

Exploring the Experiences of Male Inmates in District Prison, Morena, India: A Phenomenological Study Using Thematic Lived Analysis

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Abstract: The prison experience exerts profound effects on individuals across physical, psychological, social, spiritual, and economic domains. This phenomenological study explores the lived experiences of male inmates incarcerated in District Prison, Morena, India. Using Colaizzi's method of thematic analysis, twelve major themes and corresponding subthemes were derived from in-depth interviews with inmates. These themes included: Pre-Crime Factors, Family Concerns, Physical Health, Mental Health, Social Health, Spiritual Health, Financial Stability, Optimism, Guilt, Coping Mechanisms, Faith in the Judiciary, and Challenges. The findings underscore multifaceted dimensions of incarceration, revealing unique adversities and adaptation strategies. Discussion is supported by contemporary studies, situating the findings within a broader health and criminological context. The study recommends a multidisciplinary rehabilitative approach emphasizing mental health services, family reintegration, judicial transparency, and vocational training. This research contributes a comprehensive framework for understanding inmate experiences and informs integrative nursing practices in correctional settings.

Keywords: Male inmates, phenomenology, prison health, mental health, spirituality, coping, judiciary, thematic analysis, integrative nursing

INTRODUCTION

Incarceration has enduring consequences beyond legal repercussions, profoundly affecting an individual's mental, physical, social, and spiritual well-being. India, with its growing prison population, has seen increasing scholarly attention to the psychological and sociocultural dimensions of prison life. However, qualitative insights into the lived experiences of male inmates remain scarce, particularly within the sociocultural context of Madhya Pradesh. Integrative nursing, emphasizing holistic care, provides a framework to address the complexities of prison life through person-centered interventions.

This study utilizes a phenomenological approach to explore the multifaceted experiences of male inmates in District Prison, Morena, India. The study aims to shed light on the pre-crime and post-incarceration narratives of inmates, emphasizing their health status, coping strategies, spiritual engagement, and trust in the judiciary. By analyzing themes and subthemes through Colaizzi's method, this research contributes actionable insights into correctional healthcare systems and nursing practices.

OBJECTIVES

The objectives of the study were to explore the pre-crime personal and familial factors contributing to incarceration, identify the physical, psychological, social, and spiritual health issues experienced during incarceration, examine inmates' coping strategies and sources of optimism, assess inmates' perspectives on the judicial process and understand challenges within the prison system influencing health and rehabilitation.

METHODOLOGY

A qualitative phenomenological design was adopted. The study was conducted in District Prison, Morena, Madhya Pradesh. Total enumeration sampling was used. Male inmates who met inclusion criteria: aged 18 years or above, willing to participate, and incarcerated for more than six months. In-depth structured interviews were conducted, documented and transcribed. Ethical clearance was obtained, and informed consent was ensured. Colaizzi's seven-step method guided data analysis, leading to theme and subtheme development.

RESULTS

The phenomenological exploration of the lived experiences of male inmates revealed a multifaceted interplay of factors categorized into twelve overarching themes and their respective subthemes. The theme Pre-Crime Factors encompassed influences such as *Defensive Armament*, where participants described carrying weapons for self-protection in hostile environments, *Unregulated Weaponry* pointing to easy access and poor regulation, *Escalatory Actions* indicating impulsive or retaliatory behavior, and *Large Family* structures contributing to economic and emotional strain. Under Family Concerns, inmates expressed *Disquietude* over the well-being of family members, *Estrangement* from spouses or children due to incarceration, and enduring *Kinship* bonds that provided occasional emotional anchoring. The theme of Physical Health highlighted concerns around *Sedentarism*, with limited physical activity in confined settings, *Malnutrition* due to inadequate prison diets, and *Somnipathy*—a term inmates used to describe disordered sleep due to stress and environmental disruptions. The Mental Health domain was profoundly significant, revealing *Cognitive Turbulence* such as racing thoughts and confusion, *Emotional Disenfranchisement* caused by lack of empathetic support, *Existential Disquiet* manifesting in questions about purpose and future, *Psychosocial Disintegration* due to isolation and loss of social roles, and a pervasive *Eudaimonic Deficit*, reflecting the absence of a meaningful life. Social Health was another critical dimension where *Social Stigma* was internalized deeply, *Relational Erosion* resulted in loss of friendships and community ties, and *Societal Strain* reflected a broader alienation from society. Within Spiritual Health, some inmates demonstrated *Sacred Resilience* drawn from faith-based practices, others described a *Transcendental Void*—a sense of spiritual emptiness, and a few maintained *Ritualistic Commitment* to religious observances as a coping mechanism. The **Financial Stability** theme underscored *Economic Strain* from lost income, *Financial Prioritization* challenges for families, and *Financial Miscommunication* where inmates struggled to stay updated on household needs. In contrast, Optimism emerged subtly through expressions of *Hope*, a willingness to *Accept* current circumstances, and a desire to *Rebuild* life post-incarceration. The theme of **Guilt** was central to many narratives, involving *Moral Reckoning* over past deeds, *Regretful Transformation* acknowledging wrong choices, and *Redemptive Insight* seeking atonement. The Coping Mechanism theme included *Active Engagement* in daily tasks, *Counselling and Reintegration* programs viewed positively by some, *Career Aspirations* for post-release rehabilitation, and *Mindfulness* practices to cope with stress. In related to the Faith in Judiciary, perceptions ranged from *Legal Distrust* stemming from prolonged trials or perceived injustice, to *Legal Endurance* where inmates patiently awaited outcomes with cautious optimism. Finally, the theme of Challenges encapsulated inmates' harsh realities—*Deprived Living* conditions with overcrowding and poor sanitation, *System Hardship* marked by limited support and bureaucratic delays, a *Rigid Routine* that contributed to monotony and emotional dullness, *Health Care Barriers* including poor access to timely medical help, and a few *Health Care Facilitators* such as supportive staff or NGOs that offered occasional relief. These themes collectively provided a deeply humanized account of incarceration, uncovering the nuanced psychological, social, economic, and spiritual textures that shape the lived experience of male inmates in the district prison of Morena.

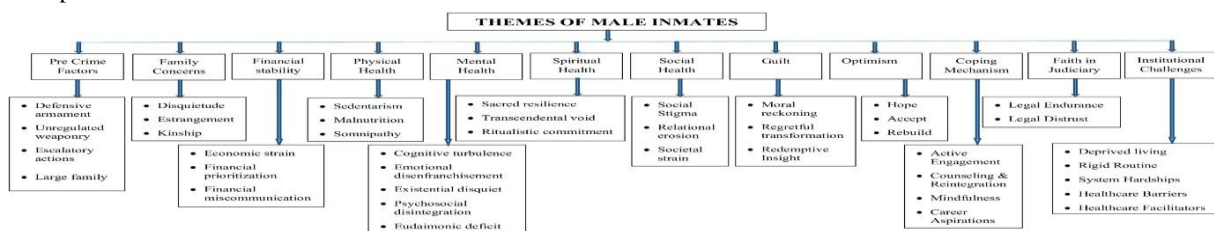


Figure 1: Flow chart representation of identified themes and subthemes

DISCUSSION

Findings confirm that inmates experience multidimensional adversities. Pre-crime factors such as access to unregulated weapons and family pressures are consistent with the findings by Singh and Jadhav (2020), who reported similar sociological roots in rural crime. The deterioration of physical health due to sedentarism and malnutrition resonates with research by Wakai et al. (2021), emphasizing the need for structured physical activities in prisons.

Mental health disturbances, including emotional disenfranchisement and cognitive turbulence, align with the findings of Fazel and Baillargeon (2011), who highlighted the high prevalence of psychiatric disorders in inmates. Social stigma and relational erosion mirror observations by Liebling and Maruna (2013), emphasizing the societal burden of re-entry.

Spiritual resilience emerged as both a coping and transformative factor, as supported by studies from Clear and Sumter (2002), who highlighted the role of spirituality in rehabilitation. Financial stress and lack of communication further strained inmates' emotional stability, consistent with Sharma et al. (2019).

Hope, acceptance, and rebuilding attitudes among inmates reflect positive psychological growth, echoing Snyder's Hope Theory (2002). Guilt-induced transformation also emerged as a catalyst for self-improvement. Coping mechanisms such as engagement in prison education programs have shown to reduce recidivism, corroborated by Davis et al. (2013).

Legal distrust underlines the need for judicial reforms, whereas legal endurance showcases inmates' resilience. Institutional challenges like healthcare access issues have been documented by the National Crime Records Bureau (2021), urging the inclusion of nursing care models.

Conclusion: This study highlights the comprehensive lived experiences of male inmates across emotional, social, spiritual, and systemic dimensions. The findings call for integrated healthcare strategies within prisons, including nursing interventions focused on mental health, family reintegration, vocational training, and spiritual counselling. A person-centered approach rooted in integrative nursing can promote meaningful rehabilitation and societal re-entry.

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