



Child abuse, drug addiction and mental health problems of incarcerated women in Israel



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ABSTRACT

The mental health problems and pathways to drug addiction and crime among female inmates have long been of interest to researchers and practitioners. The purpose of the current study was to examine the possible association between multiple types of childhood abuse, mental health problems, and drug addiction and the incarceration of 50 Israeli women in prison. The findings indicated that female inmates come from risky families with a high prevalence of family mental health problems, parental drug addiction and crime, and sibling drug addiction and crime. Furthermore, they revealed that incarcerated women from risky families were victims of multiple types of childhood abuse and neglect by their parents, as well as their siblings. Overall, the results suggest that the adverse consequences of a family's mental health problems are much more dramatic than we assumed to date, and that women are more likely than men to be the victims of multiple types of childhood abuse and neglect, as well as suffering more severe psychiatric problems, depression, and drug addiction. The implications of these findings are discussed.

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1. Introduction

The number of women incarcerated has increased dramatically over the last decades (Covington, 2000). Changes in drug laws, mandatory sentencing guidelines, and gender-neutral sentencing policies during the past 20 years have resulted in a dramatic increase in the number of women entering the criminal justice system (Grella & Greenwell, 2006). In the majority of cases, these women have been arrested for drug abuse and drug-related crime (Chen, 2009; Voorish, Wright, Salisbury, & Bauman, 2010). In Israel, for example, the population of women prisoners has also increased by 34% from 1995 to 2006 (Israel Prison Service (IPS) (IPS), 2006). In 2006, the Israel Prison Service (IPS) estimated the prevalence of substance abuse among female inmates to be about 62.5%, compared with about 50% among male inmates.

Researchers have presented evidence that incarcerated women frequently come from risky families in which one or more family members were also addicted to drugs or alcohol and engaged in criminal activities (Belknap & Holsinger, 2006; Westermeyer & Boedicker, 2000; Widom, Schuck, & White, 2006), families that suffered mental health problems (Holsinger, 2000; Wagner, 1997), and families that were prone to conflict, violence, and incest (Hanlon, O'Grady, Bennett-Sears, & Callaman, 2005). Furthermore, there is a wealth of information that supports the

notion that family history of mental health problems, drug addiction and crime is related to multiple forms of child abuse during childhood (Kim-Cohen et al., 2006).

1.1. Child abuse and neglect

There is extensive evidence that incarcerated women have experienced more extensive histories of physical, sexual, and emotional abuse during their lives than the general population of women (Bradley & Davino, 2002; Browne, Miller, & Maguin, 1999; Haller & Miles, 2003; Moloney, Van den Bergh, & Moller, 2009; Mouzos & Makkai, 2004; Wolff, Shi, & Siegel, 2009). Previous research has indicated that up to 78% of incarcerated women reported being physically or sexually abused prior to their incarceration (McDaniels-Wilson & Belknap, 2008). According to the literature, a history of physical and sexual abuse is also common among women substance abusers (Islam-Zwart & Vik, 2004; Salisbury & Van Voorhis, 2009), with the rates of sexual abuse reported by drug-addicted women as high as 80% (Finkelhor, Hammer, & Sedlak, 2008). Browne et al. (1999) found that the prevalence among incarcerated women of physical abuse by a parental figure was 70% and of sexual abuse, 59%, and in more than half of the cases they studied, the first instance of childhood sexual abuse occurred before the age of 10 years. In another study, Clements-Nolle, Wolden, and Bargman-Losche (2009) found that female prisoners frequently reported childhood trauma: emotional abuse (58%), physical abuse (54%), sexual abuse (51%), emotional neglect (53%), and/or physical neglect (41%). Finally, in a research project on the lives of

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incarcerated women, [Girshick \(1999\)](#) found that 68% of the women were victims of physical, sexual, or emotional abuse before age 18 and 90% had been abused as adults.

In light of the evidence of much higher rates of victimization and trauma among incarcerated women than women in the community, researchers have begun to examine the possible association between various forms of childhood abuse, substance abuse, and mental health problems ([Drapalski, Youman, Stuewig, & Tangney, 2009](#); [Salisbury & Van Voorhis, 2009](#); [Tripodi & Pettus-Davis, 2013](#)).

1.2. Mental health problems and substance abuse

Numerous studies have shown the significant impact of childhood abuse on women's mental health problems ([Fujiwara, Okuyama, Izumi, & Osada, 2010](#); [Horwiitz, Widom, McLaughlin, & White, 2001](#)). Incarcerated women who were victims of physical, sexual, or emotional abuse reported high rates of mental illnesses ([Covington, 2003](#); [Girshick, 2003](#); [Lord, 2002](#); [Wolff, 2008](#)). Furthermore, this history of abuse is assumed to be a major contributor to mental health problems, drug addiction, and crime of this population ([Chen, 2009](#); [Singer, Bussey, Song, & Lunghofer, 1995](#)). As a result, there is greater prevalence of psychiatric disorders among incarcerated women than in the general population ([Jordan, Schlenger, Fairbank, & Caddell, 1996](#); [Teplin, Abram, & McClelland, 1996](#)). For example, according to the IPS, women in prison have been identified as suffering from higher levels of psychiatric morbidity (23.9%) than their male counterparts (6.5%) ([Israel Prison Service \(IPS\) \(IPS\), 2013](#)).

In a study of 321 incarcerated women, [Silberman \(2009\)](#) concluded that a history of child sexual abuse increases the likelihood that an inmate will receive mental health treatment. In another study, [Wolff and Shi \(2009\)](#) noted that rates of trauma are highest among incarcerated women with mental health problems. An estimated 74.3% of incarcerated women with mental health problems were found to have experienced a traumatic event prior to age 18, with 60.5% also reporting a traumatic event after age 17 ([Wolff, Frueh, Shi, & Schumann, 2012](#)). Finally, in a research project with 125 female inmates, [Tripodi and Pettus-Davis \(2013\)](#), found that incarcerated women who were both physically and sexually abused as children were likely to be hospitalized for a psychological or emotional problem, to attempt suicide, to have a substance use disorder, and to be sexually abused in the year prior their incarceration.

Furthermore, many women in prison have suffered significant mental health problems, such as major depression, posttraumatic stress disorder (PTSD), borderline personality disorder (BPD), and substance abuse prior to their incarceration. For example, researchers have argued that the rates of PTSD among women prisoners are more than two to three times higher than the rates of PTSD reported in a sample of women in the community ([Kessler, Sonnega, Bromet, Hughes, & Nelson, 1995](#)). Moreover, [Teplin et al. \(1996\)](#) noted that PTSD is the second most common diagnosis among women in prison, after substance dependence.

PTSD has been found to be strongly associated with childhood abuse ([Rowan & Foy, 1993](#)), and with substance abuse disorders ([McClelland, Farabee, & Crouch, 1997](#); [Zlotnick, 1997](#)), and numerous studies have demonstrated that the prevalence of substance abuse is much higher among incarcerated women who were victims of childhood abuse ([Brems, Johnson, Neal, & Freemon, 2004](#); [Langan & Pelissier, 2001](#)). According to some of the research, approximately 60% of female inmates used drugs in the one month prior to the offense that led to their incarceration ([Mumola & Karberg, 2007](#)). Moreover, in 2004, more female state prisoners (60.2%) than male state prisoners (53.0%) met the criteria for drug dependence or abuse ([Mumola & Karberg, 2007](#)).

Women use drugs as a primary coping mechanism for dealing with negative emotions — a kind of “self-medication,” and a maladaptive coping strategy of escaping from trauma caused by childhood abuse ([Chen, 2009](#); [Haseltine, 2000](#)). [Simpson and Miller \(2002\)](#) found that

the rate of childhood sexual abuse among adult women with substance abuse problems was twice as high as the rate of sexual abuse in the general population. In another study, [Thompson, Arias, Basile, and Desai \(2002\)](#) found that both physical abuse and sexual abuse in childhood were associated with a number of health problems, including daily use of drugs and alcohol in adulthood.

Nonetheless, several scholars have noted the lack of research on incarcerated women regarding the impact of child abuse experiences on their mental health problems and involvement in drug addiction and crime. For example, [Silberman \(2009\)](#) noted that “although there is considerable discussion in the literature on the prevalence of abuse histories and mental health problems among incarcerated women, there is little systematic research of the impact of abuse histories on the incidence of mental disorders in this population, or how this may contribute to their incarceration” (p. 786). Similarly, [Byrd and Davis \(2009\)](#) claimed that “given empirical findings that female inmates report extensive trauma histories, the possible relationship between these experiences and criminal behavior is in need of further examination” (p. 380). Other researchers have argued that little is known about the impact of traumatic life experiences on incarcerated women ([Fagan, 2001](#)) and that the exact pathway from childhood abuse to drug addiction and crime of women who are sent to prison is unclear ([Voorish et al., 2010](#)).

2. The Present Study

Due to the limited research on incarcerated women, there are many unanswered questions regarding the possible relationship between childhood abuse experiences, mental health problems, and drug addiction. The present study focused specifically on the areas of the child abuse experiences of incarcerated women, their mental health problems, and their drug addiction. This study was divided into two parts. The first part focused on childhood abuse experiences among female inmates. The second part focused on the negative outcomes.

The purpose of this study was twofold: (a) to assess the extent and interrelationships of childhood abuse and family history of drug addiction, crime, and mental health problems among female inmates; and (b) to evaluate the extent to which multiple types of childhood abuse and family history of drug addiction, crime, and mental health problems are related to drug addiction, depression, and mental health problems among incarcerated women.

We hypothesized that:

- 1 A high prevalence of multiple types of childhood abuse and high rates of family history of drug addiction, crime, and mental health problems will be found among female inmates.
- 2 Positive relationships will be found between family history of drug addiction, crime, and mental health problems and multiple types of childhood abuse.
- 3 Family history of drug addiction, crime, and mental health problems as well as multiple types of childhood abuse will be associated with more severe drug addiction, depression, and psychiatric problems among female inmates.

3. Methods

3.1. Participants

The sample was comprised of 50 Israeli women who were incarcerated in Neve Tirza maximum-security state prison (the single prison for women in Israel). The participants met the *Diagnostic and Statistical Manual of Mental Problems* (5th ed.; DSM-5; [American Psychiatric Association, 2013](#)) criteria for having a drug dependence or abuse problem prior to and during their incarceration, based on reports from the [Israel Prison Service \(IPS\) \(2006\)](#).

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