

***Emotional accessibility of perpetrators of domestic abuse  
and sense of security in the context of sexual life***

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**Abstract**

The study reported in this paper deals with the issue of self-assessment of the sexual life of offenders convicted of a crime involving use of domestic violence (Polish Penal Code, §207), accounting for the role of emotional accessibility as an element of the sense of security. The study was conducted on a group of

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male subjects (N=35). The study used descriptive statistics to demonstrate the correlations between narrative, a sense of security, and self-assessment of convicts. This paper draws attention to deep connections and the interconnectedness of these three elements. A sense of security turns out to be one of the most crucial reasons for being imprisoned for domestic violence. Unfortunately, the prison environment does not weaken but strengthens a sense of security. Moreover, it does not enable prisoners to express their personality and makes them take a specific game imposed by the prison environment. This is reflected in the autonarration of emotional inaccessibility. Emotional detachment leads to aggression as well as socially unacceptable sexual acts. In consequence violence offenders show an alarmingly lasting impact of such behavior which, after serving a prison sentence, reveals itself as an inability to build relationships, especially sexual ones. Furthermore, these dysfunctions emerge not only on the level of psyche but also on the physiological level which makes the therapy even more difficult and complicated. The study conducted for the purpose of this paper blatantly confirms complex correlations between control, self-control and the level of emotions. This paper also draws attention to the unreliability of the Polish penitentiary system which, as one of the forms of penalization, unjustifiably, uses the separateness of the prisoner from meeting their psychological, emotional and physiological needs.

*Key words:* family abuse; perpetrators; emotional states; narrative; sex life; sense of security; self-assessment; control; penitentiary system

## **Introduction**

Emotional accessibility is associated by many people with forms of experiencing “emotions”, which on the one hand form a motivating drive, and on the other, unconsciously, become a state of mind (Bartoszewski, 2018). Emotions in criminal environments are considered to play irrelevant, unnecessary and even harmful roles. Difficulties in expressing emotions result from being in a gray emotional zone that arises out of parental behavior, i.e. socialization and upbringing (Collins, 2000). In addition, emotions form a sphere in males which should not be demonstrated. In addition, men associate emotions with effeminacy, which leads to the practice of constraining all expressions of sadness, happiness, fear or anger. And if they appear, then men, and not only those from criminal environments, not knowing what is happening to them, suppress emotions or use substitutes in the form of stimulants, such as alcohol or drugs, resort to accidental sex or mask them with various forms of aggression etc. (Collins et al., 2000). Humans desire to maintain close and supportive relationships with others, and their psychological and physical well-being depends on how well

they are able to do so (Baumeister, Leary, 1995). Functionalist theories of emotion indicate that emotionally expressive behavior is central to maintaining social bonds. Expressive behavior communicates information to others about an individual's emotional state and associated needs and intentions. Drawing from this functionalist perspective, it is possible to hypothesize that relatively greater use of suppression by men in their everyday lives will disrupt the normal flow of emotion-based communication and impede social functioning as a result.

On the basis of the synthetic analysis of the issues related to accessibility of emotions, one cannot ignore the self-assessment of convicts. The depravity of behavior involving the use of physical, psychological, sexual or economic violence needs to involve the ability of the perpetrator to ensure self-control outside the family environment coupled with such subordination of the household members to ensure that they meet the offender's psychophysical needs. The interpretation of macro- and micro-social phenomena and the accompanying emotional states of the perpetrator of violence plays an essential role as a factor in everyday life circumstances. The interpretation is, unfortunately, combined with the hypernarration of experiences, which in the event of emotional inaccessibility determine the mind of the perpetrator of domestic violence, becoming the state of that mind. Hypernarration is nothing more than a deformation of reality that is perceived in the context of emotional dysfunction – emotional inaccessibility (Cacioppo et al., 2000).

Importantly, hypernarration brings about a disturbing sense of security of the perpetrator of domestic violence and blames everyone without exception for the conditions. The offenders do not take note of the fact that they are emotionally inaccessible. At this point we can refer to the famous statement that “relatively much attention is paid to the personality characteristics of offenders using aggressive behavior, which include: emotional immaturity, impulsiveness, egocentrism, alienation, low level of self-valuation, low self-assessment, poor sense of security, lack of empathy and emotional warmth, personality stiffness and inability to compromise” (Pilszyk, 2007, p. 831).

The approach adopted by the researchers regarding the importance of human hypernarration and emotional inaccessibility and the level of self-assessment, also in the case of sex life, is not unambiguous for well-being. Many of them indicate that the correct narrative of emotional states is the natural well-being of individuals resulting from the process of socialization (Liddle et al., 1991). Interestingly, emphasis in the research of this issue is placed on how narrative of emotional states is determined by consciousness and intelligence. Apparently, this statement can be acknowledged, but the educational fact, which plays an important role in the process of understanding emotional states should not be overlooked (Obuchowski, 1984, p. 212). This ‘nature’ versus ‘nurture’ debate

conjures deep philosophical questions about free will and determinism. The ‘nature’ side may be criticized for implying that we behave in ways in which we are naturally inclined, rather than in ways we choose. Similarly, the “nurture” side may be criticized for implying that we behave in ways determined by our environment, not ourselves. Generally, sociologists point out that our environment is, at least in part, a social creation.

In the social dimension, the image of a male is changing, but there is still a belief that men should not expose feelings or flaunt emotions. Mass media, cinematography, the Internet, and magazines create the image of a man as a hero fighting for “the salvation of the world”, and if emotional factors start to occur, they usually take the form of anger seeking an outlet in aggression and violence. Although the society is offered specific film productions, e.g. romances, in which it is difficult to expose aggression and violence, nevertheless the male is presented stereotypically, most often as a sensitive lover with a prominent erotic sphere, while the rich emotional sphere is ignored. This specific image, created by the media, becomes a pattern of behavior and creates a model for adolescent male youth. Importantly, the difficulties and dilemmas associated with perceiving oneself as a man living a full life in the social sphere result from the masculinity formula discussed above in an outline, which many adolescent boys identify with the sexual sphere, strength and domination. Many researchers point this out by emphasizing that many men are afraid of their own emotions, and when they try to come to the fore, they are displaced by them or given a sense different from the real thing (Izdebski, Ostrowska, 2003).

Emotions and their interpretation should be considered an element of well-being. Therefore, health understood as physical, mental and social well-being plays an important role in everyone’s life. In accordance with WHO terminology (2002), it is associated with a set of emotional, intellectual, biological and social components of life that determine the adequate development of personality, love and communication skills. Health depends on many factors, including biophysical (endocrine, vascular, illness), psychological (depression and its treatment, mental health, sexuality, sex awareness) as well as social factors (Izdebski, 2012).

Despite countless unanswered questions, knowledge of the pathways and biological mechanisms connecting social factors with health has increased exponentially during the past years. Mounting evidence supports causal relationships between many social—including socioeconomic—factors and many health outcomes, not only through direct relationships but also through more complex pathways often involving biopsychosocial processes (Miller et al., 2009).

Emotional, psychophysical and physiological reactions in males who rely on use of abuse are variable and form a direct effect of hypernarration between stimuli and reactions (Depko, 2010). Many factors are responsible for inducing

aggressive behaviors, e.g. personality, needs or deviant disorders, as well as the neurohormonal system, neurotransmitter structure, microelements, performance of the cardiovascular and nervous systems (Depko, 2010). It can be remarked here that emotional inaccessibility in perpetrators of domestic abuse can be considered by taking into account sexual tension or unsatisfied needs on the biological and psychological level, as well as potentially from the perspective of dissocial disorders. The level of aggressive behavior varies, and by studying it the thoughts, underlying emotions and fantasies of the subject of examination can be identified. When the emotional inaccessibility is coupled with hypernarration of inaccessible emotional states, a condition is promoted that often includes aggressive behaviors (in this case, biological and neuropsychological deficits are disregarded) and in extreme cases this leads to sexual violence, whose background is associated with unsatisfied needs as well as serious dysfunctions in this area (Jakiel, 2010).

By further discovering insights in this area, it can be emphasized that in the case of so-called home events, the phenomena of violence are often obscured for various reasons, but social and institutional campaigns effectively encourage victims to take action aimed at preventing and stopping violent behavior from their partners. In the conditions of physical detention, the perpetrators of domestic abuse feel insecure because of isolation. Importantly, the self-narration associated with inaccessibility of emotional states changes in the company of other prisoners. The perpetrators assume the attitude of an unshakable, hard, cold male that is devoid of emotions, and in extreme cases go with the mainstream of prison culture. Importantly, separation from one's own emotions strengthens emotional inaccessibility, which results in a focus on relieving tension, e.g. at the biological level. It is worth noting that the relief of tension in isolation takes place in the form of physical exertion or a sexual act in the form of masturbation, as well as potentially oral or anal acts (which are of interest in this research). Of course, these are not the only reasons for sexual isolation. Another one is simply associated with unmet sexual need that finds an outlet in interest in pornography, in autoeroticism (Piotrowski, Ciosek, 2016, p. 437) or in homosexual activity (Hansen, 1968; Szaszkiwicz, Kamiński, 2006; por. Stöver, 2016, p. 255-266).

Unfortunately, in the conditions of isolation, and in the absence of adequate diagnosis based on psychological and psychiatric examination, it is difficult to talk about the rehabilitation of perpetrators of home abuse. As Sarzała writes, the destructive behaviors of prisoners create a pathological space of prison isolation that is resistant to social rehabilitation (Sarzała, 2013, p. 16).

Perpetrators of domestic abuse are people who can be classified according to the category of perpetration, e.g. perpetrator in crisis, horrified perpetrator, antisocial perpetrator. Behavioral depravity, or rather strengthening antisocial behaviors in the penitentiary system, tends towards tensions that arise as a result of unsatisfied needs in various dimensions, which in turn trigger impulsiveness, violence and aggression

(Wolff et al., 2006; Gaes, Goldberg, 2004; Dumond, Dumond, 2002; Sarzała, 2013, p. 91). In addition, fantasies, dreams, images and very important symbolic behaviors start to come to surface (Ostrowska, 2008, p. 256-257).

In this case, isolation without adequate therapy leads to the deterioration of the prisoner's attitude to the victim (emotional inaccessibility will be strengthened, accompanied by hypernarration of the actual state, i.e. condition of isolation), as well as reluctance that is boosted and aggression that is triggered in the prison conditions, as the perpetrators feel discomfort not only on the mental plane, but also on the physical side, including sexual tension, which consequently leads to the disturbance of the sense of security. Obviously, a matter that arises is concerned with the question whether security was actually obtained as a result of applying a violent behavior. In the opinion of the perpetrators the answer is positive, due to the control not so much their own emotional states (offenders give a positive answer), but that applied only to the external structure, i.e. families, partners, children.

## **1. Materials and methods**

The objective of the study reported in this paper was to examine the relations between emotional control, sense of security, and self-assessment of the sex life of prisoners serving a prison sentence for committing domestic abuse crimes. The following research problems were formulated: Q1. What is the relationship between emotion control and a sense of security? Q2. What is the relation between the sense of security and self-assessment of sex life? Q3. What is the relation between emotional control and sexual self-assessment? The following research hypotheses were adopted: H1. Higher level of the emotional control of prisoners results in a higher sense of security; H2. Higher the quality of sex life is accompanied by a higher sense of security; H3. Higher the self-assessment of the sex life of prisoners is accompanied by a higher level of emotional control.

The adoption of such hypotheses resulted, among others, from the fact that the subjects in direct interviews reported feeling safely in isolation; moreover, they report no problem with coping with their own emotions, as well as control them and are aware of them. Importantly, many offenders indicated that they do not feel sexual tension and after serving the sentence, they are able to develop a normal relationship with a woman coupled with controlling sexual needs, and accounting for the quality of sex life.

## **2. Study group**

The tests were conducted among 35 prison inmates in the period between March and June 2018 in one of the prisons (for safety reasons of prisoners, the

place of examination will not be disclosed). The arithmetic mean of age was 43.8 (median 46 years) with the standard deviation 8.75. The youngest person who took part in the study was 25 years old, the oldest 61 years old. Detailed data on education are summarized in the table below.

Table 1  
*Level of education of inmates*

	N	%
Gymnasium	4	11.4
Vocational	13	37.1
Secondary vocational	4	11.4
Secondary	4	11.4
Higher/further	10	28.6
Total	35	100.0

### 3. Research tools

The present study applied the following research tools: : 1) SHIM questionnaire also known as the IIEF-5; 2) Scale of Watson and Greer Emotion Control and 3) safety assessment checklist.

**The SHIM questionnaire** (*The Sexual Health Inventory for Men*) questionnaire has been designed for assessing sex life in males, in particular for assessing the severity of erectile dysfunction. The questionnaire comprises 5 items. Each item is assessed on a five-degree scale (item 1, scored from 1 to 5) or six-level scale (items from 2 to 5 that are scored from 0 to 5). The maximum score is 25 points, and the minimum is 1 point. The questions in the questionnaire are concerned with the assessment of male sexual performance in the last 6 months. In the study of Bernstein et al. (2013), the internal compliance of the questionnaire calculated using the Cronbach's Alpha reliability coefficient was 0.97. In the study reported by Cappelleri and Rosen (2005), the erectile dysfunction is classified according to five scales: 1) no dysfunction (22-25 points), 2) mild (17-21 points), 3) mild to moderate (12-16 points), 4) moderate (11-8 points), 5) strong (1-7 points).

**Emotional Control Scale** (*Courtauld Emotional Control Scale, CECS*) developed by Watson and Greer forms a tool applied in the diagnostics of emotional control, and consists of three subscales utilized to measure control of anger, depression and anxiety. Each subscale comprises seven questions. The scale also is applied for the purposes of measuring the overall emotion control performance, which is expressed the total of all three subscales. "The essence of the study is to determine the extent to which individuals are subjectively convinced about their ability to control reactions when experiencing specific negative emotions" (Lewicka et al., p. 105). The emotional state control is measured on a scale between 21 and 84. A high

score indicates a considerable level of suppression of negative emotions. The higher score means that suppression of negative emotions is greater. The scale was locally adapted by Juczyński (2001). Internal compliance measured with the Cronbach's alpha coefficient was 0.80 for anger control, 0.77 for depression control and 0.78 for anxiety control, and 0.78 for the entire scale (Juczyński, 2001).

The last research tool used in the present study involved the **safety assessment questionnaire** related to the inmates' perception of the penitentiary institution. Individual survey items were developed on the basis of interviews with prisoners, in which they were asked to determine, on the basis of their own experience, security elements in the isolation system that affect their performance in the mental, physical and emotional sphere. On the basis of the answers, a questionnaire consisting of 20 questions was developed. In this way, the inmates assessed their sense of security in the penitentiary institution by selecting answers from a variety of assessment marks: very high, high, moderate, low, very low.

#### 4. Research conclusions

The analysis of research results was preceded by the presentation of descriptive statistics, which are presented in the table.

Table 2

*Descriptive statistics for measured variables*

	M	SD	Min	Max
Sexual life	3.9	.85	2	5
Sense of safety	57.4	10.8	40	97
Total result: emotions	92.4	4.76	79	99
Anxiety	44.7	5.11	29	52
Anger	23.2	1.99	19	25
Depression	24.6	2.66	19	29

The mean score in terms of self-assessment of sex life of prisoners who took part in the study was 3.9, with the standard deviation of 0.85. Thus, the obtained result is within the range indicating a considerable severity of erectile dysfunction in the examined prisoners. It can be noted at this point that the highest score obtained by the subjects in the sexual life self-assessment (5) also falls within this range (1-7). It can be concluded that all examined prisoners demonstrate a considerable degree of erectile dysfunction.

The table below presents the correlation coefficients between emotion control, self-esteem, sexual life and a sense of security.



**Table 3**

*The correlation coefficients between emotion control, self-esteem, sexual life and a sense of security*

	Anxiety control	Anger control	Depression control	Sexual life assessment	Sense of security
Emotion control: overall score	.692**	.453**	-.007	-.403*	-.076
Anxiety control		.142	-.574**	-.206	-.059
Anger control			-.016	-.386*	.056
Depression control				-.088	-.013
Sexual life self-assessment					.144

\*\* . correlation is significant at a level of 0.01 (bilateral)

\* . correlation is significant at a level of 0.05 (bilateral)

The correlation of variables demonstrated statistically significant relationships that occurred between anxiety control and the overall result of emotion control (positive dependence). This, in turn demonstrates that the higher the emotion control rate brings about a higher control of anxiety. A moderate positive dependence was recorded between anger control and the overall result gained in emotional control, which indicates that the higher level of emotion control leads to the higher the level of anger control. There was also a moderate negative relation between anxiety control and depression control, which demonstrates that the higher level of anxiety control is combined with the lower level of depression control. The correlation analysis revealed a moderate negative correlation between sexual self-esteem and the overall result of emotional control, which indicates that the higher level of emotional control is combined with the lower level of sexual life self-esteem and vice versa. Finally, there was a moderate negative dependence between sexual self-esteem and anger control. Thus, the higher the control of anger, the lower the level of sexual life and vice versa.

**5. Results**

A. The attempt to interpret the results of the study presented above revealed a high level of positive correlation ( $Rho = 0.692$ ;  $p < 0.001$ ) between anxiety control and the overall result of emotion control among the examined inmates. A positive correlation indicates an increase in the intensity of emotions along with the an increase on the anxiety scale in perpetrators of domestic abuse. Strong intensification of emotions, in particular negative ones, implies a number of adverse consequences in terms of achieving a kind of coherence in the psychophysical sphere of convicted men, including developing relationships with another person. It is worth emphasizing here that we are talking about bilateral correlation, and thus the increase in negative emotions entails an increased

sense of anxiety experienced by the subjects. Such conditions can create a kind of a vicious circle in which:

1. sense of anxiety = intensification of emotions;
2. intensification of emotions = sense of anxiety.

The finding from the study presented above indicates a serious disturbance of the sense of security, manifested in inmates by e.g. strong feeling of anxiety correlated with emotions accompanying such conditions and with the available ways of expressing them towards other individuals. The results represent the high rank of this problem and require reconsidering the methods of social rehabilitation of domestic abuse offenders in the context of ways of experiencing and manifesting both positive and negative feelings.

B. It is equally interesting to note the results of the correlation between anger experienced by the inmates and the degree of intensity of emotions, which is in the range of  $Rho = 0.453$ ;  $p < 0.001$ . The presented results demonstrate that experiencing strong negative emotional states contributes to the intensification of emotions in general, such as anxiety and depressive behaviors. Considering the specificity of the research and living conditions of convicted subjects, it should be noted that in general individuals who commit deviant behaviors tend to be accompanied by the lack of ability of coping with difficult life situations, and the only way to overcome them is associated with outbreaks of anger, which often take the form of extremely aggressive behaviors. In most cases, these behaviors are directed against unrelated third parties, such as friends or colleagues as well as family members. The causes that trigger them, as already mentioned, can be tracked to the lack of the ability to cope with emotions, which results from both the faulty socialization and upbringing processes. A growing body of evidence suggests that children's emotions and emotion-related processes influence emerging social competencies and emotional/behavioral maladjustment. For instance, socially competent children demonstrate appropriate levels of positive affect during social exchanges, and such positive affect facilitates the initiation of social exchanges and friendship formation (Denham, McKinley et al., 1990). In contrast, children who experience difficulties controlling their expression of negative emotion tend to have difficulty managing their anger during difficult and conflict situations (Denham et al., 2003). The deviant behaviors may also stem from the living conditions of the prison inmates, where the natural human impulses that cannot be satisfied in accordance with social norms become a motif for destructive and self-destructive behaviors.

C. The result of the correlation between the sense of anxiety and the scale of depressive behavior ( $Rho = -0.574$ ;  $p < 0.001$ ), demonstrates that a strong

sense of anxiety experienced by perpetrators of domestic abuse significantly decreases the symptoms of depressive behavior. At this point it should be shown that the anxiety felt by convicts leads to the intensification of emotions demonstrated by the investigated group of prison inmates. In the conditions marked by the strong sense of anxiety, depressive behaviors, which should be understood as the withdrawal of the convict, problems with concentration and sleep are not recorded. The decreasing parameter of depressive behaviors may be related to the outcomes of anxiety. A person who feels a long-lasting feeling of anxiety, perceives the world as a potential threat and demonstrates an increasing readiness to repel any attack, which may result in the individual being in the feeling of having to constantly maintain control over the environment. Anxiety may also influence violent and antisocial behavior. A high proportion of criminal subjects suffer from sociopathy and psychopathic individuals were said to be incapable of anxiety and remorse. Moreover, depressive and anxious symptoms frequently coexist, even so that the discrimination between both becomes difficult when there is only a mild to moderate symptom intensity (Rouillon, 1999).

D. The principal objective of this research was to compare the results related to the sense of security and the quality of sex life of prison inmates convicted of acts of domestic abuse. The result ( $Rho = -0.403$ ;  $p < 0.001$ ) presents a negative correlation of the presented phenomena. The result implies that the intensification of emotions, such as anxiety, anger or depression, results in numerous disorders in the process of developing positive relationships with partners, including difficulties in maintaining a fair standard of sex life of convicts. At this point one should refer back to the personality of a perpetrator of domestic abuse. There are many portraits of the offenders in psychology literature, but none are clearly defined and dominant. The most cited typology is likely to be that of Holzworth-Munroe and Stuart (1994) which, based on evidence of three different dimensions of aggression (severity of violence, generality of violence and presence of psychopathology or personality disorder) suggested the existence of three types of abusers: The first type corresponds to the family only abuser who is described as less deviant on a number of indicators including impulsivity, alcohol and drug abuse and criminal behavior. The second type has been called the borderline/dysphoric abuser. They tend to get involved in moderate to severe violence. They show emotional problems, especially those related to anger management and jealousy. The third type is the generally violent/antisocial abuser. They tend to use moderate to severe physical, psychological and sexual violence. These men are likely to have a family of origin history of abuse and involvement with delinquency. They also present deficits in social skills as well as positive attitudes towards violence and likely view violence as an

appropriate response to any provocation. The statement that is common element to all these types and theories related to domestic violence gives that the offender acts as a result of strong emotions, the cause of which can reach a multidimensional character. A common characteristic of subjects who resort to committing physical, psychological, economic or sexual violence against their relatives is associated with the tendency to dominate, which creates a sense of security in the abuser. The life sentence causes the offenders to suddenly compel themselves to adapt to different living conditions. By feeling lonely and having to adapt to a new environment, they often feeling anxious and ashamed of expressing emotions. This, on turn, results in intensifying destructive behaviors and developing irrational perception of reality, which results in sudden anger outbursts, a strong sense of anxiety or deterioration of depression. The process of social rehabilitation to which convicts in prison are subjected focuses rather on eliminating their destructive behavior that is recorded in the prison, and not on the effort to get to know and remodel the emotional or spiritual sphere of convicts. Such a sequence of things completely destroys the possibility for repeat offenders to achieve correct relations with their immediate surroundings, including a high level of their sex life. However, rehabilitation and social reintegration are – along with retributive justice and deterrence – among the main objectives of modern penal systems. According to the European Court of Human Rights, ‘while punishment remains one of the aims of imprisonment, the emphasis in European penal policy is now on the rehabilitative aim of imprisonment’ (Balafoutas et al., 2020). But how successful are prison sentences in fostering pro-social behavior and promoting the future integration of inmates into social and economic life? The debate among criminologists about whether prisons have a positive effect on deterring inmates’ criminal behavior remains unresolved. Generally speaking, different schools of thought have expressed contradictory points of view in this regard (Gendreau et al., 1999). The first one is optimistic and claims that, in line with the concepts of specific and general deterrence, prison sentences suppress criminal behavior. In support of this view and in particular specific deterrence, recent evidence from Norway points towards a preventive effect of time spent in prison on subsequent criminal activity and recidivism by individuals and within their family and criminal network (Bhuller et al., 2018). The second goes in the exact opposite direction, claiming that prisons promote criminality given the psychologically destructive and inhumane conditions (Chen, Shapiro, 2007) and the possibility of acquiring new criminal skills from one’s fellow inmates (Bayer et al., 2009). Hence, the discussion over the effect of prisons on inmates remains open. In any case, more work is needed to understand inmates’ social behavior in order to design effective policies to prevent or rehabilitate criminals.

E. The final element of the study involved the search for the correlation between the level of anger in the offenders and the quality of their sex life, which is on a scale ( $Rho = 0.386$ ;  $p < 0.001$ ) and indicates a negative relationship, i.e. that as anger increases, the level of sex life decreases and vice versa. Natural sexual desire and the need to establish close relationships with another person are strongly disturbed due to isolation, and the way of satisfying them goes inward, thus creating a sense of calm in the prisoner, which, however, at a later stage leads to frustration and can turn into outbursts of anger, anger, and reducing sexual life only for the desire to physically relieve sexual tension. This state of affairs leads to objective treatment of the partner and prevents contact with him and maintaining positive relationships based on love and intimacy.

## **6. Discussion**

Emotional inaccessibility, including autonarration, entails far-reaching outcomes in terms of developing social and family relationships. Sexual act in a marriage or informal relationships is just as important element in developing relationships as the mental, emotional and physical sphere. It can be mentioned that the human sexual sphere forms a sophisticated component of human psychophysicality. Very often it is tabooed (vide: Stöver, 2016, p. 255-256) or worse – it fall victim to ideological experiments. At other times, its value is marginalized, as the role that is played by it in the procreative process or in building permanent interpersonal relationships is disregarded. Individuals need to perform roles simultaneously in various spheres of life. Dissonance and disorder in one sphere leads to disorder, chaos and collapse in other spheres. Penitentiary isolation contributes to deprivation of the need to enter an intimate, very personal relationship with another person. The effect of isolation is related to the issue of further loss of sense of security discussed here, which has already become apparent in acts of violence against immediate family members. The lack of this feeling was, after all, one of the causes of aggression and violence against loved ones in convicts, examined for the purposes of the presented article. Penitentiary isolation devastates the sexual sphere to such an extent that after leaving prison, the ex-prisoner needs to also face challenges in this sphere. Often scattered constructs of self-understanding as a sexual being force a person leaving prison to undergo a remodeling of their own sexual activity, which during their stay in prison was focused only on relieving sexual tension. The activity of an inmate who is about to leave prison needs to be an expression of emotional and spiritual bond with another person.

In the context of the research presented here, it is clearly seen that a kind of triangle – hypernarration and emotional accessibility (unavailability) – sense of

security – sexual activity of prisoners – perpetrators of domestic abuse – reveals not only the degree of deprivation of prisoners but also, and perhaps above all, clear deficiencies of the penitentiary system itself, which often deviates and strengthens abusive behaviors. In this context, it appears that it is necessary to include actions aimed at the humane and subjective treatment of prisoners. This applies not only to the increasingly serious occurrence of drug addiction, but perhaps even to the more serious problem of not being able to use socially acceptable forms of satisfying sexual needs. It is not uncommon for prisoners to be deprived of the opportunity to meet their basic needs, which without a doubt include sexual needs, are implemented part of the punishment, in addition to, e.g., inferior medical care, reduced food quality or lack of access to other pleasures (Stöver, 2016, p. 256). Substitutes that prisoners have to adapt in the prison conditions deteriorate their characters when they leave prison, which particularly requires healthy relationships, including sexual relations, as a *sine qua non* condition for returning to “normality”. Drawing on theory and research that emphasizes the importance of social ties on offending and desistance, scholars have highlighted several theoretical pathways through which visitation can be beneficial for inmates, including reducing strain, maintaining social bonds, and providing access to social resources during and after incarceration (Cochran, Mears, 2013).

The study reported in the paper inclines to call for a verification of the psychosexual behavior of representatives of non-prison environments that are removed from social consciousness, which to a different degree are characterized and expressed by the phenomenon of more or less induced isolation (among military, clergy, athletes, scholars). One of the criteria for the selection of the above-mentioned professions as the potential sources of insight is associated with the criterion of disturbed sense of security, the lack of which is particularly apparent in their case. Information repeated in the media and focusing on an inadequate, pathological and criminal behavior in the area of sexuality of representatives of these professions seems to be sufficient motivation to undertake such research. Another aspect of the problem that is important from a research point of view is related to the approach involving restraining feelings and maintaining narration explored in the article. Some of these professions (military, clergy) naturally fulfill this criterion.

Problems related to the sexual life of prisoners should become subjects of specialist consultations with dedicated specialists (namely, doctors, psychologists, sexologists). Most often, however, prisoners have to cope with these problems alone. Problems with sex life, like problems with mental health, are considered in society, especially in the prison environment, as shameful and as an issue related to personal and intimate life, which prevents people dealing with these problems using professional help.

## References

- Balafoutas, L. Garcia-Gallego, A., Georgantzis, N., Jaber-Lopez, T., Mitrokostas, E. (2020). Rehabilitation and social behavior. Experiments in prison. *Games and Economic Behavior*, 119, 148-171.
- Bartoszewski, J. (2018). *Psychoterapia możliwości. Teoria i praktyka*. Konin: Wydawnictwo PWSZ w Koninie.
- Baumeister, R. F., Leary, M. R. (1995). The need to belong: Desire for interpersonal attachments as a fundamental human motivation. *Psychological Bulletin*, 117, 497-529.
- Bayer, P., Hjalmarsson, R., Pozen, D. (2009). Building criminal capital behind bars: peer effects in juvenile corrections. *The Quarterly Journal of Economics*, 124(1), 105-147.
- Bernstein, A. N., Levinson, A. W., Hobbs, A. R., Lavery, H. J., Samadi, D. B. (2013). Validation of online administration of the sexual health inventory for men. *J Urol*. 189(4), 1456-1461
- Bhuller, M., Dahl, G. B., Løken, K. V., Mogstad, M. (2018). Incarceration Spillovers in Criminal and Family Networks. *NBER Working Paper 24878*.
- Capelleri, J. C., Rosen R. C. (2005). The Sexual Health Inventory for Men (SHIM): A 5-year review of research and clinical experience. *International Journal of Impotence Research*, 17, 307-319.
- Cacioppo, J. T., Berntson, G. G., Larsen, J. T., Poehlman, K. M., Ito, T. A. (2000). *The psychophysiology of emotion*. In R. Lewis, J. M. Haviland-Jones (red.), *The handbook of emotion* (p. 173-191). New York: Guilford Press.
- Chen, M., Shapiro, J. M. (2007). Do harsher prison conditions reduce recidivism? A discontinuity-based approach. *American Law and Economics Review*, 9(1), 1-29.
- Cochran, J. C., Mears, D. P. (2013). Social isolation and inmate behavior: A conceptual framework for theorizing prison visitation and guiding and assessing research. *Journal of Criminal Justice*, 41, 252-261.
- Collins, B. C. (2000). *Emocjonalna niedostępność. Jak rozpoznać chłód emocjonalny, zrozumieć go i unikać w związku*. Gdańsk: GWP.
- Collins, N. L., Feeney, B. C. (2000). A safe haven: Support-seeking and caregiving processes in intimate relationships. *Journal of Personality and Social Psychology*, 78(6), 1053-1073.
- Denham, S. A., Blair, K. A., DeMulder, E., Levitas, J., Sawyer, K. S., Auerbach-Major, S. T., Queenan, T. (2003). Preschoolers' emotional competence: Pathway to social competence? *Child Development*, 74, 238-256.
- Denham, S. A., McKinley, M., Couchoud, E. A., Holt, R. (1990). Emotional and behavioral predictors of peer status in young preschoolers. *Child Development*, 61, 1145- 1152.

- Depko, A. (2010). Fizjologia reakcji seksualnej mężczyzn. In Z. Lew-Starowicz, V. Skrzypulec (eds), *Podstawy seksuologii* (p. 111-121). Warszawa: PZWL.
- Dumond, R. W., Dumond, D. A. (2002). The treatment for sexual assault victims. In C. Hensley (ed.), *Prison Sex, Practice and Policy* (p. 67-88). London: Rienner Publishers.
- Gaes, G. G., Goldberg, A. L. (2004). *Prison Rape: A Critical Review of the Literature*. Washington, District of Columbia: National Institute of Justice.
- Genderau, P., Goggin, C., Cullen, F. T. (1999). *The Effects of Prison Sentences on Recidivism*. Ottawa: Public Works and Government Services Canada.
- Hansen, E. (1968). Niektóre zagadnienia prawne, kryminalistyczne, penitencjarne gwałtów homoseksualnych wśród więźniów. *Archiwum Medycyny Sądowej i Kryminalistyki*, 18(2), 203-207.
- Holtzworth-Munroe, A., Stuart, G. L. (1994). Typologies of male batterers: Three subtypes and the differences among them. *Psychological Bulletin*, 116, 476-497.
- Izdebski, Z. (2012). Zdrowie seksualne mężczyzn. Wybrane zagadnienia. *Seksuologia Polska*, 10, 1-8.
- Izdebski, Z., Ostrowska, A. (2003). *Seks po polsku. Zachowania seksualne jako element stylu życia Polaków*. Warszawa: Muza.
- Jakiel, G. (2010). *Seksualność mężczyzn w okresie andropauzy*. In Z. Lew-Starowicz, V. Skrzypulec (eds), *Podstawy seksuologii*. Warszawa: PZWL.
- Kamiński, M. M. (2006). *Gry więzienne. Tragikomiczny świat polskiego więzienia*. Warszawa: Oficyna Naukowa.
- Lewicka, M., Sulima, M., Wdowiak, A., Bakalczuk, G. (2015). Ocena wybranych aspektów życia seksualnego mężczyzn. Evaluation of selected aspects of sexual life of men. *European Journal of Medical Technologies*, 4(9), 54-60.
- Lewicka, M. et al. (2012). Ocena poziomu kontroli emocji u kobiet leczonych operacyjnie z powodów ginekologicznych. *Psychiatr. Psychol. Klin.*, 12(2), 102-114.
- Liddle, H. A., Diamond, G. (1991c.). Adolescent substance abusers in family therapy: The critical initial phase of treatment. *Family Dynamics of Addiction Quarterly*, 1(1), 55-68.
- Miller, G. E., Chen E., Fok A. K., Walker H., Lim A., Nicholls E. F. et al. (2009). Low early-life social class leaves a biological residue manifested by decreased glucocorticoid and increased proinflammatory signaling. *Proceedings of the National Academy of Sciences of the United States of America*, 106, 14716-14721.
- Obuchowski, K. (1984). Psychologiczne problemy seksuologii. In K. Imieliński (ed.), *Seksuologia społeczna*. Warszawa: PWN.
- Ostrowska, K. (2008). *Psychologia resocjalizacyjna. W kierunku nowej specjalności psychologii*. Warszawa: Fraszka Edukacyjna.
- Pilszyk A. (2007). Obraz psychopatologiczny sprawcy przemocy w rodzinie. *Psychiatria Polska*, 41(6), 827-836.



- Piotrowski, J. M., Ciosek, M. (2016). Izolacja więzienna jako złożona sytuacja trudna. In M. Ciosek, B. Pastwa-Wojciechowska (ed.), *Psychologia penitencjarna*, (p. 429-460). Warszawa: PWN.
- Rouillon, F. (1999). Anxiety with depression: a treatment need. *European Neuropsychopharmacology*, 9 (Suppl. 3), 87-92.
- Sarzała, D. (2013), *Patologiczne zachowania więźniów w kontekście izolacji i resocjalizacji penitencjarnej*. Warszawa: Oficyna Wydawnicza ASPRA-JR.
- Stöver, H. (2016). Sexualität, Gewalt und Homophobie. Folgen der Tabuisierung im Gefängnis. In M. Katzer, H.-J. Voß [eds], *Geschlechtliche, sexuelle und reproduktive Selbstbestimmung. Praxisorientierte Zugänge* (p. 255-266). Gießen: Psychosozial-Verlag.
- Szaszkiewicz, M. (1997). *Tajemnice grypsarki*. Kraków: Wydawnictwo Instytutu Ekspertyz Sądowych.
- WHO. (2002). *European Regional Strategy on Sexual and Reproductive Health*, Copenhagen, World Health Organization Regional Office for Europe.
- Wolff, N., Blitz, C. L., Shi, J., Bachman, R., Siegel, J. A. (2006). Sexual Violence Inside Prisons: Rates of Victimization. *J Urban Health*, 83(5), 835-848.