

Socio-Demographic Issues and Health-Related Quality of Life among Inmates of a Correctional Center in Southwest Nigeria

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Abstract:- Health is an essential aspect of life but the steady increase in the number of inmates in correctional centres continues to pose a series of challenges to them thus having significant effects on their overall quality of life (QoL). This study investigated the health-related quality of life (HQoL) among inmates of a correctional centre in Southwest Nigeria.

A descriptive survey design was employed for the study and the target population was the inmates of Abeokuta Maximum Correctional Center. An adapted questionnaire on the quality of life index was used to collect data from 223 respondents who participated in the study. Data were analyzed using both descriptive and inferential statistical tools and results were presented in tables.

The findings showed that 74.3% were males and 25.7% were females; 29.6% were below 25 years while 29.3% were above 35 years; 45.3% were married and the majority of them, 70% were awaiting trial with less than 2years period of stay. HQoL of inmates was poor with average means of 3.12, 3.22, 2.88, and 3.29 on the physical, psychological, social, and spiritual domains respectively against a 3.5 average mean while overall QOL was 2.78. Socio-demographic characteristics that were significant for

the quality of life at $p < 0.05$ were; gender ($r = -0.207$, tribe ($r = 0.113$), and length of stay ($r = 0.129$).

The study concluded that respondents' quality of life was significantly low hence, more programmes that can promote inmates' health status were suggested.

Keywords:- Correctional Center, Health, Inmates, Jail, Offenders, Prison, Quality of Life, Socio-Demographic Characteristics.

I. INTRODUCTION

Quality of life (QoL) has been described as an essential concept in different areas and settings of life including philosophy, economics, medicine, and psychiatry/mental health in particular and there is a strong connection between human habitation QoL, Shelter has been frequently adjudged as having a major effect on one's health and quality of one's life in any given time, especially in a confined and harsh place such as prison (Leban et al., 2016). On a general ground, the perception of quality of life can be influenced by numerous factors such as age, gender, support from families and other relevant agents in the network of the respondents as well as environmental conditions and cultural differences (Usha & Lalitha, 2016; Effat et al., 2016; Vincent Araña et al., 2014)) especially when the factor of constraints such as the harsh

condition of prison custody. The correctional centres in Nigeria just as it is obtainable in other places consist of different categories of offenders of different categories leading to unprecedented challenges of hopelessness, cynicism, depression, and low QoL ((Omitogun et al., 2020).

In a resource-constrained correctional centre with an increased rate of offenders as is being noted worldwide (Pettus-Davis et al., 2018), overutilization of resources, congestion, numerous health problems, inadequate welfare and rehabilitation might be posing a negative effect on the inmates' QoL (Ayuk et al., 2013; Omitogun et al., 2020) and despite being noisy and crowded, yet at the same time profoundly isolating cutting away inmates from family and friends who might seldom visit due to social stigma (Novek, 2017; António, 2018).

➤ Objectives

- To determine the HQoL among the respondents
- To examine the relationship between socio-demographic characteristics and HQoL

II. MATERIALS AND METHODS

➤ Design and Setting

This study adopted a cross-sectional descriptive design in assessing quantitative data on 223 respondents that participated in the study. The study was conducted at Old-Abeokuta Correctional Center which is one of the two maximum correctional centres in Southwest Nigeria under Zone-A Zonal Headquarters (Lagos). The centre has provisions for all categories of offenders in respect to the level of their dangerousness with facilities for female offenders with its official capacity standing at 510 but houses beyond this due to congestion.

➤ Sampling procedure and selection of participants.

The study adopted a simple random sampling technique to select all male respondents while a total enumeration technique was used to capture the entire 57 female participants to meet up with the male sample size. A calculated sample size using a modified formula of W. G. Cochran (Glenn, 2012; Polonia GFK., 2013) was used to determine the sample size for male respondents

Where N = Population of males = 907

e = Margin error (0.05)

Z = Confidence Interval (z-score) = 1.96

p = Expected Prevalence (in decimal) = 0.5 (Pourhoseingholi et al., 2013)

n = Sample size

➤ Instrument, Data Collection and Analysis

An adapted QoL index-generic version of Ferrans and Powers (1984) on a rating scale of 1-6 (very dissatisfied to very satisfied) was used which measured HQoL in physical, psychological, social and spiritual domains.

Data collection was through administering questionnaires by the researchers and their assistants who were recruited among the correctional officers in the medical department correctional centre. Data collected were subjected to proper sorting, and invalid questionnaires were eliminated leaving 223 questionnaires that were computed and analyzed using Statistical Package for the Social Sciences version 23.

➤ Ethical Consideration

Ethical approval was obtained from Babcock University Human Research Ethics Committee (BUHREC), where the study originated. Also, permission was equally given by the institution authority before the commencement of the study. The consent of each participant was sought while the study objectives and methods were also explained to the participants. The privacy of the participants was ensured through anonymity, and the chance to participate was also equitably distributed.

III. RESULTS

Table 1: Socio-Demographic Characteristics of the respondents

		F	%
Gender	Male	166	74.4
	Female	57	25.6
Age	Below 25	66	29.6
	26-35	79	35.4
	36 above	78	35.0
Marital Status	Single	96	43.0
	Married	101	45.3
	Separated/Divorced	26	11.7
Religion	Christianity	112	50.2
	Islam	106	47.5
	Indigenous	5	2.2
Tribe	Igbo	11	4.9

	Yoruba	179	80.3
	Hausa	31	13.9
	Others	2	0.9
Education	No Formal Education	32	14.3
	Up to Secondary	166	74.4
	Beyond Secondary	25	11.2
Length of Stay	≤ 2yrs	156	70.0
	2-5yrs	43	19.3
	>5yrs	24	10.7

Table 1 presents the socio-demographic characteristics of the respondents. The table shows that most of the participants in this study were male (74.4%). The age range of the participants shows that 66 (29.6%) were below 25 years while 78 (35%) were above 35 years of age which implies that most of the participants in this study were young adults. Also, 166 (74.4%) had up to secondary education and 156 (70%) have stayed for less than 24months in the setting.

Table 2: Level of HQoL of the Respondents

QoL	Not Satisfied F (%)	Satisfied F (%)	Mean	Std. Dev.	Average Mean
Physical Domain					
Your health	171 (76.6)	52 (23.3)	2.43	1.48	3.14 (1.53)
Your health care	114 (51.1)	109 (48.9)	3.23	1.49	
Amount of pain	126 (56.5)	97 (43.5)	3.13	1.51	
Energy needed for ADL	116 (52)	107 (48)	3.45	1.58	
Caring for self without others	102 (45.7)	121 (54.3)	3.49	1.62	
Psychological Domain					
Sense of control over my life	106 (47.6)	117 (52.5)	3.27	1.72	3.4 (1.51)
Hope of living long.	71 (31.8)	152 (68.2)	4.03	1.38	
Emotional support from family	167 (75)	56 (25.1)	2.73	1.43	
Emotional support non-family	144 (64.6)	79 (35.5)	2.97	1.64	
Social Domain					
Usefulness to others	46 (20.6)	177 (79.3)	4.35	1.33	3.11 (1.36)
Amount of worries in life	184 (82.5)	39 (17.4)	2.34	1.35	
Relate well neighbourhood	92 (41.2)	131 (58.8)	3.62	1.52	
Satisfied with level of education	190 (85.2)	33 (14.7)	2.27	1.21	
Concern for minor needs	208 (93.3)	15 (6.7)	1.82	0.92	
Access to adequate recreation	116 (52)	107 (48)	3.30	1.88	
Spiritual Domain					
Hope for a happy future	31 (13.8)	192 (86.2)	4.87	1.46	4.24 (1.28)
Peace of mind	178 (79.8)	45 (20.2)	2.17	1.49	
Faith in God	11 (4.9)	212 (95.1)	5.68	.89	
Overall Assessment					
Achievement of personal goals	209 (93.7)	14 (6.2)	1.60	1.08	2.82 (1.6)
Happiness in general	102 (45.7)	121 (54.3)	3.31	1.79	
Life in general	126 (56.5)	97 (43.5)	3.42	1.63	
General personal appearance	167 (74.8)	56 (25.1)	2.38	1.69	
Overall quality	131 (58.8)	92 (41.3)	3.41	1.83	

Table 2 presents the frequency and mean values of the respondents' level of quality of life. The table revealed the average means of 3.14, 3.34, 3.11 and 2.82 on physical domain, psychological domain, social domain and overall QOL respectively which are smaller than the 3.50 minimum level of good quality of life adopted in this study that the quality of life. This suggested that the HQoL of the participants as perceived by them was poor however, the domain of spirituality was considered good.

Table 3: Relationship Between Socio-Demographic Characteristics and HQoL of the Respondents

		Gender	Age	Marital Status	Religion	Tribe	Education	Length of Stay.	HQoL
Gender	Pearson Cor.	1	.103	.343**	-.217**	-.156**	.054	-.101	-.207*
	Sig. (2-tailed)		.057	.000	.000	.004	.322	.062	.000
Age	Pearson Cor.		1	.149**	.026	.042	.050	.253**	-.086
	Sig. (2-tailed)			.006	.630	.445	.354	.000	.112
Marital Status	Pearson Cor.			1	-.002	-.059	.039	.037	-.027
	Sig. (2-tailed)				.964	.280	.473	.502	.620
Religion	Pearson Cor.				1	.090	-.110*	-.021	.072
	Sig. (2-tailed)					.096	.043	.696	.188
Tribe	Pearson Cor.					1	-.077	.056	.113*
	Sig. (2-tailed)						.157	.303	.037
Educ.	Pearson Cor.						1	.060	-.102
	Sig. (2-tailed)							.272	.059
Length of Stay	Pearson Cor.							1	.129*
	Sig. (2-tailed)								.017
HQoL	P. Correl								1
	Sig. (2-tailed)								

Table 3 reveals a significant relationship between some of the socio-demographic characteristics of respondents against their HQoL at $p < 0.05$, these were; gender ($r = -0.207$), tribe ($r = 0.113$) and length of stay in the correctional centre ($r = 0.129$). This finding established that some domains of socio-demographic characteristics are related to HQoL (gender and length of stay in the correctional facility).

IV. DISCUSSION

The existence of man means a life that calls for healthy living irrespective of the location, time and space however, the quality of healthy living can be affected by numerous factors linking HQoL and longevity of life (Daengthern et al., 2020). The level of education beyond the secondary level was low (11.2%) compared with the general population as maintained by the Statistica, (2022) that 16.8% of Nigerians are pursuing higher education. This lends credence to the reports of Sarah Javed et al., (2016) who advanced that higher education is important in determining an individual's quality of life and health status due to its availability of multiple chances of employability and probability of being married.

Also, António, (2018) reported similar indices in a Portugal prison where the educational level of prisoners was lower compared with the general population and subsequently

affecting their level of understanding of rules and regulations, this implies that lower educational status is a contributory factor in inmates' QoL. Similarly, HQoL was perceived by Vincent Araña et al., (2014) who reported that inmates experiencing anxiety and depression with associated suicidal thoughts are common among inmates with decreased quality of life.

The study also revealed that socio-demographic characteristics that were significant against quality of life were gender, tribe and length of incarceration. These findings were in line with NCS, (2023) that the majority of inmates were awaiting trials responsible for the congestion in the facilities (Ayuk et al., 2013) and leading to a decreased quality of life as opined by Patoka et al., (2017) and Vincent Araña et al., (2014) hence, increase in the period of incarceration might be proportional to decrease in HQoL.

The outcome of this finding revealed a significant drop in the respondents' HQoL based on the physical domain, psychological domain, social and spiritual domain. Many of them were not satisfied with their emotional support from family, friends, amount of worries in their life, education, peace of mind personal appearance and overall QoL. Attributed sources of QoL could be overutilization of the infrastructure and congestion (Ayuk et al., 2013), unmet needs

with advanced age (O'Hara et al., 2016); prevalence of chronic and non-chronic communicable diseases (Centers for Disease Control and Prevention, 2023; Harzke & Pruitt., 2018). Since the provision of health care is not the primary responsibility of the correctional centre, inmate's HQoL might worsen in case of any communicable disease (Patoka et al., 2017) and lack of freedom in seeking medical care (Vincent Araña et al., 2014).

V. CONCLUSION

This study examined the issues of HQoL and socio-demographic characteristics among inmates and found out that a higher percentage of the respondents have stayed not less than 2 years in prison which might account for decreased quality of life and many of them generally were not satisfied with their health or level of wellness, their living conditions, amount of energy needed for activities of daily living and global QoL. The issues of socio-demographic characteristics (such as gender, length of stay) and HQoL was significantly related hence, Nigerian Correctional Service should develop more rehabilitation packages for the inmates to enhance their coping mechanism during their jail term.

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