



Mental Health Problem among Prison Population, Udaipur, Tripura

KEYWORDS

Convicts, Under- trial prisoners, Mental health, Depression, Anxiety and Stress

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ABSTRACT Prisons are detrimental to mental-health. Prison inmates exhibit higher level of stress, depression and anxiety. Not a single study has found in Tripura about the mental health problem of the Jail inmates, both the inmates who are in conviction and under trial inmates. Present study is an attempt to examine whether there is any difference in level of depression, anxiety and stress of convicts with others who are under trials and whether the serving period of imprisonment have any effect on these three variables of mental phenomena of the convicts. 30 convicts of Udaipur District Jail, Tripura were studied along with the same number of under trial prisoners of the same jail. Results revealed that convicts were more depressed and stressed than the under trial inmates but under trial inmates are suffering from anxiety more than that of convicts.

According to the National Crime Records Bureau (2013), the prison inmates in India comprise of 67.6% under trials, 31.5% convicts and remaining 0.9% as civil prisoners and detainees. The state having highest number of inmates is in Uttar Pradesh (83,518) followed by Madhya Pradesh (34,708), Bihar (31,259), Punjab (27,449) and Maharashtra (27,400) at the end of the year 2013. Murder alone accounted for 60% of the total convicts under IPC crimes in India. 1.8% of convicted 0.9% of under trials and 1.4% of detainee inmates were reported as suffering from mental illness. In Tripura there are 876 male and 25 female prison inmates in the same year. This hilly state has one Central Jail, two numbers of District Jail and eight numbers of Sub-Jails. There is hardly any jail strictly for female prisoners in Tripura.

A prison is a unisex world where every inmate is stigmatized and has to carry on tightly scheduled activities in the company of strangers (Ahuja Ram, 1997). Internally they are forced to adapt with the deprivation of liberty, privileges, emotional security in order to survive in the prisons. Despite countless promises for a better life in prisons by respective institutions, the living condition in many prisons continue to be poor, dehumanizing and in violation of basic human rights standard. There is a cycle of overcrowding, neglect, abandonment, indignity, inhuman treatment, and punishment of persons with mental illness. Researchers show that under trials prisoners are the main reason for overcrowded prisons. The conditions under which prisoners are kept stimulate the prisoners' psychological states.

Mental disorders among prisoners have long been identified and studied in every country including India. National and International researches have repeatedly shown a high prevalence of mental disorders among prisoners than in the general population. Common disorders include substance use disorder, psychotic disorder and psychoneurotic disorder like stress, depression and anxiety. Many of these disorders may be present before admission to prison, and may be further exacerbated by the stress of imprisonment (WHO, 2007). Prisons have high percentage of mentally-ill prisoners. Firstly, mentally-ill persons are more frequently than others involved in crime due to symptoms like impaired judgment, lack of impulse control, suspiciousness,

loss of inhibitions, paranoid ideas, inability to trust others, delusions, and hallucinations and most of them are less smart, so easily caught by police. Secondly, prisoner's living conditions in prison make them more susceptible to psychiatric disorders. Because conditions in prison are not conducive to good mental-health, prisoners with mental-illness are at risk of experiencing deterioration in their mental state (Kumar Vinod and Daria Usha, 2012).

Depression, anxiety and stress are common mental disorders found among prison population. Depression, in psychology, is a mood or emotional state that is marked by feelings of low self-worth or guilt and a reduced ability to enjoy life (Encyclopedia Britannica, 2014). The pains of imprisonment act as a threat which affects all the prison inmates in various ways. For some prisoners the major source of stress would include the loss of contact with family and friends outside the prison and also their lack of personal choice within the prison environment (Tomar Shivani, 2013). The episodes of depression are usually related to the experience of sudden or prolonged stressful events (Gunter, 2004). Further, anxiety arises in response to apparently innocuous situations or is the product of subjective, internal emotional conflicts the causes of which may not be apparent to the person himself (Encyclopedia Britannica, 2015). Under trial prisoners suffer from anxiety because of sudden insecurity about the future, isolation from known environment and shock of imprisonment.

Singleton et al (1998) remains the most comprehensive study of prisoners' mental health, using clinical interviews with a sample of 3,142 prisoners. 7% of male sentenced and 14% of female prisoners in the sample had experienced functional psychosis; 40% of male sentenced and 63% of female sentenced prisoners in the sample had a neurotic disorder (including anxiety or depression). The authors found that 64% of male sentenced prisoners in the sample and 50% of female prisoners suffered from a personality disorder; anti-social personality disorder was the most frequently occurring (49% male sentenced, 31% female) followed by paranoid personality disorder in male sentenced prisoners and borderline personality disorder in female prisoners (both 20%). Rates were invariably higher among remands.

Sapsford (1978) administered a psychometric test battery to 60 prisoners sentenced to life imprisonment. The prisoners formed three groups: (1) reception (newly received), (2) middle (6th year of sentence), and (3) hard core (average sentence served was 14 years). Some matching was attempted but it is not clear the extent to which the procedure was successful. From the results, only three inmates could be described as having failed to cope with their sentence. The only deteriorating effects observed were increases in dependency upon staff for direction and social introversion. In fact, depression and anxiety were lower for in-mates serving longer sentences. In another study Oleski (1977) administered the same scale to 60 male inmates (ages 18 to 26) in a Boston city jail. All were awaiting trial and all had limited prior prison experience. The tests were administered 1 week after admission and again 8 weeks later. Anxiety levels were found to be higher at posttest.

The study by Wormith (1986) consisted of a random sample of 634 male prisoners stratified according to sentence length and time served. Long-term inmates (8 years to life), compared to short-term inmates, demonstrated better adjustment on measures of self-reports of emotions and attitudes (e.g., anger) and institution discipline.

In view of the preceding theoretical discussion, a research need has been envisaged to study the mental phenomena of both the convicted prisoners and the under trial prisoners of Tripura with the following objectives:

To know the level of depression, anxiety and stress among both the prisoners (convicts and under trials) and also to know whether these three mental phenomena of convicted prisoners differ from that of under trial prisoners.

To study whether level of depression, anxiety and stress of the convicted prisoners serving long term detention (more than 2 years), differ from that of the convicted prisoners serving short term detention (less than 2 years).

Materials and Method

A written permission was obtained to carry out the study from the Inspector General, Prisons, Tripura and the Superintendent, District Jail, Udaipur, Tripura.

Sample:

A sample of 30 male convicted prisoners and 30 male under trial prisoners of Udaipur District Jail, Tripura was included in this study on purposive sampling basis. Their crimes were of different kinds such as murder, rape, murder with rape, theft as per IPC. Their age ranged from 18 years to 65 years. In the sample of convicted prisoners there are two types. One are those (N=12) who are staying more than 2 years and others (N=18) having less than 2 years of imprisonment.

Tools:

Depression Anxiety Stress Scales (DASS): DASS is made up of 42 self report items, each reflecting a negative emotional symptom. Each of these is rated on a four-point Likert scale of frequency or severity of the participants' experiences over the last week with the intention of emphasizing states over traits. The reliability scores of the scales in terms Cronbach's alpha scores rate the Depression scale at 0.91, the Anxiety scale at 0.84 and the Stress scale at 0.90 in the normative sample. Furthermore, depression, anxiety and stress were categorized in five levels by using cut off score viz., normal, mild, moderate, severe and extremely severe. DASS were developed by the researchers at the

University of New South Wales (Australia). The Bengali version of the scale, adapted by the authors, was used. The reliability & validity co-efficient of the local adaptation was .80 and .76 respectively.

Hypothesis:

The following six hypotheses are formulated.

- 1) The level of depression of convicts does not differ significantly from under trials prisoners.
- 2) The level of anxiety of convicts does not differ significantly from under trials prisoners.
- 3) The level of stress of convicts does not differ significantly from under trials prisoners.
- 4) Convicts serving long term detention do not differ significantly in the level of depression from the convicts serving short term detention.
- 5) Convicts serving long term detention do not differ significantly in the level of anxiety from the convicts serving short term detention.
- 6) Convicts serving long term detention do not differ significantly in the level of stress from the convicts serving short term detention.

Results

The obtained data were by computing percentage and relevant statistics with the help of SPSS package. The results are given in the following Tables 1 to 5. The personal information was gathered from convicts only. From the Table-1, it is seen that the convicted prisoners' age ranges from 19 to above 50 years where maximum numbers (50%) of the sample belongs to the age group of 26 to 40 years. It is evident that majority (30%) of the convicted prisoners are literate. 5/30 have Higher Secondary qualification. The said Table-1 also showing that 50% of the convicts were murderer where as 26.7% was convicted due to rape.

Some of personal views of both the prisoners about their life and living were collected. It reveals that most of them have guilt feelings due to their committed crime. But surprisingly there are some prisoners who either have any feeling of guilt or are they ashamed of their past behavior. Some of them are not happy with the judgment and requested the researcher of the present study to re-open their case if possible. Some of the prisoners are worried about their family members and there are also some who are worried whether their family members would accept them after their release from jail as previous manner. Under trial prisoners were anxious about their final judgment.

Table-1: Personal information of the convicted jail inmates

Parameter	Categories	No. of the Respondents (%) N= 30
Age range of the convicts	19-25 years	07(23.3%)
	26-40 years	15 (50%)
	41-50 years	03 (10%)
	Above 50 yrs	05(16.7%)
Educational qualification	Literate	09 (30%)
	Primary	07(23.3%)

	Senior Basic	04(13.3%)
	High school	05(16.7%)
	H.S.	05(16.7%)
Crime committed	Murder	12(40%)
	Rape	08 (26.7%)
	Murder with rape	03 (10%)
	Theft	07 (23.3%)

The Table-2 shows the Mean, SD & t-value of score of depression, anxiety and stress. All the mean of the variables shows that there is a prevalence of depression, anxiety and stress among the prisoners. The result also infers that convicts are significantly depressed ($p < .05$) and stressed ($p < .01$) than the under trial prisoners of the same jail. But in respect of anxiety disorder, under trial prisoners ($p < .01$) are significantly anxious than that of the convicts.

Table-2: Mean, SD & t- value of depression, anxiety and stress scores of convicts and under trial prisoners

Variables	Convicts (N=30)		Under trials (N=30)		df	t-value
	Mean	SD	Mean	SD		
Depression	20.27	7.12	14.2	10.31	58	2.64*
Anxiety	12.1	4.33	17.76	3.62	58	5.44**
Stress	22.87	5.42	17.53	3.07	58	4.68**

* $p < .05$, ** $p < .01$

Besides, the sample of convicts was divided in to 2 groups on the basis of their serving time in the Jail. Chi square value was calculated between depression, anxiety and stress score of 12 convicts (40%) who have served more than 2 years of imprisonment and 18 (60%) who have served 2 years or less than 2 years of imprisonment (see the Table-3, Table-4 and the Table-5). Level of depression, anxiety and stress was studied in 5 categories as DAS Scale permits- normal, mild, moderate, severe and extremely severe. The Chi- square in depression and stress score was significant at .05 & .01 levels respectively, which indicates that convicts serving 2 years or less than 2 years of imprisonment are significantly depressed and stressed than the convicts serving more than 2 years imprisonment. But the Chi- square between the anxiety levels remains insignificant which indicates that the convicts serving 2 years or less than 2 years of imprisonment are not significantly different from that of the convicts serving more than 2 years of imprisonment . Findings of the study suggest that out of the entire six hypotheses taken for the study five hypotheses are rejected and the one is accepted. The depression and stress of convicts in Tripura are much higher than the under trial prisoners but the anxiety levels are much higher among under trial inmates than convicts. Further, the study showed that depression and stress of convicts serving 2 or less than 2 years of imprisonment are much higher than the convicts serving more than 2 years of imprisonment.

Table-3: Chi-square value between the depression score of convicts serving 2 years or less than 2 years of imprisonment and convicts serving more than 2 years of imprisonment.

Depression	More than 2 years (N=12)	2 years or less (N=18)	Total (N=30)	χ^2	Significant level
Normal	1	0	1		
Mild	5	1	6		
Moderate	6	2	8	20.28	at .01 level
Severe	0	9	9		
Extremely Severe	0	6	6		

Table-4: Chi-square value between the anxiety score of convicts serving 2 years or less than 2 years of imprisonment and convicts serving more than 2 years of imprisonment.

Anxiety	More than 2 years (N=12)	2 years or less (N=18)	Total(N=30)	χ^2	Significant level
Normal	3	1	4		
Mild	1	5	6		
Moderate	6	7	13	4.524	Insignificant
Severe	1	4	5		
Extremely Severe	1	1	2		

Table-5: Chi-square value between the stress score of convicts serving 2 years or less than 2 years of imprisonment and convicts serving more than 2 years of imprisonment.

Stress	More than 2 years (N=12)	2 years or less (N=18)	Total(N=30)	χ^2	Significant level
Normal	0	0	0		
Mild	8	0	8		
Moderate	4	10	14	15.61	at .01 level
Severe	0	7	7		
Extremely Severe	0	1	1		

Discussion

This was the first ever study undertaken in Tripura to determine the prevalence rate of mental disorders amongst prisoners. Findings corroborate with the previous findings, where it was repeatedly found that prison inmates have a much higher prevalence of mental health problems (Sinha Sudhinta, 2010; Naidoo, S. and Mkize, DL., 2012). The present study suggests that depression and stress is higher among convicted prisoners than under trial inmates. But anxiety disorder is higher among under trial prisoners than convicts. The current findings get support from the study of M. O. Emmanuel where the researcher showed that the prevalence of depression and anxiety among awaiting trial inmates were 30.1% and 18.4% respectively. For convicted inmates, prevalence rates were 35.0% and 18.3% respectively. The finding of the present study is also consistent

with the previous study of Sharma Neelu et. al, 2014; Oleski, 1977, where they reported that the most common psychiatric disorder among under trial inmates group was anxiety disorder. Furthermore, when privacy and adequate personal space are denied to male inmates, they become particularly stressed (Picken J. (2012). This stress creates an increase in aggression, both physically and verbally, as a way of coping. This style of coping is then adopted in order to emphasise their dominance to other inmates (Clements, 1979). In the present study higher prevalence of stress and depression among convicts may be related to their current imprisonment. On the other hand, it is also true that whether parental stress and depression were related to the inmates, since no prior evaluation of mental health was available before their imprisonment (Ahmad Afijjal et.al, 2014).

The present study suggests that stress and depression is higher among the convicts serving short time in the jail rather than the convicts serving long time of their imprisonment. Long term served prisoners have learned to cope with the prison environment effectively with the time than the short term served prisoners. This is the space where the most attention and care is needed as it is the initial adjustment phases that are important in assessing the impact of incarceration (Bonta James and Gendreau Paul, 1990). This finding gets its support from the study of Sapsford, 1978.

Conclusion:

The prison inmates are a high- risk group for depression, anxiety and stress. Mal-adaptation with the newly restricted imprisonment is characterized by depression, anxiety and stress. The psychological effect of imprisonment may vary from individual to individual and with the course of time. At the very least, prison is painful and the imprisoned persons suffer from the mental health problems. The mental health issues of prisoners should be given due consideration. The results suggest that the prisoners' need for mental health problems should be properly addressed and special attention should be paid so that the prisoners are adequately prepared for resettlement in the society. Because a great majority of prisoners will at some point return to the community and the causes of reoffending can be minimized. As the social support system positively influences mental health, a lot can be performed for these prisoners through professional support.

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