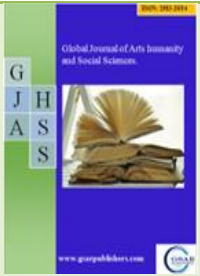
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Behind Bars and Beyond: The Silent Struggle of Inmates with Mental Health in Nigeria (A Phenomenological Study of Federal Prison - Oko, Benin City - Nigeria)

BY

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Abstract

One of the three pillars of the Criminal Justice System in Nigeria is the Nigerian Correctional Service (NCS). Incarceration of offenders is one of the ways of managing crimes in society. In the process of incarceration, the demands of adjusting to the prison system affect the mental well-being of inmates. The study explored the mental health encounter of inmates serving at the Federal Prison-Okoko, Benin City, Nigeria. An Interpretative phenomenological approach (IPA) led the way in the analysis of the qualitative data collected from 10 inmates. The researchers engaged the use of Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) and the International Classification of Diseases 11th Revision (ICD-11) mental disorder symptomologies to establish the participants' 'narration of their experiences. A feeling of hopelessness and sadness that has affected their mental state of mind were reported by participants who called for the establishment of mental health treatment centers across the country.

KeyWords: Federal Prison Oko-Benin City, DSM-5, ICD-11, Mental health, Criminal Justice System.

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Introduction

Incarceration trigger and worsen the symptoms of mental illness even after someone leaves the prison gates. Research conducted by (Grassi, et, al, 2018) showed that incarceration is linked to mood disorders including major depressive and bipolar disorders.

The prison environment can be inherently damaging to mental health by removing people from society and eliminating meaning and purpose from their lives (Goomany & Dickinson, 2015). Additionally, the appalling conditions common in prisons and jails such as overcrowding, solitary confinement, and routine exposure to violence can have further negative effects (Haney, 2017). Researchers have even theorized that incarceration can lead to "Post-Incarceration Syndrome," a syndrome like PTSD, meaning that even after serving their official sentences, many people continue to suffer the mental effects (Grassi, et al, 2018).

Mental Health Among Prisoners in Nigeria

Massoglia and Remster (2019) posit that mental health disorders are a global public health problem with rates among prison inmates increasing at a geometrical progression. Echoing this global public health issue, (Bovell, 2023), observed that the prison environment is almost diabolically conceived to force the offender to experience the pangs of what many psychiatrists describe as mental illnesses. Studies conducted outside of Nigeria also showed that inmates who are on life sentences tend to suffer from severe mental chaos when juxtaposed with other inmates such as awaiting trial inmates (Williams, et al, 2020, Ramizani, et al, 2020).



Enablers of Mental Health Conditions Among Prisoners

1. Separation of inmates from their family

Can lead to mental health conditions. A study by the University of Georgia in 2018 that analyzed the relationship between prison conditions and mental health in 214 state prisons found that people incarcerated more than 50 miles from home were more likely to experience depression. This is not surprising as psychologists have long noted that people with social and family support systems tend to have better psychological well-being than those who are not (Goomany & Dickinson, 2015).

Another research conducted in 2015 on the impact of prisons on mental health, separation from family and friends emerged as a major stressor for incarcerated people (Goomany & Dickinson, 2015). It was also associated with psychological distress. In fact, many prisoners described this separation as the most challenging aspect of their incarceration. (Goomany and Dickinson, 2015) who authored the review, found that even when incarcerated people receive visits from family members, the prison environment makes it harder for them to connect. Prisons are built and operate around the goal of security, and these “regulations and security measures inevitably impact on the relationships between prisoners, their families, and children” (Goomany & Dickinson, 2015).

2. Monotonous Routine and Lack of Purpose

The state of incarcerated inmates in Nigerian prison has created loss of freedom and lack of purpose. A study conducted by (Goomany and Dickinson, 2015) observed that incarcerated people have virtually no control over their day-to-day lives, including when they wake up, what they eat, what their jobs are, and when they have access to recreation. The study concluded that when inmates are denied their freedom, it could lead to a feeling of dependence and helplessness (Goomany & Dickinson, 2015).

Similarly, incarceration is often characterized by boredom, monotony, and lack of stimulation (Nakic et al, 2022). Many incarcerated people have limited access to education, job training, and other programs that can fill their time and become a meaningful part of their lives. In a 2003 study of incarcerated people in England, participants reported that lack of activity and mental stimulation leads to extreme stress, anger, and frustration (Jo, et al, 2003). Some reported using unhealthy coping mechanisms to manage boredom, including substance abuse. The 2018 University of Georgia study mentioned earlier also found that people in prisons with limited access to work assignments experienced higher levels of depression. Once again, this fits with psychological research that shows meaninglessness, and a lack of purpose can lead to symptoms of anxiety, depression, and hopelessness.

3. Cruel Prison Conditions and an uncondusive Environment.

Experiencing incarceration is associated with depression and bipolar disorder (Ollife, et al, 2018). Additionally, placing individuals in solitary confinement, particularly if they have severe

mental illness, can be very detrimental psychologically (Nakic, et al 2022). The prison environment can be inherently damaging to mental health due to the consequent disconnection from family, society, and social support. The reality is that poor conditions in prisons and jails cause significant additional suffering and trauma. As the World Health Organization explained,

“There are factors in many prisons that have negative effects on mental health, including overcrowding, various forms of violence, enforced solitude or conversely, lack of privacy, lack of meaningful activity, isolation from social networks, insecurity about future prospects, and inadequate health services, especially mental health services.” (World Health Organization, n.d.). This list of mentally damaging conditions accurately describes most Nigerian Prisons and Correctional Centers

4. Overcrowding

Many jails and prisons throughout the country are overcrowded, which makes the inherently negative prison environment even worse. Overcrowding often means more time in a cell, less privacy, less access to mental and physical healthcare, and fewer opportunities to participate in healthy lifestyles and work assignments (Goomany and Dickinson, 2015). The Prison of Study, the Federal Prison -Oko- Benin-City was originally built to house about 600 inmates. However, the correctional center now houses about 2,000 inmates when this phenomenological study was conducted. It is no wonder that a 2005 study found that overcrowding is highly correlated with prison suicide (Meredith, et al, 2005). The 2018 study from the University of Georgia similarly found that overcrowding and punitiveness are correlated with depression and hostility. The researchers noted that punitive environments “likely set inmates on edge, making them overly hostile or even depressed.”

Study Methodology

Nigerian Correctional Service (NCS) is the third arm of Criminal Justice system in Nigeria. Oko Prison which is part of the Nigerian Correctional Service is in Benin City, Edo State, South-South of Nigeria. It has a capacity for Six Hundred Inmates although about 2,000 inmates were on ground as at the time of this study. Data presented in this study were obtained from the Federal Prison-Oko-Benin City. The phenomenological approach was used in this study (Van Manen, 2017; Smith, et al, 2009). This approach encourages researchers to uncover the lived experiences of the participants using qualitative methodology (Van Manen, 2017). Thus, a phenomenological qualitative design is a particularly suitable framework to employ when attempting to extract the deeply personal experiential narratives of mental health issues among inmates (Cox et al, 2022). Therefore, the researchers are trying to make the participants make sense of what is happening to them.

Mental health verbalization such as anxieties, trauma, depression, PTSD, and other mental health terminologies in Nigeria do not have meanings in any community, hence people experiencing depression to past trauma for instance will simply recount their conditions as unhappy, discouraged, and downcast even though

this could be a manifestation of anxiety or depression. In using the phenomenological qualitative method, participants were asked to describe their experiences and how they impacted their mental well-being (Conroy, 2003; Creswell, 2007). The results of the study are from the perspective and the meanings the participants make out of their experiences (Haney, 2017).

Qualitative data were collected using individual in-depth interviews and field observations. The study purposively sampled and collected data from 10 male consenting inmates after reaching saturation point who are serving sentences at the Nigeria Correctional Service Center - Oko-Benin-City.

Participants were given assumed names: Hamza, Osato, Ehigie, Osadolor, Umoru, Tobechukwu, Ayo, Danladi, Ezekiel, and Dibia to protect their identity and were asked various questions about their mental health experiences, with inquiries like: (1) Do you think about your sentence and why? (2) If so, how does that make you feel? (3) How did you feel when the judge made the pronouncement that you were going to serve the rest of your life in prison? (4) Are you guilty of why you were brought here? (5) Do you think you were fairly treated during your trial? All these interviews were conducted in Pidgin English (a dominant Nigeria language). The interview duration was audiotaped and recorded after seeking the participants' consent. Participants were observed for over a period of 2 months. Things that were observed in the prison environment included participants' day-to-day actions and behaviors within the prison environment. Although, the researchers acknowledged biases and presuppositions during this study, yet they remained focused and conducted themselves in a way that ensured that data presented for this study reflected the original views of the study participants (Creswell, 2007).

Additionally, the researchers employed a triangulation of different data collection methods including interviews and field observation (Conroy, 2003; Creswell, 2007). Given the emotionally sensitive nature of the subject matter, more time was spent with the participants before the interviews and during the observation phase to build rapport between the researchers and the participants. The study adopted the World Health Organization's definition of mental disorders as contained in the International Classification of Diseases (ICD-11). The ICD is a global standard for reporting diseases and health conditions and is used by healthcare providers, researchers, and policymakers around the world. Thus, according to the ICD-11, mental and behavioral disorders are defined as

"A clinically recognizable set of symptoms or behavior associated in most cases with distress and with interference with personal functions. This means that social deviance or conflict alone, without personal dysfunctions, should not be included in mental disorder as defined here".

As a result, the researchers describe mental health difficulties to include any significant disturbance in an individual prisoner's behavior that undermines the effective functioning of his psychosocial functioning and usually causes the feeling of distress, which impedes personal and interpersonal functioning. Given the fact that this study lacks the capability to conduct a clinical

assessment of the inmates, it helped to provide sufficient precision to the symptoms described by the participants and what they meant for example, by "feeling sad, hopeless, distressed, and fear".

Analysis of Data

An interpretive phenomenological (IPA) analysis was employed to examine the qualitative data that were produced from this study. It is used to explore and understand individuals' subjective experiences of a particular phenomenon. Developed by Jonathan Smith, its key concept includes, phenomenology, interpretation, and double Hermeneutic (Van Manen, 2017). The IPA is rooted in phenomenology which focuses on understanding and describing lived experiences of individuals. It explores how people make sense of their experiences (Conroy, 2003; Smith et al, 2009). In addition, the IPA involves a double process of interpretation. Researchers interpret participants' interpretations of their experiences, while recognizing the interpretative nature of both parties. (Van Manen, 2017).

In addition, given that it was beyond the scope of the study to conduct a clinical assessment on the inmates, we relied on interpretation of their experiences to suggest how consistent they were with a particular mental health complication. The four protocols of interpretive phenomenology analysis were then applied in the following way (Smith et al., 2009): (a) multiple readings of and writing down notes from the transcripts, (b) transforming the notes into initial themes, (c) seeking out relationship and grouping the themes, and finally (d) writing-up. (Smith, et al, 2009; Van Manen, 2017; Conroy, 2003).

Results

The phenomenological analysis of the data both interviews and observations produced one overall theme: mental health experiences of inmates and three sub-themes; difficulties coping with prison hardships, constantly thinking about their plight, and the lack of mental health services in the prison environment. The themes reflected the researcher's field observations and participants' account of how their perceived supposed damaged situation and prison conditions have brought about symptoms that are consistent with mental health issues such as anxiety, depression, and post-traumatic stress disorder (PTSD).

Inmates and Their Mental Health Experiences

The 10 participants' narrations of their experiences were consistent with some symptoms of mental disorders. For example, expressions such as "thinking too much", "always feeling sad", "I struggle to sleep", "I am afraid of what will happen next", and "I rely on weed as a coping mechanism for my worries" are symptoms that are consistent with depression, anxiety, or substance addictive disorders as stipulated in the DSM-5 and ICD-11 (WHO, 2019).

It is important to state that all the inmates perceived that their current symptoms started manifesting and recurring in the process of incarceration. While some of the participants answered in brief

that their mental health experiences were unique to their prison life, others did not give them a lot of reasons to worry. Umoru who received a 10-year sentence explained: "I have been to the prison before, but at the time I consoled myself that I was not going to stay here forever . . . this time is different; when I think about the fact that I am serving a 10-year sentence keeps me awake all night and leaves me to think".

Another participant who is an awaiting trial inmate, Ehigie, explained: "I have been here now for almost 2 years and have not had any court date, I wonder how long I am going to be here". Ehigie added that "this is something I am struggling to control since I do not know how long I am going to be here".

How Coping with Prison Hardships Affected Inmates' Mental Health

Coping with the hardships of prison life can be an immense challenge, and the impact on inmates' mental health is significant (Hester, 2017). Several factors contribute to the difficulties faced by inmates, and understanding these challenges is crucial for addressing mental health issues within the Nigeria Correctional system. Some key points to consider include.

1. Isolation and Lack of Social Support:

Inmates often experience isolation from family, friends, and the outside world, leading to a lack of emotional support. Limited contact with loved ones can contribute to feelings of loneliness and abandonment, thereby exacerbating mental health issues (Grassi, et al, 2018). This therefore is a constant source of worry for the participants when they think about how such a lamentable and disheartening environment is going to be their home for some years. The field data and observational notes revealed that the inmates were provided insufficient food and were living in areas with poor sanitation and sleeping facilities. In this condition, the participants expressed how significant their levels of stress were. Hamza, an inmate explained:

"The environment alone makes you feel stressed out, in the afternoon the prison is crowded, and in the night, it is worse. There is nothing in this prison that will keep you engaged; we spend all our time doing one thing, which is staying in the cells. This is what I have been doing throughout my time here and now it is more stressful than ever—I am not okay".

2. Violence and Safety Concerns:

The threat of violence is a pervasive issue in many prisons, creating a constant atmosphere of fear and hypervigilance. Inmates often experience physical and psychological trauma due to conflicts with other inmates or encounters with other staff (Goomany & Dickinson, 2015). The poor prison conditions appear to compound the participants already vulnerable state of mental health. As Osadolor, one of the inmates acknowledged:

"I am serving a 12-year sentence, which is very difficult to take, but I think my situation will be better if the prison is a safe environment for humans to live in. You get worried about being

attacked by other inmates and there is no one to take care of those who are sick".

3. Limited Access to Mental Health Services:

Many prisons struggle to provide adequate mental health services, resulting in insufficient care for inmates with pre-existing mental health conditions (Hester, 2017). Stigma surrounding mental health within the prison environment may discourage inmates from seeking help.

For example, Tobechukwu explained that:

"I have witnessed disease outbreaks that led to a lot of deaths among inmates. That time was very difficult; you woke up in the morning and you saw a fellow inmate being wrapped in the blanket to be taken to the cemetery . . . I felt the prison officers were not concerned and this made me think about what will happen to me the next morning".

Danladi, an inmate serving a 6-year jail term disclosed:

"I am afraid for my life because in this prison everything is possible, you can die at any time. Everybody has in mind that his or her life is not important to the officers. He added that "What happens to us is nobody's business . . . if you have witnessed how they wrap the dead, it is pitiful and heartbreaking".

Another participant explained how the death of his best friend has become something he will never forget and has left an indelible memory over the years. Ezekiel sadly disclosed:

"I witnessed the death of my friend, and it has left me to think about it all the time. It puts fear in me and sometimes I dream about him more than twice in a night—these dreams come and go but when they come, I cannot do anything but become overly concerned about my life".

In addition to witnessing the death of a fellow inmate, the participants narrated their experiences of lack of mental health services. According to one of the inmates, "I get frightened whenever I fall sick, knowing that there is no facility available in the prison to treat me."

Discussion

The findings presented above have illuminated the mental health experiences among inmates in Nigeria prisons. The discussion on mental health conditions among prisoners is a complex and important topic that involves various perspectives, challenges, and potential solutions (Massoglia, et al, 2019). The key important factors to consider are that research has consistently indicated that individuals in prison have higher rates of mental health conditions compared to the general population. This includes conditions such as depression, anxiety, schizophrenia, bipolar disorder, and substance abuse disorders (Massoglia, et al, 2015).

Many individuals enter the criminal justice system with pre-existing mental health conditions. A significant number of prisoners have experienced trauma or adverse childhood experiences, which can contribute to the development of mental health issues (Grassi, et al, 2018). Moreover, the prison

environment itself, with its confinement, isolation, and sometimes violent conditions, can exacerbate or trigger mental health problems. Proper screening and diagnosis of mental health conditions are important for identifying individuals who need mental health support. Unfortunately, some prisons may lack the necessary resources or expertise for comprehensive mental health assessment.

Policy and Advocacy

Advocacy for policy changes is crucial to improving mental health conditions in prisons, especially in a developing country like Nigeria. This includes increased funding for mental health services, training for prison staff, and implementation of evidence-based practices. Some have argued for a shift towards alternative approaches, such as diversion programs that route individuals with mental health conditions away from the criminal justice system and into mental health treatment (Goomany & Dickinson, 2015). Collaborative efforts between mental health professionals and prisons are essential to providing comprehensive care.

Limitations and Recommendations for Future Research

This study was not intended to provide a clinical diagnosis of mental health conditions; therefore, application of the findings must be done with care. The study focused on inmates who were recidivists. Therefore, the findings cannot be generalized to cover the experiences of other prison populations. Nevertheless, the evidence provided for the study took account of the cultural context that influenced participants' experiences of mental health in the selected prison. Further, due to financial constraints, the research was limited to only one prison in Nigeria, the Federal Prison, Oko, Benin – City, Edo State.

Based on the above limitations, and for effective consideration and implementation of the policy recommendations outlined in this study, future research that will provide a broader scope of inmates is needed. Researchers need to conduct a similar qualitative study as the current one but focus on identifying what prison-based strategies would be useful for improving the mental health experiences of inmates in the Nigerian setting. Future studies

Should also look at the impact of prison conditions and prison visitation on inmates' mental health experiences. Finally, future study should investigate the coping strategies adopted by inmates to deal with their experiences of mental health issues since there is currently no such study conducted in the Nigerian context. The researchers believe these recommended studies if undertaken will provide broader information regarding inmates' mental health and comprehensive policies needed to address it.

Conclusions

Addressing mental health conditions among prisoners requires a multi-faceted approach that involves policy changes, resource allocation, destigmatization efforts, and collaboration between the criminal justice system and mental health systems. The goal should

be to promote the well-being of individuals in the justice systems and enhance the likelihood of successful reintegration into society.

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