disparities in the rates of infectious diseases (such as HIV) and chronic diseases (such as cardiovascular disease) have also been exacerbated by mass incarceration.²³⁹ Even when controlling for factors like poverty, healthcare access, and more, researchers have found associations between high incarceration rates and high rates of poor health, disease, and disease leading to death in the community at the county level,²⁴⁰ and associations between high incarceration rates and high rates of mental health problems in the community at the state level.²⁴¹ Mass incarceration has changed how resources are allocated across the U.S.. People incarcerated in state prisons are classified as residents of their correctional facility rather than their pre-incarceration residence; since prisons are commonly located in rural areas, census counts overestimate the functional residency of rural, majority white areas at the expense of urban areas that are made up of majority Black, Indigenous, and communities of color. This deprives Black, Indigenous, and communities of color of federal money and political representation to which they would otherwise be entitled.²⁴² Finally, mass incarceration interrupts a community's "collective efficacy" and social capital by disrupting social connections, removing resources, disengaging residents from the political system, and concentrating social and economic disadvantage.²⁴³

V. Recommendations

The Washington State Legislature should, consistent with RCW 72.09.495, RCW 74.04.800, RCW 43.216.060, and RCW 43.63A.068, receive data from DOC, the DCYF, Department of Early Learning, Office of Superintendent of Public Instruction, and

²⁴² Acker *et al., supra* note 141.

²³⁹ Joëlla W. Adams et al., *Potential Drivers of HIV Acquisition in African-American Women Related to Mass Incarceration: An Agent-Based Modelling Study*, 18 BMC PUB. HEALTH 1387 (2018); Wildeman, Goldman, and Lee, *supra* note 239.

²⁴⁰ Robert R. Weidner & Jennifer Schultz, *Examining the Relationship Between U.S. Incarceration Rates and Population Health at the County Level*, 9 SSM - POPULATION HEALTH 100466 (2019).

²⁴¹ Edgemon, *supra* note 150.

²⁴³ Gipsy Escobar & Sema Taheri, *Incarceration Weakens a Community's Immune System: Mass Incarceration and COVID-19 Cases in Milwaukee*, PRISON POL. INITIATIVE (June 2, 2020),

https://www.prisonpolicy.org/scans/measuresforjustice/Incarceration_Weakens_Community_Immune_System_Pr eliminary_Results.pdf.

Department of Commerce on how many children in Washington are impacted by parental or primary caregiver's incarceration, as well as data on available programs and resources to support the specific needs of the children of incarcerated parents, so that Washington has a comprehensive understanding of the needs, available support, and identified gaps in data collection and services.

- The Washington State Legislature may want to consider ways to equitably increase access to and eligibility for Parenting Sentencing Alternatives to prison confinement, so more parents can serve more of their sentences in the community with their children. Specific consideration should be given to any racial, ethnic, or gender disparities within the existing Family and Offender Sentencing Alternative (FOSA) and the Community Parenting Alternative (CPA) programs.
- Stakeholders, in consultation with experts on child psychology and on parent-child visitation in incarceration settings, should convene county jail leadership across Washington State to develop guidance on meaningful in-person visitation for parents and children in those settings.
- Stakeholders should study the causes of, and offer solutions for, the lengthy delays in establishing consistent phone calls and visits between dependency-involved parents serving DOC sentences and their children, so these families can maintain continuous, uninterrupted contact, even if parents are transferred to different facilities.
- Stakeholders should study ways to make it less expensive for incarcerated individuals to maintain contact with their families and support systems. Specifically, consider ways to: reduce or eliminate the cost of emails; reduce or eliminate the cost of video conferences; and, reduce or eliminate the cost of phone calls.
- To provide incarcerated parents with meaningful court access, stakeholders should determine: (1) whether to increase the response deadline beyond 20 days for incarcerated parents in family law matters, and (2) how to ensure that these parents can access mandatory family law forms and legal information.

- The Washington State Legislature, donors, and other funders should consider allocating funding to indigent incarcerated parents for access to legal services, including representation in their family law matters involving minor children.
- Incarcerated parents who are ordered into treatment by dependency and family law courts should have access to such treatment while incarcerated. DOC should update its eligibility requirements for such treatment services to prioritize participation by these parents within a timeline that allows them to comply with such civil court orders relating to their children. DOC should also tell the court when a parent's failure to participate in ordered treatment is due to lack of DOC resources, rather than the parent's unwillingness to comply.
- Judicial officers should be trained on the social and emotional needs of children of incarcerated parents. This would equip judicial officers hearing dependency and family law cases to craft visitation orders consistent with best practices for facilitating the resilience of children of incarcerated parents.