided inside so that he could eat properly. (Wife, 38)

Some of the participants reported having increased their working hours to compensate for the decrease in income. However, more time spent working meant less time for prison visits or legal proceedings. Without going to court to exert pressure, many relatives of PDL perceived that their cases were stuck or forgotten because, in the absence of money and/or private legal advice, showing up in person is seen as the most effective strategy to advance legal proceedings.

Thus, the responsibilities assumed by the family members of PDL took a heavy toll on their physical and mental health, as shown in previous studies (Connors et al., 2020; Pérez Correa, 2015). Based on the interviewees' accounts, the uncertainty and helplessness triggered by COVID-19, the extra difficulties in visiting PDL, the lack of information about their health situation, and the decrease in household income worsened family members' physical and mental health. For example, interviewees reported recurring symptoms, such as chronic fatigue, insomnia, headaches, and general body aches.

Well, the truth is that I felt pretty sad in that period when I was notified that he had the virus . . . because I knew he did not have a doctor or anyone to take care of him inside, not to mention the many people dying all around. So, obviously, there was the worry that something might happen to him inside . . . when I didn't hear anything from him during those two months, I was very anxious, stressed, desperate . . . I couldn't sleep, thinking that I wasn't going to see him again [emphasises this part], or that, at any moment, they would get in touch with me and say, 'He's dead.' (Sister, 54)

In particular, interviewees with family members in federal prisons reported suffering insomnia and feeling of helplessness more frequently than relatives of PDL in states prisons. Likewise, the stricter mobility restrictions inside federal prisons meant that PDL spent most of their time inside their cells, which, together with the increased isolation and less access to information, had a significant negative impact on their mental health.

Gosh [expression of concern]! [It] was so desolate (. . .), so desolate . . . when we talk by phone or during the video calls I could tell he was sad [emphasizes by lengthening the word]; he was in utter distress, not having any activity all daylong, just be in there, locked, and his mind spinning around not knowing how their family members were. (Mother, 53)

Despite their discomfort and ailments, the interviewees stated that they could not afford to stop working or fall sick themselves, as loved ones on both the inside and outside were dependent on them financially and emotionally. Getting sick meant not only losing out on income but also having to suspend visits, thus "abandoning" PDL. In this scenario, the fear of contracting COVID-19 threatened their fragile living conditions.

And the truth is that your emotions too can make you sick, is not it? Because you are so afraid of catching it, you are plagued by terrible fear . . . every day, I would wake up and smell the coffee, and whatever else I could to determine whether I really was fine . . . basically, it was causing me psychological damage, but I am my son's only visitor; so, if I fall sick, there will be no one to visit or take care of him. This is also why I wanted to avoid falling ill. (Mother, 53)

### ***Collective responses of PDL and their families to the crisis***

In such a precarious situation, social support became essential. We found two principal sources of social support among the interviewees: the extended family and other people with relatives incarcerated. However, eight out of the 28 interviewees reported not having any help and handling the economic costs and emotional pressures involved in having a family member in prison during the pandemic on their own. Based on the interviewees' accounts, the PDL in federal prisons and their family members could rely less on family and social support networks and therefore experienced more significant economic and emotional stress. According to the interviewees, the reasons were twofold:

federal prisons are more expensive than state ones, and families face more stigma and discrimination because of the type of offenses that the PDL incarcerated in them are accused of.

All of us who deal with a relative in prison try not to talk about it because we know what people think of people in prison . . . They think they are bad and, by extension, that the entire family is. However, this is even worse for people in federal prisons because the crimes are severe, like kidnapping and extortion. So, one is much more isolated . . . With a lot of fear that people will find out and you will get into more trouble. For the same reason, you become more distrustful, and then you isolate yourself, and there is no one to count on because you know that if you tell someone about your problems, instead of helping you, they will gossip about you or end their friendship with you. (Friend, 31, female)

The lack of information from prison authorities pushed PDL and their families to strengthen communication with other PDL in the same cells and with their family members. For example, the panic generated in states prisons by the uninformed deaths of PDL who were isolated and then transferred to specialized hospitals mobilized PDL to collectively to keep quiet and/or hide their symptoms from prison authorities to avoid isolation and/or transfer to outside hospitals. Since isolation was implemented for all PDL sharing a cell, the concealment of possible symptoms was performed collectively.

When they [the authorities] started isolating and sending the infected PDL to hospitals, and the others realized that these patients didn't return, the inmates "stopped" falling sick [laughs] They understood they couldn't get sick, so they started to cover for those with symptoms and tried to treat them with teas and herbs that relatives brought during visits. (Mother, 53)

The PDL were also collectively involved in actions related to the prevention and/or treatment of potential COVID-19 cases, such as, for example, strategically increasing the time allocated for cleaning, the amount of cleaning products and disinfectants used, and the distribution of medicine and food to symptomatic or vulnerable cell-mates.

Families supported this mobilization by independently looking for immune-boosting products to try and prevent the transmission of the virus and/or strengthen PDL' immune defenses. Based on their research, they then had to identify which products they could afford, which were allowed in prisons, and, if prohibited, how to bring these products into prison anyway.

Thus, in the absence of formally provided medical care, the PDL in state prisons resorted to informal practices and collective responses based on popular knowledge of healthcare processes (Menéndez, 2018). For example, to prevent COVID-19 infection, PDL relied on the consumption of lemon and ginger teas, vegetables, and fruit brought or sent by family members. At times, the relatives of PDL sharing a cell organized themselves to bring the necessary supplies to help improve the health of all who shared the space.

In states prisons, visits were used as an opportunity to find out about the situation not only of the PDL being visited, but also of other PDLs. The information was later exchanged through WhatsApp groups.

When my son fell sick . . . [he] already knew from everything I'd told him, and he'd read that if proper care wasn't taken, it would get worse. So those in his cell gave their family members' phone numbers to each other. So, when my son was sick, his companions kept me informed—if his temperature had dropped, how he was . . . Basically, they gave each other food and tea, took care of each other . . . (Mother, 53)

The family members of the PDL in federal prisons also strengthened their communication through WhatsApp groups, which (1) gave them access to specific news from inside the prisons where their PDL were located, (2) allowed them to send information to their PDL, and (3) helped them support each other. However, the complete suspension of visits, coupled with the fact that food and/or medicine were not allowed to be brought from outside the prison, negatively affected both family members and PDL.

The contradiction between the limited access to food and medicine inside state prisons and the restrictions on visits led family members to mobilize in an organized manner to petition Mexico City's prison authorities to modify the rules for visits, criteria for the supplies allowed to be brought, and, in particular, the provision of information on the health status of PDL.

As a result of a demonstration that was conducted outside the prison . . . (...) the prison director [name of the person] tried to give us [access] . . . To be able to see them [PDL], talk to them when they were in quarantine to determine that they were well [emphasis on 'well']. Yes, they gave us that option . . . when they left the area of . . . Let us say there were three areas; when they went to the third one, we could enter to visit them. They gave us an extra day to see them and even allowed us to bring all kinds of food . . . Some types of fruit are usually not allowed, but they allowed us to carry them inside. Now, all that has changed again; they went back to this [the old rules] because it was mentioned that there was a resurgence [in COVID-19 cases] . . . So, they reverted [to the old regulations] . . . for greater precautions. (Friend, 58, female)

We found no similar patterns of openness or accommodation of family members' demands among the federal penitentiary authorities. On the one hand, the geographical isolation of many federal prisons and long distances from PDL families' places of residence was an obstacle; on the other hand, the lack of channels for communication with prison authorities made it more difficult to push for any change or adjustment in the penitentiaries' protocols.

Mobilization to demand better access to supplies and vital services inside women's prisons was also limited. For example, one of the main concerns voiced in interviews with the relatives of women in prison (state or federal) was the fear of being transferred because of complaints and/or the need to mobilize others to protest the challenging conditions in prison during the pandemic. Consequently, the relatives of the incarcerated women and the women themselves were forced to treat the prison authorities with deference because they perceived that any sign of insubordination could result in immediate transfer to another part of the country. Being transferred would mean confronting an unknown prison environment and further complicating the provision of visits and supplies from the outside. No family member of a man incarcerated in a federal or state facility expressed this concern.

Transfer was the greatest fear. This is why silence regarding what happens in federal prisons is so prevalent because you do not want to be identified as an activist there, less so in pandemic times. If they [prison authorities] think you are mobilising your comrades, they transfer you, and nobody wants that because it means more isolation and suffering for your family members. So, the women prefer to put up with it, keep quiet, and wait for it to pass. (Friend, 31, female)

In this context, families must strike a balance between seeking the authorities' cooperation so they can keep abreast of their family member's condition and not demanding "too much" so that they do not, in their words, "anger the authorities."

It is not the case that those women are more docile or fearful. It's just that they're fewer in number, so it's easier to identify the one who's nagging or the one whose family members are complaining all the time, and you don't want that. You do not want your family member inside to be marked because of you, because of your complaints . . . that's the helplessness we feel, because I am outside and they cannot do anything to me, but she's inside, and they can do whatever they want to her . . . So, this is what you are weighing the whole time: How do I approach the director? Do I complain about something or do I put up with it? What is more convenient? [. . .] so that you do not end up on their bad side. (Mother, 53)

According to the interviewees, two factors contributed to the authorities having greater control of women in prisons. First, the relatively low number of women incarcerated in federal prisons makes it easier for penitentiary authorities to control them. Second, the roles of mother and caregiver push women to stifle their complaints with the prison authorities and their relatives.

I think the guards are not as abusive in male prisons as they are in women's prisons because they know they can get into trouble. Instead, the inmates in women's prisons are intimidated more. For almost anything, they [the guards] put them in punishment cells, they hit them, and nobody wants to spend 15 days in the punishment cell and lose the chance to see their children or family . . . So, it makes them more freighted . . . Also, they don't want their relatives to suffer knowing the things they have to bear, so they decide to remain silent about all those things and do not tell anyone what they are going through. (Peer researcher, 31, female)

## Conclusions

This study reports how a group of family members of PDL experienced the COVID-19 control measures implemented in Mexico's prisons. We can conclude that Mexico's responses to COVID-19 control in prison settings are the typical response found in Latin American countries, characterized by its punitive approach (Bergman et al., 2020; Marmolejo et al., 2020; Pitts & Inkpen, 2020; Rapisarda et al., 2020a, 2020b; Ribeiro & Diniz, 2020). The actions adopted by Mexican penitentiary systems focused on circumscribing visits and confining inmates' to their cells, even though 46.5% of Mexican inmates share their cells with more than five people (INEGI, 2021). Moreover, like in Brazil (Ribeiro & Diniz, 2020), there was no consideration of how to protect inmates' mental health or human rights, and the actions implemented to facilitate inmates' communication with their families were minimal. These omissions and deficiencies augmented the vulnerabilities faced by PDL and their families during the pandemic.

Consistent with prior studies, our findings suggest that total suspension of family visits significantly contribute to the increase in the odds of psychic illnesses (Alcântara et al., 2018), worsen the preexisting diseases (Lermen et al., 2015), and contribute to the increase of deaths due to COVID-19 (Siqueira et al., 2020).

Our findings also describe how the implementation of COVID-19 control measures was stricter in federal prisons than in states prisons and women's states prisons than in men's, worsening their precarious living conditions. These differences highlight the the androcentric and discriminatory character of the Mexican Prison System (Azaola, 2006; Azaola & Yacamán, 1996; Esteban, 2018), The pandemic has aggravated these features. For example,

female PDL were more isolated than their male counterparts due to the stricter implementation of control measures in women's prisons and limited access to visitors under the new rules.

The symbolic violence – in the form of barring female PDL from having physical contact with loved ones and greatly restricting their movement inside as well as outside visits during the COVID-19 pandemic – is an indication of the fact that society exerts greater control over their bodies, space, and time. The highlighted gender differences underscore the urgency of incorporating a gender-based perspective into the administration of justice in Mexico to advance the principles of equality and nondiscrimination.

The harsher restrictions implemented in females' jails did not imply a reduced prevalence of COVID-19; rather, on the contrary, the data showed that women had a higher prevalence of COVID-19 infection than men (INEGI, 2021). This relatively high prevalence could be a consequence of having less access to basic amenities, such as running water and electricity, during the pandemic. In addition, restrictions on visits lowered their access to food, medicine, and basic sanitary supplies. Further research is needed to better understand the factors that increase women's vulnerability to COVID-19 infection within prisons, despite experiencing stricter confinement than men.

It is important to mention the pandemic-triggered separation of PDL from their under-age children, as well as from elderly relatives. These separations have not only resulted in physical and mental health problems for both groups (Ribeiro & Diniz, 2020) but have also violated their human rights. PDL have the constitutional right to remain in contact with their families and their children have the right to remain in touch with their parents (Pérez Correa, 2014).

However, the technocratic way in which the COVID-19 control measures were implemented in Mexico's prisons did not consider protecting these fundamental rights. No steps were taken to preserve family ties during the pandemic. For example, the implementation of video calls was limited and considered a privilege rather than a right. Similar to prisons in Brazil (Ribeiro & Diniz, 2020), Mexican prison authorities have provided no alternative means of telephone communication to families. Thus, only those with the money to obtain expensive telephone cards could communicate reliably with their families.

Consistent with other studies, our findings show the impossibility of separating the realities of PDL from those of their family members – prison directly, profoundly, and permanently affects not only the alleged offenders but their entire households (Azaola, 2002; Pérez Correa, 2013). The interviewees' accounts illustrate how the experiences of PDL echo those of their family members and vice versa – that is, they reflect how the family members' difficulties affect PDL.

In socioeconomic terms, the reduction in income due to the confinement stemming from COVID-19 created a negative feedback loop between PDL and their family members, which increased their social vulnerability. Restrictions on visits significantly reduced income generation opportunities and the circulation of money inside state prisons (Agoff et al., 2020); thus, families were under more pressure than before to provide supplies and money. However, the loss of jobs and/or decrease in income in general, reported by all the interviewees, created greater obstacles to visiting PDL, as family members did not have

the time or money to meet the needs of their incarcerated loved ones. In such circumstances, some of the interviewees had to go into debt, sell their possessions, and/or drastically reduce other expenses.

In this regard, we can hypothesize that if the poorest populations have been the most negatively economically affected by the pandemic (Consejo Nacional de Evaluación de la Política de Desarrollo Social [CONEVAL], 2020a, 2020b), poor households with family members in prison have been hit even harder. Therefore, it is not only necessary to document and analyze the socioeconomic effects of the pandemic on this population but also to design social reintegration policies responding to the new realities which the families of PDL face and to improve the conditions of PDL in both federal and state prisons.

It is the responsibility of the state to guarantee the health and well-being of PDL and provide the necessary supplies and services for them to survive in prison. Nevertheless, the protocols for COVID-19 do not guarantee the provision of essential supplies for virus control and prevention (Calzada et al., 2021). Our findings show that in Mexico like in other Latin American countries, the families of PDL provide the required supplies (Andrade et al., 2020). In this sense, we contend that the COVID-19 pandemic has not been as lethal as it could have been in Mexican prisons due to the commitment of the families of PDL rather than the confinement measures implemented by the state.

Families' crucial role in offsetting the deteriorating living conditions inside the prison system is not exclusive to Mexico. Rather, it is a characteristic shared by other countries in the region, such as Argentina, Brazil, Colombia, Ecuador, El Salvador, and Venezuela (Andrade et al., 2020; Marmolejo et al., 2020; Rapisarda et al., 2020b). The pandemic aggravated the heavy burden that penitentiary systems imposed on the families of PDL in the Global South. However, this care work is invisible, overexposing caregivers to poor health conditions, poverty, stigmatization, and social marginalization (Pérez Correa, 2015). There are no public policies that mitigate the effects of this system on these families. Therefore, it is essential to design specific programs that strengthen the capacity for action, cooperation, and mobilization of the relatives of PDL, acknowledging the crucial role they play in the social reintegration and care of PDL in the Global South.

Our data show that, in line with previous studies in the region (Rapisarda et al., 2020a), the punitive approach to containing the virus in prison settings has been ineffective, as prisons are not equipped to combat the virus once it infiltrates them. Moreover, given the extensive lockdowns implemented in women's prisons and the high prevalence of COVID-19 among female inmates, it is reasonable to state that, as in the United States, the staff appeared to be the source of COVID-19 outbreaks in prison settings (Rapisarda et al., 2020a).

Further research to better understand how COVID-19 affected the living conditions of PDL and their families in Mexico and Latin America must include assessments of gender differences and the differential impact of COVID-19 control measures on incarcerated men and women. In addition, there is limited information about the consequences of confinement actions on the mental health of PDL and their relatives. Additionally, the literature on the effect of the COVID-19 pandemic on penitentiary staff is scarce. For

example, it is crucial to evaluate how the lack of COVID-19 control measures for penitentiary staff may have been associated with viral outbreaks in the context of heavy prisoner confinement.

Our analysis of how the family members of PDL experienced the COVID-19 pandemic highlights the profound crisis of the Mexican prison system and the urgency of enacting health-oriented penal reforms in the Global South which prioritize human rights and social reintegration over punitivism.

## Limitations

Our study is subject to the standard limitations of qualitative methods, mainly the selection bias and positionality of the interviewers (women who had been in prison and who were activists for the rights of PDL). For example, women talked more extensively about the socioemotional impact of the pandemic, while men emphasized its socioeconomic effects. We do not intend to generalize the findings presented here. Instead, we recognize that the realities faced by PDL and their relatives in other prison facilities could be different from those we found in the interviews we conducted. We also acknowledge that most of the participants were women, which may have resulted in biased findings regarding women's vital roles in the functioning of Mexican prisons. Moreover, we realize that the information collected focuses on relatives' points of view regarding the experiences of PDL in prison during the pandemic. As such, the data may not accurately reflect prison life.

Nevertheless, given the lack of information about the hardships and new challenges imposed on the relatives of PDL by the COVID-19 pandemic, these findings could provide critical insights for a health-informed approach to the penal reform of Mexico's prisons. Moreover, although there are already publications that describe the COVID-19 control measures implemented by Mexican penitentiary authorities, there is no information about how the protocols were perceived or how they affected the living conditions of PDL and their families.

## Notes

1. The admission of people without convictions to prisons through a penal action called "preventive prison", or pre-trial detention, has been happening since 2008 with the aim of enhancing the efficiency of the judicial system by requiring the immediate incarceration of people accused of serious crimes, such as homicides and organized crime. A 2019 reform of the penal code added another group of felonies, such as robbery, sexual violence, and corruption, among others, to qualify for pre-trial detention, resulting in an increased number of people being incarcerated without having been sentenced (Gandaria, 2021). Between 2020 and 2021, the primary offenses that led to pre-trial detention were robbery and, in smaller proportions, drug-related crimes, homicide, family violence, and sexual assaults. When disaggregated by gender, drug-related offenses are the leading crime for which women receive pre-trial detentions, whereas men mostly receive pre-trial detention for sexual assaults, domestic violence, and homicides (Ortega et al., n.d.).
2. Resolution 2020-12-17.
3. One of them works in Mexico City Feminine Jail; another works in two male-occupied Mexico City jails; and a third works with the relatives of PDL incarcerated in various state prisons throughout the country.



4. In six out of 32 states prison systems, visits were suspended from April to October 2020; in four local systems, visits were suspended for at least five months; four local systems let each jail decide when to suspend visits and when to allow them again. Five systems, including that of Mexico City, did not suspend visits entirely but reduced the number of visits allowed (Calzada et al., 2021).
5. Even though judicial activities were considered essential during the pandemic (Ortega et al., n. d.).
6. For example, some of the interviewees reported that before the pandemic they spent an average of 1,500 Mexican pesos (US \$73.42) every two weeks per visit, while, during the pandemic, they spent 1,000 Mexican pesos (US \$48.95) per week.

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