



Doing your own time: Peer integration, aggression and mental health in Dutch male detainment facilities



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ARTICLE INFO

Article history:

Received 6 May 2015

Received in revised form

26 December 2015

Accepted 4 January 2016

Available online 6 January 2016

Keywords:

Social integration

Prison

Mental health

Social networks

ABSTRACT

Background: Prior research demonstrates a strong positive association between social integration (e.g., strong social ties) and individual health. However, researchers also emphasize that this correlation may vary by context and potentially reverse direction under certain conditions. In this study, we draw on competing criminological theories of peer relations to examine if social integration, measured by trust in peers, is positively or negatively associated with violence and mental health of men detained in pre-trial confinement facilities.

Methods: We test our hypotheses with peer network and health data from 467 Dutch male pre-trial detainees.

Results: Results suggest that peer trust has no direct association with reported rates of peer aggression while detained and low peer trust is generally protective for mental health.

Conclusions: Our study adds to a small body of literature finding that social integration within certain correctional settings may not operate in the same way that it does in the general population and may actually contribute to adverse mental health outcomes.

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A long line of research has demonstrated that weak social ties are associated with poor mental and physical health. Harking back to Durkheim's (1897/1951) classic work on social integration and suicide, social epidemiology studies (e.g., the Alameda County Study, Tecumseh Community Health Study, and Evans County Study) have found that low social involvement increases the risk of early mortality (see Umberson et al., 2010; for a review). More recent research has continued to find strong associations between fewer or poor-quality social ties and a host of negative health outcomes, including cardiovascular disease, depression, high blood pressure, functional mobility, and poor immune response (Crittenden et al., 2014; Perissinotto et al., 2012; Uchino, 2006). It is clear from this and related work that, on average, low social integration is detrimental to individual health.

Although prior research generally finds strong health benefits of social integration, there is growing recognition that not all relationships are equal and some may actually have deleterious health consequences (Umberson and Montez, 2010). Extending

learning principles, sociologists have emphasized that social ties may promote health-risk behaviors—such as crime, violence, and substance use—just as easily as they promote health-protective behaviors. For example, dynamic network studies show that exposure to smoking or delinquent peers increases one's own smoking and delinquency (Haas and Schaefer, 2014; Mercken et al., 2010; Weerman, 2011). The association between social relationships and health may therefore vary substantially across social and relationship contexts.

In this paper, we explore the correlation between social integration and health among a sample of male detainees in pre-prison confinement facilities. In contexts where individuals are involuntarily and temporarily brought together with high-risk peers, are peer distrust and “doing your own time” associated with violence and mental distress? Deriving competing hypotheses from social control and social learning theories and building on a small body of prior research, we test if detainees with strong peer ties are at greater risk of peer aggression and negative mental health outcomes compared to inmates who remain minimally invested in peer relationships. We explore the association between peer ties and health using self-reported (i.e., ego-centric) network data

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collected as part of the Prison Project, a longitudinal study of male inmates in The Netherlands. A particular strength of the Prison Project's network nomination data is that it captures trust the sampled detainees place in their peer relationships, thus providing a network-based measure of social integration.

1. Detainee peer integration, aggression, and mental health

Unlike most social institutions, correctional facilities are both "total" in their regulation of daily life and involuntary for their inmate members (Goffman, 1961). Additionally, jails, prisons, and detention centers bring together a heterogeneous population whose only prerequisite is a charged felony offense. This combination of social segregation, extreme formal control, and high-risk population creates unique conditions for scholars interested in understanding social relationships and health.

Correctional facilities are particularly useful for testing competing criminological hypotheses for the association between peers and crime. Theories in the control tradition assert that offenders' personality characteristics and social deficits limit their ability to form strong and trusting social relationships (Gottfredson and Hirschi, 1990; Hirschi, 1969). This "cold and brittle" perspective asserts that offenders will have weak peer bonds and that the strong correlation commonly observed between individual and peer crime results from criminals selecting themselves into criminal "friendships" for selfish reasons, such as the establishment of co-offending ties. Consistent with the control argument, several prior prison studies find that a substantial number of inmates report weak ties to their incarcerated peers (Clemmer, 1940; Irwin, 2005; Kruttschnitt and Gartner, 2005; Liebling and Arnold, 2012). The logic of control theories also predicts greater aggression and conduct problems among detainees with weak peer ties than detainees with strong peer ties (Kreager, 2004). Specifically, weak bonds to peers should correlate with increased crime, which in conditions of confinement would take the form of outward aggression and disobedience of prison rules.

Social learning perspectives provide a competing vision of offender social ties and the association between peer embeddedness and crime (Akers, 2011; Sutherland, 1947; Warr, 2002). Authors in this vein expect few differences in the quality of offender and non-offender relationships (Giordano et al., 1986). Indeed, social learning scholars assert that criminal ties provide essential mechanisms for individuals to learn criminal attitudes and behaviors. Extending this logic to conditions of confinement, social learning perspectives would expect many detainees to form strong and trusting friendships with one another. Indeed, these perspectives would predict that inmates with the weakest peer ties would also exhibit the least antisocial behaviors because they would receive fewer peer reinforcements for criminal behavior than do more peer-integrated inmates.

Research of adolescents tends to support the social learning perspective that delinquent friendships are little different from non-delinquent friendships in terms of trust and intimacy (Giordano et al., 1986; Houtzager and Baerveldt, 1999) and that peer influence is a primary mechanism for delinquent behavior (Warr, 2002; Weerman, 2011). Studies also suggest that peer-isolated youth engage in less delinquency than peer-connected youth (Demuth, 2004; Kreager, 2004). In one of the few studies of peers and crime in correctional settings, and consistent with social learning expectations, Worrall and Morris (2012) found that inmates with prison gang affiliations were at significantly greater risk of inmate-on-inmate violence than non-gang prisoners, particularly in prisons with greater numbers of gangs. In sum, extant research of offender peer relationships finds that, contrary to control theory expectations and research on social integration and

health, weak peer ties are not associated with increased individual antisocial behavior and that ties to other criminals are primary mechanisms for future crime.

Does this pattern extend to mental health in correctional settings? Findings that individuals embedded in criminal groups are at increased risk of crime may also relate to individual depression, as research finds a strong correlation between crime and internalizing symptoms (Defoe et al., 2013; Siennick, 2007). Detainees with strong peer ties may thus be at increased risk of depression because of their greater involvement in crime. Along with a direct association between crime and depression, ties between detainees may also increase depression because these relationships involve more conflict than do conventional friendships. Indeed, in a comparison of delinquent and non-delinquent friendships, Giordano et al. (1986) found that delinquent relationships were similar to non-delinquent relationships along most dimensions (e.g., stability, trust, frequency of interactions) but were also more likely to involve interpersonal conflict (see also Claes and Simard, 1992). A similar pattern may exist among detainee friendships, such that peer conflict increases the depression of inmates with trusting friendships compared to inmates without close ties. In sum, due to both increased crime and conflict/stress, detainees who build strong ties to peers may have greater internalizing problems compared to less peer-embedded detainees.

2. The context of temporary confinement

The criminogenic and mental health consequences of strong peer ties may be heightened in situations of temporary confinement. In the American context, the vast county-level jail system is typically where new offenders are detained prior to arraignment and where many serve out sentences of one year or less. Jails are thus churning warehouses and sorting facilities consisting of heterogeneous detainee populations. On average, 60% of a jail's population turns over every week (Minton and Zeng, 2015). Within such ever-changing circumstances, there is little time to vet potential friends and heightened future uncertainty, providing few incentives for detainees to establish trusting and reciprocal peer relationships. Avoiding close ties and "keeping your head down" may be the most certain means of securing early release or safely transitioning to the next phase of confinement. In contrast to out-of-prison contexts, detainees with low quality relationships may have better adjustment and health outcomes than those who invest heavily in peers.

Whether detainees seek intimate peer friendships during periods of temporary confinement may also depend on continued connections with friends outside of prison (Clemmer, 1940). Visits from friends may provide adequate social interaction and remove the necessity of companionship from fellow detainees, at least during the initial period of confinement. A growing body of research demonstrates the benefits of visitation for reducing prison misconduct and recidivism (Cochran, 2012; Cochran and Mears, 2013; Mears et al., 2012), and part of this association may be due to visitors offsetting the need to establish ties with (high-risk) peers while confined. Accordingly, strong out-of-prison ties may provide both a direct protective effect to detainee health and moderate the association between strong peer ties and health.

Lindquist (2000) provides the only prior study of social integration and health in a temporary confinement facility. Interviewing approximately 200 male and female inmates in a large American county jail, she examined the associations between self-reported marital status, perceived external and internal social support, and dimensions of inmate mental health (i.e., depression, anxiety, and hostility from the 53-item Brief Symptoms Inventory [BSI]; Derogatis, 1993). Counterintuitively, she found that married

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