

# Study: Avoidance, poor coping challenge prisoners returning to society

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How do individuals often cope with reentry from prison to society?

Too frequently with avoidance, says Lindsay Phillips, assistant professor of psychology at Albright College in Reading, Pa. and author of the forthcoming paper, "Prison to Society: A Mixed Methods Analysis of Coping with Reentry," to be published by the *International Journal of Offender Therapy and Comparative Criminology*.

"There is a defined process experienced by participants, which is initial optimism about release, followed by craving substances, facing practical barriers, or feeling overwhelmed," she says. "This eventually results in avoidance of managing problems and emotions and substance abuse relapse, which culminates in recidivism."

Phillips studied 20 individuals who returned to an urban prison to examine their most recent reentry process to identify barriers they faced and coping strategies they used.

"Although some tried to cope in a healthy manner initially, all eventually resulted in avoidance of managing problems and emotions," she says.

"All relapsed into [substance abuse](#). At this point, problems increased and all participants recidivated."

Participants identified a total of 57 instances in which coping mechanisms were used to manage barriers they faced during reentry. Of these instances, avoidance was used 37 times and problem focused (i.e.

directly addressing a problem) was used eight times. "Participants reported 11 additional cases in which avoidance was used with another strategy or when other coping strategies were not effective," she says. "Therefore, in 48 of the 57 instances of coping by the 20 participants, avoidance coping strategies were used."

What participants thought they should do and what they actually did often conflicted, Phillips found. "Participants endorsed emotion-focused strategies, but these were infrequently used when they recalled their experiences," she says. "It's possible that they were unable to apply techniques to reduce their [emotional](#) reactions to the barriers they faced. Or they might have known healthy coping skills, but did not use them in practice."

"Clinical work with the population should in part focus on identification of healthy coping mechanisms to help individuals manage emotions and deal effectively with problems they will face during reentry and throughout life," she says. "Recidivism can be reduced through the teaching of [coping strategies](#) to prevent a return to crime."

Provided by Dick Jones Communications

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