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Eating disturbances in female prisoners The role of anger

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Abstract

Women in prison have high levels of impulsive damaging behaviours, including disordered eating. In addition, they display pathological levels of the emotional precursors that have been associated with eating disorders, particularly anger. The present study examines levels of disordered eating behaviours in female prisoners, and whether those behaviours are associated with anger. The sample consisted of 91 sentenced women at a medium-sized prison in the UK. The women completed an interview-based screening tool for eating disorders, alongside a standardised measure of anger. Using the established cut-off on the measure concerned, 25% of the women were at risk for an eating disorder. This prevalence rate is exactly twice that observed in a non-eating-disordered community sample, using the same measure. Furthermore, different facets of anger were associated with different aspects of eating psychopathology. The most plausible explanation for this association appears to be that many women enter prison with high levels of anger-driven impulsivity, and that the constraints of the prison environment result in a focus on eating behaviours. Future research directions are discussed. © 2002 Elsevier Science Ltd. All rights reserved.

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1. Introduction

Although it is known that women in prison are at high risk of self-damaging impulsive behaviours (such as self-harm, suicide attempts, and drug misuse—Her Majesty's Inspect-

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orate of Prisons for England and Wales, 1997), less attention has been paid to related impulsive behaviours, particularly disordered eating. The limited number of studies that have explored eating problems in female prisoners have revealed high levels of eating disturbance. These women engage in binge-eating, display high levels of restrictive and bulimic eating pathology, and have less healthy attitudes towards weight and shape than women in the general population (Dolan & Mitchell, 1994; Stewart, 1983).

Despite these preliminary findings, little work has been carried out to consolidate and broaden this line of enquiry. An important development is the finding in clinical and nonclinical groups of strong links between many disordered eating behaviours and intense states of negative affect, particularly anger (e.g., Arnow, Kenardy, & Agras, 1995; Milligan & Waller, 2000). It has been hypothesised that, although damaging to the individual in the long term, behaviours such as bingeing and purging serve the more immediate function of regulating and coping with intolerable emotional states (e.g., Root & Fallon, 1989). Several studies of female prison populations argue that other self-damaging behaviours (e.g., self-harm, drug misuse) are a means of expressing the feelings of anger, hostility, and “humiliated fury” (Finkelhor, 1988; Lewis, 1987) that result from the highly adverse life events that many female prisoners have experienced (e.g., Heney & Kristiansen, 1998). Therefore, it is possible to speculate that some women in prison may also engage in disordered eating behaviours in order to cope with feelings of anger.

It is important to be consistent about what is meant by “anger.” Within both the psychiatric and the forensic literatures, anger as an emotion has often been confused with related cognitive constructs (such as hostility) and the behavioural outcome (aggression). In addition, it is necessary to recognise that anger as an emotion is not unitary or static, but is a complex, multifaceted construct, which varies both in intensity and in the frequency of occurrence. Researchers such as Spielberger and colleagues (Spielberger, 1996; Spielberger, Jacobs, Russell, & Crane, 1983) have concluded that anger can be conceptualised either as an emotional state (which varies in intensity) or as a trait (a relatively stable personality characteristic). In addition, individuals can vary in the extent to which they express or suppress their anger. Finally, the pattern of these anger constructs may change within the individual over time. This need for a broad conceptualisation of the construct of anger has important implications for research concerning women in prison—many such women are undoubtedly angry, but little is known about how that anger is experienced. In addition, there is little understanding of how these women cope with anger, how that emotion relates to temporal variables (such as time spent in prison and duration of sentence), and whether it is associated with eating pathology in this group.

Following from the gaps in the existing literature, the first aim of this study is to explore the level of eating psychopathology (disordered eating behaviours and dysfunctional attitudes towards weight and shape) in female prisoners. Given that so little is known about the eating behaviours of women in prison, it is important to consider eating pathology as a broad construct in the first instance, in order that the clinical utility of the results can be maximised as early as possible. Morgan, Reid, and Lacey (1999) have recently developed a simple screening instrument (the SCOFF) for detecting potential cases of eating disorders. This interview measure covers bulimic and restrictive behaviours and dysfunctional attitudes about

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