



The association between substance use and physical victimization among incarcerated men in Spanish prisons[☆]



Francisco Caravaca Sánchez^{a,*}, Nancy Wolff^b

^a Department of Criminology, Universidad Católica San Antonio de Murcia, Avenue of Jerónimos, Guadalupe, 30107 Murcia, Spain

^b Bloustein Center for Survey Research, Rutgers, The State University of New Jersey, 33 Livingston Avenue, Office 273, United States

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ABSTRACT

Physical victimization and substance use are common behaviors inside prisons. Yet little is known about whether there is an association between substance use and physical victimization among male inmates. We examined the absolute and relative association between substance use (prior to, during, and both prior to and during incarceration) and physical victimization while incarcerated. For this study, 2484 men (mean age of 36.3 years; $SD = 11.1$) were sampled from eight prisons located in Spain. Information was collected using self-report questionnaires probing experiences of physical victimization while incarcerated and substance use prior to prison and during the past six months in prison. We found that the rates and likelihood of physical victimization were greater for male inmates who used substances at any time, compared to non-consumers of substances but were highest for male inmates who used exclusively in prison or both prior to and in prison. These findings suggest the need for immediate prevention steps including comprehensive screening and segregation practices; better drug interdiction practices; and more evidence-based substance abuse treatment with and without integrated trauma treatment to ensure public health and safety.

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1. Introduction

A wealth of research shows an association between delinquency and substance use (defined to include alcohol or drugs) (Coulton et al., 2012; Elliott, Huizinga, & Menard, 2012; Henry, Knight, & Thornberry, 2012; Macleod et al., 2004; Newbury-Birch et al., 2016; Simpson & Miller, 2002). According to the European Monitoring Centre for Drugs and Drugs Addiction (EMCDDA, 2012), approximately one third to one half of persons entering prisons located in European countries used legal (illegally) or illegal drugs prior to entering prison. Other prison-based research estimate that between 30% and 70% of incarcerated people used substances including alcohol in the six or 12 months prior to incarceration (Fazel, Bains, & Doll, 2006; Karberg & James, 2005; Rowell, Wu, Hart, Haile, & El-Bassel, 2012). For incarcerated samples, prevalence rates of prior substance use vary across countries in part because of varying research methodologies and in part because of natural differences in substance use habits among people residing in these countries (Fazel et al., 2006). While cross-country variation in substance use is noteworthy, most significant is their commonality: substance use

prior to entering prison is customary among incarcerated people independent of the country where the prison is located.

Conventional wisdom has it that substance use ceases while the person is incarcerated. Despite the fact that departments of corrections profess a policy of “zero tolerance” for drugs and alcohol, substance use inside prison does not even approach zero. Indeed, imprisonment may not interrupt or even lessen substance use. Prison-based studies in the United States estimate that approximately 30% to 60% of incarcerated persons use substances while incarcerated (Harrison & Beck, 2006; Mumola & Karberg, 2006; Rowell et al., 2012). These studies report regular use of two or more substances, with cannabis and cocaine being the most frequently reported substances used inside prisons. Similar rates of substance use among incarcerated samples have been reported for Canada (Hopley & Brunelle, 2016), England and Wales (Brooke, Taylor, Gunn, & Maden, 2000; Singleton, Farrel & Meltzer, 2003), Mexico (Matthews, 2011; Nevarez-Sida, Constantino-Casas, & Castro-Ríos, 2012), Sweden (Ritter, Broers, & Elger, 2013) and Iran (Zamani et al., 2010).

In a study of 15 European countries, over half of inmates reported using some type of substance while incarcerated (EMCDDA, 2012). Cannabis was the most common substance used inside European prisons. In Spain, according to the Ministry of Health, during a 12 month period, approximately 9% of adults in the general population used cannabis, with about 2% using cocaine. In comparison, cannabis and cocaine use among the Spanish prison population were estimated at 42% and 27%, respectively, during the past 12 months in prison (ESDIP, 2012).

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* Corresponding author.

E-mail address: f.caravacasanchez@gmail.com (F.C. Sánchez).

1.1. Prevalence and patterns of physical victimization among prison population

The risk of physical victimization is higher in prison than in the community. Based on community samples, rates of physical violence in the community equal 3.7% in Europe (Del Frate & van Kesteren, 2004), 3.8% in the United States (Langton, Planty, & Truman, 2013), and 2.7% in Spain (España, Ripollés, Jiménez, Jiménez, & Domínguez, 2010). By contrast, 15% to 40% of incarcerated people experience physical violence over a six- to 12-month time period (Teasdale, Daigle, Hawk, & Daquin, 2015; Wolff, Blitz, Shi, Siegel, & Bachman, 2007; Wooldredge & Steiner, 2012; Wooldredge & Steiner, 2013). Rates varying from 9% to 39% have been estimated for prison populations in Europe (Caravaca-Sánchez, Martínez, Osuna, Romero, & Luna, 2015; Caravaca-Sánchez & Wolff, 2016), Africa (Lindegard & Gear, 2014), and Asia (Kuo, Cuvelier, & Huang, 2014).

Researchers in the United States have closely examined the levels and types of victimization in US prisons. Wolff et al. (2007), based on self-report data from approximately 7000 male inmates residing in 14 prisons in New Jersey, estimated that 20.7% of male inmates were victims of physical violence (e.g., slapping, hitting, kicking) perpetrated by other inmates and 25.2% reported similar violence against them by staff during a six-month period of incarceration. Using a sample of 1181 inmates in Taiwanese prisons, Kuo et al. (2014) found that self-reported physical victimization rates vary by perpetrator type. In this study, staff-on-inmate physical victimization was higher than inmate-on-inmate victimization (9.2% and 8.3%, respectively). More recently, Teasdale et al. (2015), based on a sample of approximately 17,500 inmates, found that approximately 13.2% of incarcerated men reported being physically harmed while incarcerated. The wide variation in rates of physical victimization reflects in part the diversity of study methodologies in terms of the specificity and definition of physical victimization, the definition of perpetrator, clustering of behaviors, and data collection instrument (Wolff, Shi, & Bachman, 2008).

A number of studies have examined factors that predict physical victimization among incarcerated samples. Demographic and criminal risk factors found to increase the likelihood of physical victimization during incarceration include: younger age, single status, higher education level, previously victimized, having privileges during incarceration (e.g. visitations), no work assignment in prison, violent offenses, and multiple incarcerations (Balieri, 2014; Steiner, Ellison, Butler, & Cain, 2015; Steiner & Wooldredge, 2009; Teasdale et al., 2015; Wolff, Shi, & Siegel, 2009; Wooldredge & Steiner, 2013).

1.2. Association between physical victimization and substance use

Recent studies show that rates of substance use among persons who have experienced physical victimization are higher than those found in the general population who has not experienced physical victimization (Begle et al., 2011; Litwiller & Brausch, 2013; Reyes, Foshee, Tharp, Ennett, & Bauer, 2015; Testa & Derrick, 2014). In a review conducted by Simpson and Miller (2002), among a total of 224 studies (conducted from 1980 through 1998), persons with substance use problems were found to have elevated rates of physical victimization histories during childhood and adulthood. However, because the association between substance use and physical victimization was only correlational, it is not possible to determinate the nature of the relationship (Simpson & Miller, 2002).

Among incarcerated samples, the literature on the association between substance use and physical victimization is limited. Four recent studies report a positive correlation between prior substance use and physical victimization during incarceration for male inmates (Mejía, Zea, Romero, & Saldívar, 2015; Pare & Logan, 2011; Teasdale et al., 2015; Wolff & Shi, 2009). According to the research conducted by Pare and Logan (2011) based on survey data from approximately 18,000 inmates, substance use (including alcohol use) is associated with greater risks of victimization during incarceration. These findings are consistent

with the research conducted by Teasdale et al. (2015) where alcohol and drug use significantly increased the odds of violent victimization while incarcerated.

Several explanations have been posited for the association between substance use and physical victimization. The first is that substance use impairs judgment and impulse control, increasing the likelihood of people, while under the influence, starting an altercation that they are incapable of winning in part because their response time is impaired by drugs or alcohol. Another explanation is that people under the influence are more vulnerable to external attacks because substances impair judgment and protective reactions. It is also possible that people with substance use problems are more likely to break social rules (e.g., steal from other inmates) or laws to support their habits and, by doing so, may be punished by rule/law enforcers (e.g., in prison, receive a “beat down”). Another possible explanation is that physical victimization or substance use is associated with another attribute: mental illness, which may also increase vulnerability to attack in part because of the side effects of psychotropic drugs or in part because of hostility directed at those who do not comply in “normal” ways to the social customs of prison or the community (Mejía et al., 2015; Norman et al., 2012; Springer, Sheridan, Kuo, & Carnes, 2007; Wilson, 2010).

1.3. The current study

Most of the research on prison trauma has been conducted in the United States (Teasdale et al., 2015; Wilson, 2010; Wolff et al., 2009; Wooldredge & Steiner, 2012). It is unclear whether these findings on levels of physical victimization and predictive risk factors generalize to European prisons. Even these studies, however, have not explored the association between prior or current substance uses on the likelihood of physical victimization while incarcerated. Our study adds to the literature on physical victimization by estimating victimization rates for male inmates in Spanish prisons and exploring the association between prior and current (while incarcerated) substance use and physical victimization. Our research questions are:

1. Is there a differential association between physical victimization during incarceration and substance use prior to incarceration, during incarceration, and both prior to and during incarceration?
2. What is the association between types of substances used and physical victimization during incarceration?

2. Method

2.1. Spanish prison system

The Spanish prison system holds approximately 58,500 in 68 adult prisons (National Statistics Institute NTI, 2015). The prison population is predominately composed of men (92%) sentenced to prison for criminal offenses (87%) (the remainder are there on remand or administrative hold) (National Statistics Institute NTI, 2015). Among incarcerated men, property offenses are the single most common type of offense (approximately 36%). In contrast to other countries (e.g., in the United States, the majority of incarcerated people are held in state-controlled and operated prisons), Spanish prisons are centralized (under the Spanish Prison System—not under provincial or state control) and there are no private prisons.

2.2. Study design

From January through August 2014, we administered a closed-ended survey to 2484 of the 4718 male inmates (aged 18 years and older) in eight correctional facilities in Spain. The sample was recruited from eight prisons located in seven different cities and four provinces of the country (Murcia, Andalucía, Valencia and Castilla la Mancha) situated in

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