

## Lived Experiences of Male Prisoners at Morena, India

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### Abstract

**Background:** According to the world index, global crime index stands at appalling 45.4% and there is no near respite at the moment. The global dependency on the current police force is 300 per 1 lakh population. In India, the dependency on police stands at 5%; since inmates are members of the society in which they reside and the influences that shape their lives inside their cells have a ripple effect outside of prison walls, understanding the living conditions of prisoners is crucial to improving their experiences.

**Objective:** The aim of current study was to know the scope of nursing in understanding the lived experiences among prisoners. **Design:** a qualitative phenomenology method with an explorative approach based on “Holistic Health Model” was carried out, **Setting:** district prison of Morena, Madhya Pradesh. **Participants:** 30 prisoners from section ‘A’ of the prison. **Methods:** in-depth interview was conducted which included 30 prisoners, in August 2023. Data was analyzed using Colaizzi’s (‘seven step method’) of interpretation. **Results:** The findings unveiled that there were four themes social factor, physical wellbeing, family support, finance and eight sub themes, they are desolate, loneliness, food, environment, emotional mess, homesick, financial loss and dereliction respectively. This study gives an insight of male prisoners and their lived experiences. **Conclusion:** The findings suggested that the male inmates are in need of an interventional implication to improve their experiences in prison to make it more appealing. A discussion is required with jail authorities to see how the needs of the prisoners are met more holistic in nature.

**Key words:** Qualitative; Phenomenology; Themes & sub-themes; Colaizzi; Prisoners

## 1. Introduction

In this world, there are many values, cultures perceived behaviours and practiced perceptions, but, nothing fosters or unifies other than suffering. Clemmer believed that in a prison setting, the principles which codified as the "inmate code" provided behavioural guidelines that united inmates and encouraged hostility towards both prison staff and the prison system as a whole (*DeRosia, 1998*). Crime has serious costs and repercussions for the victim, the economy, society at large, the criminal, and his or her family; prisons serve a crucial role in combating crime and encouraging offenders' rehabilitation, which lowers the likelihood that they would commit crimes again (*Hawley et al., 2017*). It is important to make sure that time spent in prison is used to address the key factors that influence a prisoner's chances of returning to crime, such as education, employment status, drug and alcohol misuse, mental and physical health, attitudes and self-control, institutionalisation and life skills, housing, financial support and debt, and family networks. A prison sentence alone may not be sufficient to prevent re-offending (*Braggins, 2002*).

As of December 2022, the National Crime Records Bureau's most recent statistics shows that jail capacity in India was 131%, a 1% increase from 2021, there were 573,220 prisoners in India overall in 2022; among them over three-quarters of the prisoners are under trials, which is also represents the slow process of justice; chronic overpopulation in prisons, which not only overburdens the jail administration but also results in inhumane circumstances within (*Dave et al., 2023*).

## 2. Aims and objectives

- The aim of current study was to know the scope of nursing in understanding the lived experiences among prisoners

## 3. Methods

### 3.1. Study Design

A qualitative phenomenology method with an explorative approach based on holistic health care model was carried out. The concept of the "Holistic Health Model" revolves around the idea that health and wellness are determined by a complex interplay of physical, mental, emotional, social, and spiritual factors that may affect the prisoners.

### 3.2. Study Setting

This study was carried out in district prison of Morena, Madhya Pradesh. A letter seeking permission for the study was written to jail superintendent and same was granted.

### 3.3. *Sample*

Purposive sampling was used to select participants. This ensured that participants were knowledgeable, articulate and willing to give rich, descriptive information about the topic (*Polit & Beck, 2006*). The participants were required to meet the inclusion criteria; male prisoners of district Morena prison, MP, male prisoners who will give consent to participate in the study, male prisoners who are present at the time of data collection, male prisoners who could understand Hindi and male prisoners who have speech and hearing impairment were excluded from the study.

The selections of male prisoners were called upon the notice of recruitment into the study. Interested participants were given a consent form and information leaflet that explained all aspects of the study. Those wishing to participate returned a signed consent form. The pilot sample size of the study was 30 participants, i.e. (N=30) male prisoners.

### 3.4. *Ethical considerations*

The study followed the principles outlined by 'schedule Y of Drugs and Cosmetic Act and ICH-GCP' and its later amendments and was approved by the Ethical Guidelines for Biomedical Research on Human Participants by ICMR. Written information about the study was given to the participating male prisoners and also a written consent was obtained via informed consent and primary investigator of the study maintained the anonymity of the male prisoners along with the confidentiality of data throughout the study.

### 3.5. *Data collection*

Data was collected using in-depth interview which included open ended questionnaire and demographic proforma comprised of 7 items they are age, education, occupation, type of family, monthly income, duration of incarceration, and type of crime.

An in-depth interview process will be utilized using predetermined open ended questions, which keep the interviewee focused yet still allowed clarification of feelings and probing of issues raised. Interviews will be recorded and verbatim will be transcribed, and they will be then subsequently printed for further manual analysis. The prison was divided into 4 sections A, B, C and D respectively which are separated internally vigilantly, for pilot study only section A was selected

### 3.6. *Data analysis*

The data was analyzed using the thematic analysis (Colaizzi, seven-step method) to investigate the phenomena of interest in this phenomenological qualitative research study because it identifies the phenomenon as it is experienced. The seven steps of Colaizzi's included getting familiar with the data which included read and re-read and after familiar with the data, then took notes on the initial ideas, generating initial codes, searching the themes, further reviewing themes, defining and naming the themes, producing the report, thematic interpretation and finally consolidating with the holistic health care model

## 4. Results

### 4.1. *participants characteristics*

Age n=9(30%) were aged below 30, n=11(36.7%) were aged between 31 – 50, n=10(33.3%) were aged between 51 – 70 and none were found to be aged above 70. In marital status, n=6(20%) were single, n=24 (80%) were married, none of the samples were divorced, separated, spouse deceased, and live in relationship. In education majority of the samples were graduates and above i.e. n=16(53.3%), n=4(13.3%) were 12<sup>th</sup> passed and 5<sup>th</sup> passed, n=5(16.7%) were 10<sup>th</sup> passed, n=1(3.3%). In nativity majority of the samples n=14(46.7%) were from urban and rural areas, n=2(6.7%) were from semi urban area. Under type of family n=25(83.3%) were living in joint family and n=5(16.7%) were living as nuclear family. Under previous occupation n=14(46.7%) were government employees, n=4(13.3%) were agriculturist and similar were unemployed, n=3(10%) were self employed and n=5(16.7%) were privately employed. In monthly income n=15(50%) were having income above 30000, n=4(13.3%) were with Income below 5000, Income between 5000 – 15000 and income between 15000 – 30000 respectively, further n=3(10%) were having no income. Under previous history of imprisonment n=26(86.7%) were having no imprisonment and n=4(13.3%) were having history of previous imprisonment. In duration of previous imprisonment n=26(86.6%) were having no previous duration of imprisonment and under less than 1 year and 1 to 3 years it was found that n=2(6.7%) and further, none under 3 to 5 years & Above 5 years. under history of any physical disease n=29(96.7%) had no history and n=1(3.3%) responded yes for physical disease. Under history of psychological disease/issue n=29(96.7%) responded as no and n=1(3.3) responded yes for psychological disease/issue. under type of crime property crime were n=24(80%), n=0(0%) were in cyber crime, crime against women, crime against children, murder or grievous hurt, kidnapping / abduction and under other (total 6) a.420 (fraud) n= 4(13.3%) & b. cheque bounce n=2(6.7%) (Table 1)

**Table 1**

*Socio Demographic Data of Male Inmates in district prison of Morena, Madhya Pradesh*

**N=30**

Demographics		Frequency	Percent	df	Chi-square
Age in Years	Below 30	9	30.0	3	0.809
	31-50	11	36.7		
	51-70	10	33.3		
	Above 70	0	0		
Marital Status	Single	6	20.0	5	0.751
	Married	24	80.0		
	Divorced	0	0		
	Separated	0	0		
	Spouse Deceased	0	0		
	Live in relationship	0	0		
Education	Illiterate	1	3.3	4	0.168
	<sup>th</sup> 5 pass	4	13.3		
	<sup>th</sup> 10 pass	5	16.7		
	<sup>th</sup> 12 pass	4	13.3		
	Graduate and above	16	53.3		

Nativity	Urban	14	46.7	2	0.775
	Semi Urban	2	6.7		
	Rural	14	46.7		
Type of Family	Nuclear	5	16.7	1	0.741
	Joint	25	83.3		
Previous Occupation	Unemployed	4	13.3	5	0.05*
	Government Employee	14	46.7		
	Agriculture	4	13.3		
	Self Employed	3	10.0		
	Private Employed	5	16.7		
Monthly Income	No Income	3	10.0	4	0.268
	Income below 5000	4	13.3		
	Income 5000 - 15000	4	13.3		
	Income 15000 - 30000	4	13.3		
	Above 30000	15	50.0		
Previous history of Imprisonment	Yes	4	13.3	1	0.673
	No	26	86.7		
Duration of previous Imprisonment	No duration	26	86.6	4	0.101
	Less than 1 year	2	6.7		
	1 to 3 years	2	6.7		
	3 to 5 years	0	0		
	Above 5 years	0	0		
History of any physical disease	Yes	1	3.3	1	0.001*
	No	29	96.7		
History of Psychological Disease/Issue	Yes	1	3.3	1	0.001*
	No	29	96.7		
Type of Crime	Property Crime	24	80.0	1	0.157
	Cyber Crime	0	0		
	Crime against women	0	0		
	Crime against children	0	0		
	Murder or Grievous hurt	0	0		
	Kidnapping /	0	0		

	abduction				
	Other ( total 6 )	-	-		
	a.420 (fraud)	4	13.3		
	b. Cheque bounce	2	6.7		

#### 4.2. Themes and subthemes

The findings unveiled that there were four themes social factor, physical wellbeing, family support, finance and eight sub themes, they are desolate, loneliness, food, environment, emotional mess, homesick, financial loss and dereliction respectively.

Sl.No.	THEMES	SUBTHEMES
1	Social Factor	<ul style="list-style-type: none"> <li>• Desolate</li> <li>• Loneliness</li> </ul>
2	Physical well being	<ul style="list-style-type: none"> <li>• Food</li> <li>• Environment</li> </ul>
3	Family support	<ul style="list-style-type: none"> <li>• Emotional mess</li> <li>• Homesick</li> </ul>
4	Finance	<ul style="list-style-type: none"> <li>• Financial loss</li> <li>• Dereliction</li> </ul>

## 5. Discussion

The researcher found that there was no documented data available regarding the male inmates lived experiences. This phenomenological study explored effects of prison stay. The findings of this study revealed that there were four themes social factor, physical wellbeing, family support, finance and eight sub themes; they are desolate, loneliness, food, environment, emotional mess, homesick, financial loss and dereliction. Similar findings were evident in a study to find the lived experiences of bereavement in prison due to the loss of a significant person through death, presents imprisoned persons with a unique challenge; a qualitative practitioner-research study that focuses on the grief experience as lived and articulated by one client in his own words, draws from the author's counselling work with male inmates of a Scottish jail who have experienced bereavement; the results were discussed as the extremely upsetting and depressing experience of losing a loved one while incarcerated; further, it depicts how the strong socio-cultural rules of the jail environment may severely disenfranchise prisoners' grief and shows how this can have a detrimental effect on their capacity for coping; the study concludes the importance of creation of support networks to guarantee bereavement care more suited to the need of those incarcerated (*Masterton, 2014*).

In the current study researcher discusses majority results they are represented as follows i.e. under age 31 - 50 i.e. n=11(36.7%), in marital status n=24(80%) were married, under education n=16 (53.3%) were graduate and above, in nativity n=14 (46.7%) were urban and rural equally, under type of family n=25(83.3%) were living in joint family, under previous occupation n=14(46.7%) were working in government job, in monthly income n=15(50%) were having above 30 thousand rupees, the researcher found n=26(86.6%) did not have previous imprisonment history, under history of physical & physiological diseases n=1(3.3%) responded as yes and n=29(96.7%) as no, under type of crime n=24(80%) had committed property related crime, n=4(13.3%) had fraud/420 cases and n=2(6.7%) had cheque bounce history.

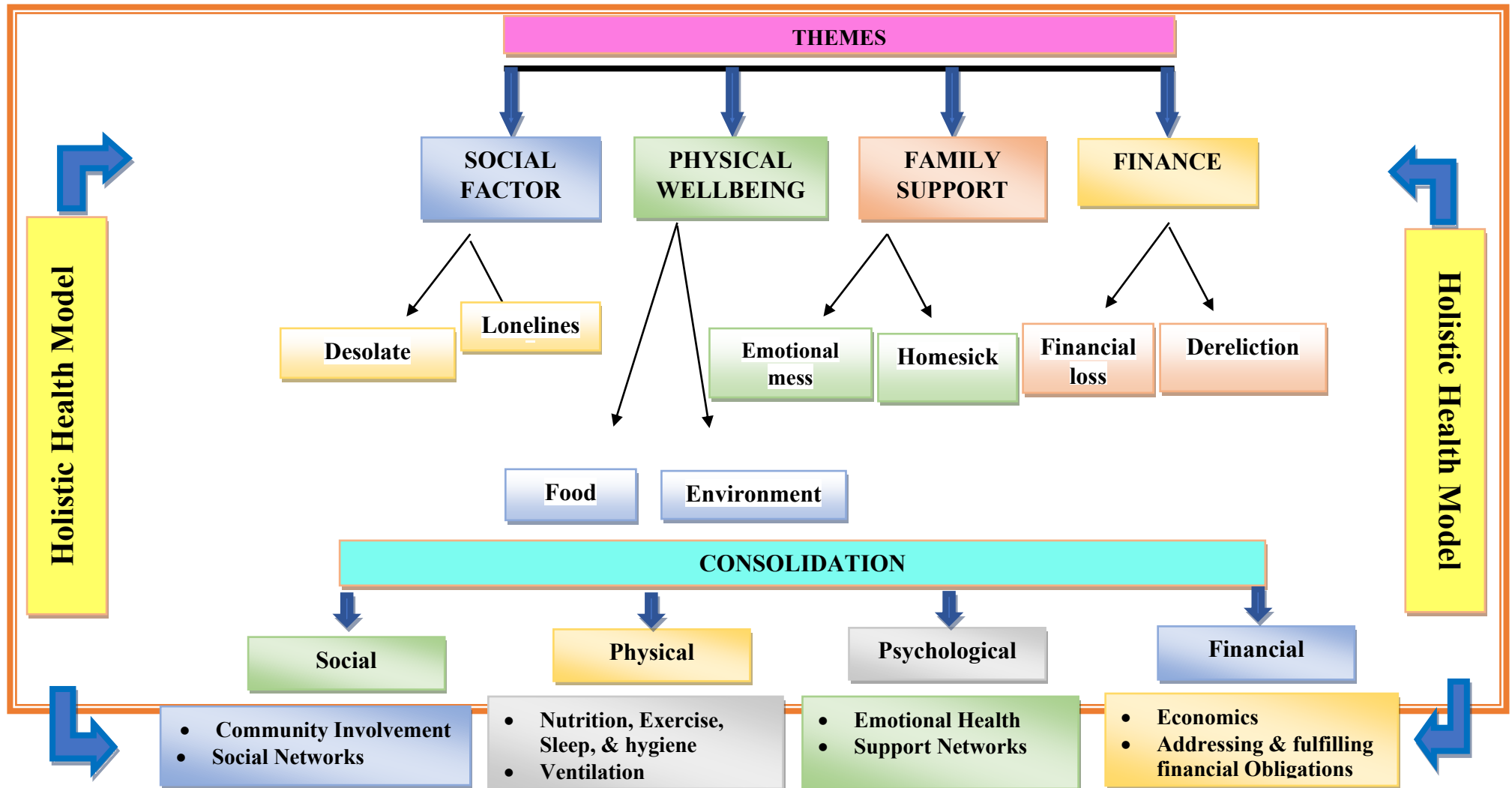
Consistent with current research (*Ugelvik, 2014*) said negotiations that never end regarding prisoners status within the institution and my rightful place in the ongoing conflict between officers and (different groups of) convicts. As a researcher, visiting a prison is both exhilarating and terrifying; battling to blend in and eventually adjusting to the field while being aware of any potential threat they face to in prison. According to (*Becker, 2017*) striving to uphold or alter the current power and authority dynamics in organised conflict, in a significant class of cases, accusations surface when the research really considers the viewpoint of the one group in a hierarchical relationship

The researcher considered module based on “*Holistic Health Model*” (Rogers, 2008) which advocated The concept of the holistic health model revolves around the idea that health and wellness are determined by a complex interplay of physical, mental, emotional, social, and spiritual factors. Unlike the traditional biomedical model, which focuses primarily on treating symptoms and diseases through medical interventions, the holistic health model considers the whole person and their environment. (*Figure1*)



Figure No 1

Thematic Representation of themes of lived experiences of male inmates in consolidation with aspects of "Holistic Health Model"



*Figure No 1* shows thematic representation of the lived experiences of male inmates in district prison of Morena, Madhya Pradesh, it is representing that there are 4 themes i.e. social factor, physical wellbeing, family support and finance. There are 8 sub themes i.e. desolate, loneliness, food, environment, emotional mess, homesick, financial loss and dereliction.

Key aspects of the holistic health model include:

- a. Social: According to holistic health model social well-being means having good relationships, being active in the community, feeling supported, accessing needed resources, and fulfilling social roles, which boosts overall health happiness and in the current research it is consolidated by the researcher as social factor – theme and desolate and loneliness – subthemes.
  - Social factor: According to researcher it refers to the emotional impact and psychological pain caused by separation from loved ones, the longing for meaningful interactions, and the influence of isolation on one's mental state. These factors highlight the importance of relationships, social connections, and the presence of family and friends in maintaining emotional well-being in current study
  - Desolate: refers to the deep sorrow and emptiness felt due to prolonged separation from loved ones and the absence of meaningful interactions, leading to a haunting sense of loss and hopelessness.
  - Loneliness: describes the profound sense of isolation and longing for companionship, intensified by the quiet and monotonous environment, causing emotional pain and a feeling of being forgotten.
  
- b. Physical: According to holistic health model physical well-being refers to maintaining a healthy body through regular exercise, balanced nutrition, adequate sleep, hygiene and proper ventilation contributing to overall health and vitality happiness and in the current research it is consolidated by the researcher as physical wellbeing as theme and food and environment as subthemes.
  - Physical well-being defined as according to researcher it involves having nutritious and enjoyable food, clean and well-lit living spaces, fresh air, and a healthy environment free from confinement and despair in current study.
  - Food: Prison food is bland and unsatisfying, making inmates miss home-cooked meals.
  - Environment: The environment is dimly lit, unclean, stuffy, and confining, creating a sense of hopelessness and despair.
  
- c. Psychological: According to holistic health model psychological well-being refers to emotional balance, and support networks which includes personal and professional goals. In the current research it is consolidated by the researcher as family support – theme and emotional mess and homesick as subthemes.
  - Family support defined as according to researcher refers to emotional and practical assistance from loved ones, including messages, packages, and

visits, providing comfort and connection, reminding those in prison that they are not alone and always welcomed home in current study.

- Emotional mess refers to the turmoil and distress caused by missing significant family moments, the weakening of family connections, and the inability to fulfill roles as parents, partners, and family members.
- Homesick describes the deep longing and sadness for home, family, and familiar experiences, intensified by the physical separation and the inability to participate in daily life and special occasions with loved ones.

d. Financial: in the holistic health model refers to having stable economics, which addresses the financial obligations of the person effectively. In the current research it is consolidated by the researcher finance as theme and financial loss and dereliction as subthemes.

- Finance: Management of money, including earning, spending, saving, and accessing funds, which become difficult in jail due to job loss and limited income.
- Financial Loss: The depletion of money due to job loss, spending savings, and covering legal costs, leading to economic hardship.
- Dereliction: Abandonment of financial responsibilities due to inability to maintain income, requiring external support for basic needs.

The researcher has in this study recommends that the study may be replicated with a larger sample. Another consideration would be to conduct a interventional comparative study with control group with a view to compare the practice on specific skills among prisoners. Further, a follow up of the study can be conducted to evaluate the long term effect of the a planned participatory training program and to find out the necessity of the reinforcement. Moreover, a study can be conducted to assess the actual benefits of different approaches of the education programs that can improve quality of life among prisoners

## 6. Study limitations

The present study was undertaken in one site; a small study population was selected there were limited number of prisoners in 'A' section of the prison, they were explored for lived experiences in prison. Further, "*Holistic Health Model*" was used to consolidate the themes and subthemes. The prisoners were selected by purposive sampling and as per their willingness to participate in the study; findings cannot be generalized and limited only to the population under study. Participant's responses would be biased including to exaggeration and selective experience and observation.

## 7. Conclusion

Overall, the holistic health model promotes a broader perspective on health care that aims to enhance overall quality of life, promote resilience, and empower individuals to take an active role in their health and wellness. It continues to evolve as new research and practices emerge, reflecting a growing recognition of the interconnected nature of human health. Phenomenological study explored effects of prison stay; four themes social factor, physical wellbeing, family support, finance and eight sub themes; they are desolate, loneliness, food, environment, emotional mess, homesick, financial loss and dereliction gave positive understanding to the researcher to report to the authorities that these aspects can be looked into to be a serving point in improving the experiences in the jail. The concept of practice first and replicate after to explore and learning by doing methods would enable the prisoners to get transformation, jail as a support system to the health would be delivered the best quality of life.

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## Conflict of interest statement

‘Declarations of interest: The Author(s) declare(s) that there is no conflict of interest’

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## References

1. Becker. (2017). *Becker: Whose side are we on?* - Google Scholar. Routledge. scholar.google.com
2. Braggins, J. (2002). *Wings of Learning: The role of the prison officer in supporting prisoner education* | Centre for Crime and Justice Studies. www.crimeandjustice.org.uk
3. Dave, A., Paliath, S., & Scroll, L. (2023, December 15). *Despite campaign, India saw number of prisoners increase in 2022*. Scroll.In. scroll.in
4. DeRosia, V. R. (1998). *Living Inside Prison Walls: Adjustment Behavior*. Bloomsbury Publishing USA.
5. Hawley, J., Murphy, & Manuel. (2017, December 4). *Wayback Machine*. PRISON EDUCATION AND TRAINING IN EUROPE. web.archive.org
6. Masterton, J. (2014). A confined encounter: The lived experience of bereavement in prison. *Bereavement Care*, 33(2), 56–62.

7. Polit, D. F., & Beck, C. T. (2006). Essentials of nursing research: Methods, appraisal, and utilization Denise F Polit Essentials of nursing research: methods, appraisal, and utilization , Cheryl Tatano Beck Lipincott Williams and Wilkins 554 £24.95 0781749727 0781749727 [Formula: see text]. *Nurse Researcher*, 13(4), 91-92. 1
8. Rogers. (2008). *Roger's Client Centered Therapy*. IGNOU. egyankosh.ac.in
9. Ugelvik, T. (2014). Prison Ethnography as Lived Experience: Notes From the Diaries of a Beginner Let Loose in Oslo Prison. *Qualitative Inquiry*, 20(4), 471-480.