

RESEARCH ARTICLE

Defining Incarceration: Stories of Older Persons Deprived of Liberty

Mark Gilbert S. Milallos, RN, LPT, MSN¹ and Jezyl C. Cutamora, RN, MN, PhD²

Abstract

Introduction. The aging process can be different for those who have been incarcerated, including issues related to physical health, mental health, and social dynamics. Much of the existing research on incarceration tends to focus on younger or middle-aged populations. The unique experiences, needs, and challenges faced by older adults who are incarcerated often received less attention and can be better explored qualitatively. This study could address the gap in how existing policies and reforms consider the specific needs of older incarcerated individuals. By addressing these gaps, the study aimed to explore the lived experiences of incarcerated older adults in Cebu Province and contribute to a more complete and empathetic understanding of incarceration from the perspective of older individuals, ultimately supporting more informed and compassionate approaches to criminal justice and prison reform.

Methods. The study employed Husserl's qualitative phenomenological design. There were a total of 9 key informants interviewed from various jails in Cebu Province. An open ended interview guide was used in audio recorded interviews which were transcribed and analyzed using the steps of Colaizzi's method.

Results. The emerging themes were (1) Adversities Behind Bars with the following subthemes, (a) Psychosocial Concerns, (b) Health Problems, and (c) Issues on Basic Needs: Food and Sleep. The second theme was (2) Significance of Supporting Factors with the following subthemes, (a) The Importance of Health and Wellness in Health Promotion and Management and (b) How Meaningful Social Relations and Visitations are. The last theme was (3) Rebound from Hardships with the following subthemes, (a) Blending in, (b) Renewed Faith, and (c) Positive Outlook.

Conclusion. Prison life challenged the mental, social, and physical health of Older PDL's including meeting some basic needs. The jail system addressed health and medical concerns depending on availability and managed visitations, social, and spiritual programs. Older PDL's adapt to life in jail and develop a positive outlook. Overall health should be prioritized, especially mental health. Regular inventory of medical and healthcare stocks for earlier procurement of supplies. Visitations, social, and spiritual programs should be continued and monitored. Nurses inside the jail were tasked to take care of the entire community without any special considerations on older PDL's. Jails should strengthen their healthcare system and give importance to the special needs of older PDL's such as but not limited to: 1. Comprehensive Health Assessments; 2. Specialized Medical Care; 3. Enhanced Medical Facilities and Resources; 4. Mental Health Support; 5. Training and Education; 6. Nutrition and Exercise; 7. Accessibility and Adaptations; 8. Collaboration with External Healthcare Providers; 9. Legal and Ethical Considerations. By implementing these strategies, jails could better address the complex and diverse needs of older persons deprived of liberty, promoting their health, well-being, and dignity.

Keywords: Incarcerated Older Adults; Older Persons Deprived of Liberty; Jail Nursing, Penology Nursing, Gerontology Nursing

Introduction

Life in prison can challenge anyone, but it can be particularly hard for people whose bodies and minds are being whittled away by age" (Fellner, 2012). The prison population is aging and older adults are the fastest growing

age group (Prison Reform Trust, 2019). The Bureau of Jail Management and Penology (2018a) said that there are a total of 2,856 prisoners who are above 60 years old in the Philippines and 93 of which are in Region 7. The elderly is

¹ Corresponding author. Faculty, College of Nursing, Cebu Normal University, Osmeña Blvd, Cebu City, Cebu Email: markmilallos@outlook.com

² Faculty, College of Nursing, Cebu Normal University, Osmeña Blvd, Cebu City, Cebu | cutamora@cnu.edu.ph

among the most vulnerable population groups and prisons were never intended to become geriatric facilities and is generally a harsh environment for older adults; furthermore, incarcerated older adults have a higher risk and incidence of illness, disease, disability, and mental health problems (Pittaro, 2018).

The Institute of Criminal Policy Research (2018) revealed that there are at least 11 million people in the world that are incarcerated. Although the Philippines do not belong to the list of the most number of prison populations, it is one of the countries with the highest increase of prison population rate over the past 3 years with at least 48% increase in prisoners per 100,000 of the general population (ICPR, 2018). The Philippine prison population sums to a total of 144,871 (BJMP, (2018a) and distributed among 1,137 facilities or institutions (Prison Insider, 2017a). BJMP (2018b) added that the total congestion rate of Philippine prisons on average is at 582.37% and 700% in Region 7 alone.

Apart from overcrowding, scarcity of adequate food and potable water add to surmounting health problems in the country's prison cells (Prison Insider, 2017b). Incarcerated persons become sick with other alarming health conditions such as mental illness, addiction, and chronic diseases as a result of these poorly maintained environment (Smith, A., 2013). Such dismal condition of incarcerated elderly is heightened with the apparent lack of health workers inside the Philippine Jail System (Prison Insider, 2017b).

Nurses are being hired as jail officers inside correctional facilities to function within their profession with inmate safekeeping as a primary responsibility (Philippine Information Agency [PIA], 2017; Sandoval, 2017). Nurses employed as jail officers are responsible for the health monitoring system inside jails that comprise of providing assistance in medical consultations, treatment of ailing inmates, and referrals for treatment at external facilities (Edep, 2016).

Older adults are among the vulnerable population groups inside correctional facilities and jail nurses are amongst personnel that would aid in the care of the elderly inside jails. Much of the existing research on incarceration tends to focus on younger or middle-aged populations. The unique experiences, needs, and challenges faced by older

adults who are incarcerated often receive less attention and can be better explored qualitatively. This study could address the gap in how existing policies and reforms consider the specific needs of older incarcerated individuals. By addressing these gaps, the study aims to explore the lived experiences of incarcerated older adults in Cebu Province and contribute to a more complete and empathetic understanding of incarceration from the perspective of older individuals, ultimately supporting more informed and compassionate approaches to criminal justice and prison reform.

Methods

The study employed a descriptive phenomenological research design by Edmund Husserl which is centered on the lived experiences of people (Smith, D. W. 2013). This design was considered suitable for this study since the researchers gathered subjective data of first-hand experiences that was used to explore the lived experiences of older persons deprived of liberty (PDL). This study was conducted in the following jails: Consolacion Municipal Jail, Naga City Jail Male and Female Dorm and Cebu City Jail Female Dorm. The Bureau of Jail Management and Penology regional office approved the study to be conducted on the mentioned jails.

A total of 9 key informants were interviewed that fulfilled the inclusion criteria being set which are the following: PDL's aged 60 and above; able to articulate; incarcerated for at least 6 months; and the willingness to participate in this study regardless of gender, sexual orientation, educational attainment, and the reason for incarceration. The said informants were advised that they are free to withdraw anytime without questions or prejudice. Purposive sampling technique was used which allowed the researcher to choose informants based on the inclusion criteria. This is a non-probability sample wherein selection is based on the characteristics of a population and the objective of the study (Polit & Beck, 2017).

Table 1 shows the profile of the informants of the study which shows their pseudonym, age, sex, civil status, highest educational attainment, pending case and the total time spent in jail at the time of the interview. It shows that most informants are married and were not able to reach or finish high school. Majority of the cases are drug related. The average age of the informants is 66 years with 73 as

Table 1. Profile of the Informants

Pseudonym	Age	Sex	Civil Status	Highest Educational Attainment	Pending Case	Time Spent in Jail (upon interview)
Andoy	60	Male	Married	Grade 2	Drug Use	2 years 9 months
Berto	73	Male	Married (Separated)	Grade 5	Frustrated Murder	11 months
Carlita	68	Female	Widow	Grade 3	Drug Possession	4 years 11 months
Diosdada	65	Female	Widow	3 rd year High School	Drug Possession	9 months
Ening	66	Female	Married (Separated)	3 rd year High School	Drug Possession	6 months
Ferolino	65	Male	Married	Grade 2	Rape	5 years 1 month
Gerardo	66	Male	Single	Law School Graduate	Malversation of Public Funds	1 year 8 months
Herman	63	Male	Widower	High School Graduate	Rape	4 years 9 months
Isidra	65	Female	Widow	Secretarial Course	Drug Den	3 years 7 months

the oldest and 60 as the youngest. The average time spent in jail is 2 years and 8 months with 5 years and 1 month being the longest and 6 months being the shortest.

Data collection was guided by the principle of data saturation using a semi-structured interview guide in conducting in-depth face-to-face interviews that allowed the key informants to narrate what happened in their lives (Hesse-Biber, 2017). Interviews were audio-recorded and field notes were taken. Bracketing was engaged consciously to avoid personal biases to contaminate the research data and analysis. Arduous analysis of data institutes the second element of the descriptive phenomenological investigation that uses Colaizzi's method (Shosha, 2012). The researchers conducted member and analysis triangulation, frequent bracketing documentation via an encrypted Google Docs file, review of the data analysis procedure by experts of qualitative studies, member checking, and verification of accuracy of transcriptions to guarantee credibility and validity of data. Analysis triangulation (Valencia, 2022) was achieved when the researcher extracted significant statements from the transcripts and the other researcher repeatedly read the transcripts while simultaneously listening to the recordings. Through these above-mentioned processes, corrections could be made as needed. Moreover, researchers could question the peer group about the relevance of the extracted statements when necessary. To gain credibility, an expert in the field of qualitative research was consulted to review several steps of the data analysis procedure, namely the formulation of cluster themes and the presentation of the

exhaustive description. The researchers acknowledge the benefits of doing bracketing and member checking as parts of the study's rigors. Documenting the bracketing process allowed the researchers to specifically lay out all of their prejudices, assumptions, biases, thoughts, opinions, and expectations so that they could avoid employing them during the data collection and data analysis process. Field notes were documented on a Google Docs file.

Ethical Considerations

The study observed the respect for human dignity which is regarded as a fundamental factor of modern research ethics. The study protected the interests of the information in terms of bodily, psychological and cultural integrity and observed the right to self-determination and the right of full disclosure (Loiselle, et al., 2010). The study was reviewed and approved by the Ethics Review Committee of the Cebu Normal University with approval code of 317/2019-04 Milallos.

Results

Thematic Analysis. A total of 369 significant statements were extracted from the interview transcripts generated from the 9 key informants. Moreover, a total of 27 formulated meanings were also generated from the significant statements. A total of 3 themes emerged in this study. The first theme is (1) Adversities Behind Bars with the following subthemes, (a) Psychosocial Concerns, (b) Health Problems, and (c) Issues on Basic Needs:

Food and Sleep. The second theme is (2) Significance of Supporting Factors with the following subthemes, (a) The Importance of Health and Wellness in Health Promotion and Management and (b) How Meaningful Social Relations and Visitations are. The last theme is (3) Rebound from Hardships with the following subthemes, (a) Blending in, (b) Renewed Faith, and (c) Positive Outlook. The experiences uncovered are not solely unique to Older PDL as further literature review indicates these experiences can be experienced by anyone incarcerated but the impact differs. The themes are further discussed in the next pages.

Theme 1: Adversities Behind Bars

This main theme is about the challenges and hardships that the key informants have experienced while being incarcerated. These adversities resound to their mental and social health, physical health, and certain issues regarding their basic needs like food and water.

Sub Theme 1: Psychosocial Issues

This sub theme tackles the emotional, psychological, and social needs of the informants that they are struggling to meet. Episodes of sadness or depression, suicidal thoughts, missing family members, and difficulty in socializing with other PDL's were relayed. Breaking moments and missing significant others were narrated.

Andoy stated that, SS17 *"Lahi gyud kaayo kay katong wa pako na anad kay lain akong huna2x. Masamtop sakong huna-huna nga maghikog ko."* It was different when I was not used to my situation. I once considered killing myself. It passed but stood strong. And, SS21 *"Mingaw kaayo sa tanan. Kung dili ko dalawon diri sa duha sa semana, maghilak man gani ko. Maghilak ko kung di ko arion sakong asawa ug akong mga anak."* (I miss my family so much. I cry when my wife and children fail to visit me).

Diosdada mentioned, SS158 *"Lisod kaayo diri sir. Maka ingon palang ka nga maayo maghikog nalang, sah man pud."* (It's really difficult here. I can even say that suicide is a better option but it's another sin).

Lastly, Isidra longs for visitors and said that, SS360, *"Layo sa dalaw. Layo. (We are very far from our family to visit us)."*

Sub Theme 2: Health Problems

This sub theme describes the health issues encountered by the informants while in jail. Hypertension was a common disease

among the informants while others have narrated about glaucoma, kidney disease, arthritis, and body pains. There were also instances that the informants had episodes of fainting that resulted from increased blood pressure. The key informants narrated that they were provided with their maintenance medications but there were times that they were not provided since it was out of stock.

Berto mentioned about the current health issues he is experiencing and relayed SS32 *"Akong gibati ron kay akong... murag naa koy kidney. Sakit kanunay akong pus-on."* (I currently have problems with my kidney. My lower abdomen always hurts).

Carlita recalled on times she needed help from the clinic and relayed, SS82 *"Mura tong gi-atake ko. Ikatulo siguro ko ma-atake sa high blood kay kaliwat man namo sir."* (When I had chest pains - I think I had it 3 times. I am hypertensive because it's hereditary).

Ening talked about her dental health and said, SS173 *"Unya ako gi ingon pud palit ug ngipon ngalan sa edaran nata. Dili mana malikayan nga naay mga lungag2x ana."* (I needed to see a dentist because I am very old and already have cavities).

Lastly Isidra said that, SS312 *"Takdan ko mga sakit. Na high blood ko."* (I think I became sick from others. I already have high blood pressure here).

Sub Theme 3: Issues on Basic Needs: Food and Sleep

This sub theme describes how key informants verbalized issues pertaining to their basic needs like food and drinking water. Overcrowding was mentioned as the reason why moving around and sleeping becomes difficult. Water supply for toilet use was also a challenge.

Berto mentioned the following; SS46 *"Ang kalisod diri sir kay ang pagkaon. Di man ta kaadto sa gawas na."* (The food here is difficult and we can't go outside to get some). He also mentioned; SS64 *"Pareha unya linya pang ligo."* (We need to line up to take a bath) and SS65 *"Ang pag CR diri linya2x sad."* (We also lineup to use the toilet).

Whereas, Diosdada voiced out the following; SS130 *"Naa pay among pagkaon perteng paita. Wa tay mahimo kay mao may..."* (I don't like the food here and I can't do anything about it). She also said, SS152 *"Kanang among tubig kay kuan...palitonon biya among tubig sir. Kung wa kay kwarta, di ka makainom. Inom lang kanang kuan naa may... puhos ra bitaw aw unsay pangan ana... deep well. Mag lain man akong"*

tiyan ana. Mag daguok akong tiyan. Di nalang ko mo inom. Usahay mangayo, naay maluoy." (We have to buy our drinking water here. If you don't have money, you just drink tap water or deep well water. My stomach is very sensitive so I don't drink that. I ask for water if someone shows mercy) and mentioned that regarding difficulty in sleeping in SS153 *"Usahay magabie di ko makatog pagkayo."* (I sometimes can't sleep well at night).

Lastly, Isidra talked also about sleeping and food concerns on SS366 *"Maayo na ang paghida. Lisoda aning sa cemento ra maghida uy."* (I hope we can sleep well soon. It's difficult to sleep on the floor) and SS369 *"Mao intawn mo kuan nako sa pagkaon ug sud.an."* (I really dislike the food here).

Theme 2: Significance of Supporting Factors

This major theme revolves on the importance of supporting factors including the maintenance of health and wellness and the importance of social relations among Older PDL's and family visits. It was discussed how friends or co-inmates have helped them air out concerns. Happiness was evident whenever a family member visits them as the absence is temporarily forgotten and groceries and other necessities are provided.

Sub Theme 1: The Importance of Health and Wellness in Health Promotion and Management

This sub theme describes the presence of activities and programs that help maintain health and wellness. The Therapeutic Community Modality Program (TCMP) and other related activities like daily morning exercises, religious classes, and livelihood programs were discussed by the key informants. This sub theme also mentions the health and medical services they have received when it was needed.

Andoy mentioned when asked how he feels in joining activities like those livelihood programs, SS31 *"Makalingaw sakong huna2x nga makalimot ta sa mga problema."* (It diverts my mind into having fun so that we forget our problems).

Berto recalled his experience when he had chest pains and said, SS72 *"Kato diay mura kog attackihon sila nagtawag. Gi-dala ko nila ni maam."* (There was a time when I had chest pains and the guards informed the clinic and brought me to the nurse).

Ening also recalled times when she was sick and mentioned, SS118 *"Oo gamit gyud ni kay kung naay magkasakit sa'mong dorm, abtik man kaayo among kanang unsay gitawag ana."* (The clinic is really useful

especially when someone becomes sick. They will respond immediately).

Diosdada talked about the daily exercises, SS150 *"Kanang mag exercise sad mi. Mag exercise mga tiguwang."* (I enjoy the exercises we do. We old people join the exercise).

Isidra also talked about the livelihood programs and said, SS31 *"Nagkuan mi. Nag Livelihood mi. Nagbuhat mi mga vase, mga buwak. Bisan unsa lang Murag lingaw. Kami diha tanan murag ana. Bisan unsa lang buhaton."* (We do have activities and livelihood programs where we make vases, flowers. Anything to kill the boredom and everyone has something to do).

Sub Theme 2: How Meaningful Social Relations and Visitations are

This sub theme discusses the importance of social relations in and out jail. The jail is one community where the informants have mentioned that they were able to confide to other PDL's about their experiences inside and narrated the immense happiness they felt whenever they received visitors. Furthermore, prison visits are available to PDLs as scheduled or allowed by the jail.

Andoy stated, SS22 *"Sus ang kalipay sangko sa langit. Sangko sa langit ako nang gakson akong asawa inig abot. Akong hagkan."* (I am really very happy beyond measure when my wife visits. I hugged her. I kiss her).

Ferolino also discussed his relationship with other PDL's saying, SS229 *"Wala may ing.ana nga unsa diha. Murag managsuon. Labaw pa sa managsuon ang among pagkuan diri."* (We are not different here. We treat each other as brothers. We are more than brothers with the bond we have here).

Gerardo talked about receiving visitors stating, SS266 *"Kalipay namo diri kung naay mo duaw."* (Our happiness is when we have visitors.)

Herman also discussed other benefits from having visitors and said, SS283 *"Pero mas bintaha jud to naa ta dalaw kay ang consumo mapun.an ba."* (It is always better to have visitors since they can bring food and groceries).

Theme 3: Building Resilience

This main theme is about the resilience built and how the key informants have managed to cope inside the jail. They discussed how they were able to adapt to the jail system and

how this place has become their new normal. They talked on having a stronger faith in the Lord and how prayerful they have become. Lastly, they shared their future plans in life when they will be free and how they will leave the old ways they have in life which have put them behind bars. Escabel, et. al (2015) discussed that PDL's would eventually cope with life in jail and adjusting to the new culture; furthermore, on how they become part of the community in the jail. Spirituality or faith is a critical factor that helps PDL's cope as they acknowledge God as the answer to their redemption (Flores-Barolo & Vicente, 2019; Stansfield, et al., 2018). This is also about the process of self-reflection and self-renewal that make them realize their wrongdoings, change ways, and plan for the future (Flores-Barolo & Vicente, 2019).

Sub Theme 1: Blending in

This sub theme tackles how the key informants were able to adjust slowly with the jail system and culture. This discussed how they were able to cope and to adapt to life inside; the importance of following the rules inside the jail; and the relationships they have with the jail personnel.

Andoy said that, SS13 *"Ako nalang gi-dasig kanunay ang akong huna2x nga dili ko mag-guolanon. Ang akong huna-huna ako nalang gi-anad."* (I need to strengthen my mind so I won't be sad. I'm using my mindset to get used to this situation).

Diosdada also mentioned about the rules, SS166 *"Wa may bati nila (jail personnel) para nako kay di man sad ko pabadlong. Unsay gusto nila, tuman jud ko ana."* (They (jail personnel) are all good and I am very obedient. I just follow the rules).

Isidra added, SS349 *"Pagkakaran nga ning dagan nako mga upat murag na anad-anad nalang. Pero sa bag-o pa sus... Lisod uy."* (I already got used to it but it was really hard at first).

Sub Theme 2: Renewed Faith

This sub theme described the restoration and the strengthening of the informants' faith in the Lord and the power of prayer. They mentioned that being incarcerated is a part of the Lord's plan and that they will be released in His time. Furthermore, they also mentioned on how their prayers were granted and its importance:

Berto stated, Ss62 *"Akong ikuan sa Diyos, tabangi intawn ko makalaya ko unta."* (I pray to the Lord to help me overcome this and hopefully be free).

Carlita mentioned, SS103 *"Ang nakat.onan nako diri nga nay religious ana unya taga Domingo, magsimba mi*

unya." (I learned to be more religious here and to go to church every Sunday).

Ening also added, SS213 *"Sus sampit jud ko sa Ginoo nga palayaon ko niya. Kung ako eserbisyo akong kinabuhi niya, ihalad jud ko na basta di nako mo balik."* (I pray to God for my freedom. I will serve him all my life in return).

Ferolino talked about an answered prayer, SS248 *"Kaluoy sa Ginoo gyud. Sukad atong nga nag sige ko ampo bitaw. Nawa gyud. Mao ra gyud ni akong. Sa una katong wai tulo sa ka.adlaw mangayo nasad ko catheter."* (With God's grace and when I started praying, I felt that it helped me with my health especially my catheter was removed).

Lastly, Isidra mentioned, SS332 *"Nganha ka murag mawa imong kaguol sa pag-ampo."* (Your sadness disappears when you pray).

Sub Theme 3: Positive Outlook

This sub theme is about the life changes they had experienced because of incarceration and how they had grown to become better persons. This is also about how they see what is in store for them as they progress in becoming good persons. This sub theme also discusses the process of self-reflection and self-renewal that they had undergone so as to understand why they were incarcerated and what future steps they need to take in order for them to turn away from the old broken ways of life.

Andoy said, SS20 *"Nalipay man hinuon ko nga nadakpan ko para mausab, mabag-o ang akong kinabuhi nga di nako. Makalimot nako anang mga droga."* (Somehow, I am happy that I was incarcerated because I slowly changed towards a new life. I will eventually forget about drugs).

Ferolino discussed, SS224 *"Akong plano sir puhon makalaya ko akong ikauban akong asawa ug isa rapud nga bata. Puyo lang tinarong."* (If I am freed, I will go home to my wife and kid. We will have a good way of life.)

Lastly, Isidra said, SS334 *"Plano nako mag tinarong na gyud. Di na anang mga kuan."* (I plan to be fixed my fix my life when I go out. I will no longer break any laws).

Discussions/Exhaustive Description

A new life uncovers once an older adult enters the jail system as a person deprived of liberty (PDL) while they wait for the trials of their pending cases for various offenses charged

against them. The story unfolds with the challenges they encounter with life behind bars and their capacity to slowly build resilience through their own will and through the presence of supporting factors in and out of jail.

Adversities behind bars tackles on the challenges that the Older PDL's encounter inside. Each Older PDL has their own share of hardship wherein some are common to the majority while others are unique. Psychosocial issues are the most common among all key informants where they long for the presence of their significant others and the struggles they have with mental health as they adapt to the life inside. Loss of social contact and communication to the outside world is a common social challenge; furthermore, depression and emotional issues are common psychological stressors but remains unaddressed by current jail systems (Flores-Barolo & Vicente, 2019; Semenza & Grosholz, 2019; Duggleby, 2016). Life in prison is difficult for anyone that is incarcerated; however, the burden increases on older adults as the prison system is not designed for them and the risk for illness, disease, disability, and mental health problems increases (Fellner, 2012; Pittaro (2018); Kelly & Rudin, 2017). Moreover, the trauma and stress experienced inside the jail are not well addressed among incarcerated older adults (Courtney & Maschi 2013). Duggleby (2016) mentioned that the psychosocial needs are often overlooked since this is not the main priority of the jail system. Psychological issues are common among PDL's and imprisonment itself is painful; moreover, depression and loss of social contact and communication to family and friends can affect PDL's (Flores-Barolo & Vicente, 2019). It was also added that PDL's can suffer emotionally and that mental health is greatly affected (Flores-Barolo & Vicente, 2019). Semenza and Grosholz (2019) also mentioned that mental health is an issue found among jails and that depression is a common mental health issue. Furthermore, Flores-Barolo and Vicente (2019) mentioned that the adjustment to prison life is very challenging.

Nurses are hired as jail officers in the Philippine correctional system with a primary function of inmate safekeeping (PIA, 2017; Sandoval, 2017). Nurses can be assigned to man the prison health system that includes health monitoring, first aid, medication distribution and inventory and assistance in other health and medical related concerns (Edep, 2016).

Another concern is the health of older PDL's as they tend to age fast and that geriatric conditions are likely to commence earlier (Greene, et. al., 2018). They encountered issues pertaining to their health with some having simple ailments to having increased blood pressure and chest pains. Hypertension was a common chronic disease that the informants were all diagnosed with. Bedard et al., (2016) said that older PDL's are likely to have one chronic medical condition. In addition, Portuguez (2015) discussed that they tend to think that their illnesses are acquired

in jail. Greene, et. al. (2018) also mentioned that jail healthcare systems are not prepared in taking care of older PDL's since the health costs are higher than those of younger PDL's. Greene, et. al. (2018) stated that geriatric conditions are likely to have an early onset among incarcerated older adults and accelerated aging occurs among PDL's. Jail based healthcare systems are heavily challenged in maintaining the health of older adults and it costs 9 times more than any younger or middle-aged adults. Older adults in jail are even more burdened with health conditions compared to those who are community dwelling (Greene, et. al., 2018). Bedard et al., (2016) stated that health issues are common among older PDL's and they have at least one chronic medical condition. Moreover, Portuguez (2015) narrated that older PDL's have a notion that they have acquired illnesses inside the jail and cardiovascular, musculoskeletal, sensorineural and gastrointestinal problems are the most common.

Meeting basic needs was another concern raised which revolves on complaints about food and safe drinking water, water supply, toileting, and bathing, and sleeping conditions. Nutritious food and safe drinking water is one identified issue inside the jail since food rations can be delayed despite the regular availability (Portuguez, 2015). Moreover, food may not be appreciated due to rations being considered small or something that the PDL's are not used to. Prison food is of poor quality and is not appropriate for older PDL's (Wangmo, et. al, 2018). Philippine jails are often overcrowded, limiting the access of basic needs (Narag & Lee, 2017) and the performance of ADL's like eating, bathing, and toileting (Greene, et al, 2018). Nutritious food and safe drinking water are few issues related to the basic needs of older PDL's. Provision of food rations is delayed in some prisons (Portuguez, 2015). However, Portuguez (2015) also mentioned other PDL's feel more secure because of regular food rations and shelter. Prison food is of poor quality and is not suited to the needs of older prisoners (Wangmo, et. al, 2018). Others may have complained since they are not used to the food being served inside the jail. Activities of Daily Living like eating, bathing, transferring, toileting or dressing can be issues encountered by older PDL's (Greene, et al, 2018). Common problems in Philippine prisons are overcrowding, lack of basic necessities and lack of personnel. In addition, there is also the lack of space that contributes to death and illness which is expedited by overcrowding that results to limited access to basic needs (Narag & Lee, 2017).

There are significant factors that alleviate the adversities that older PDL's encounter like the presence of activities and programs that aid the health and well-being of PDL's and the presence of social relations inside and outside the jail. Older PDL's have the notion that the jail activities were beneficial to them. The Therapeutic Community Modality Program (TCMP)

is a program that addresses behavior management, intellectual and spiritual aspects, emotional and psychological aspects and vocational or survival aspects with a primary goal of fostering personal growth through reshaping one's attitude and behavior with the help of the other PDL's in the preparation on reintegration (Escabel, et. al., 2015). Religious classes and livelihood programs are supplementary to the TCMP. Activities like this help the coping capabilities of PDL's (Gonçalves, et. al., 2015). Older PDL's acknowledge the current healthcare system as functional and have served them during urgent and emergent matters despite the lack of medication and other supplies (Escabel, et. al., 2015). Stevens, et. al (2018) acknowledged promising practices in the care of older prisoners including the health and wellness needs, social relations inside and outside the jail, social support, and improving or creating aged-care programs. These supporting factors are available to all PDL's; thus, experience may not be unique to older adults. Forsyth, et. al (2017) stated the older prisoners receive the same support as younger prisoners do.

Daily activities that are formal or informal, and individual or collective, depending on the institutional offer and preference of each prisoner, as well as, the period of the day can help in the coping of the PDL's and swift passing of time. In addition, activities can give PDL's freedom and autonomy, a distraction from personal concerns, and ways for channeling stress (Gonçalves, et. al., 2015). The Therapeutic Community Modality Program (TCMP) is an inmate management approach that introduces a new way in life during confinement that includes four categories, specifically behavior management, intellectual and spiritual aspects, emotional and psychological aspects and vocational or survival aspects. This said program has the primary goal of fostering personal growth through reshaping one's attitude and behavior with the help of the other PDL's (Escabel, et. al., 2015). Furthermore, this program provides social expectations that are equivalent to social demands that the PDL's will encounter upon release and reintegration to the family and community (Escabel, et. al., 2015). Health services in jail are considered effective by PDLs despite the fact that a number of PDL's with chronic needs do not receive appropriate care (Escabel, et. al., 2015).

Family visits and the social relations formed inside were also valued as this assisted PDLs to cope with jail life. Black (2015) mentioned that regular visitations help establish, maintain, and enhance social support networks that contribute to one's overall well-being. Moreover, De Claire and Dixon (2017) stated that this has positive effects on psychological and emotional well-being. The social relations built inside the jail provides emotional support as they tend to open up and talk about the experiences and hardships encountered during imprisonment (Sentse, et. al, 2019).

Resilience was built by older PDL's as the significant factors mentioned served as its foundation. Adapting to jail life, restoring or strengthening their faith, and the new life they envision upon freedom are signs of resiliency. Older PDL's are able to alter their behaviors, attitudes, and language to conform to culture, rules and regulations in order to avoid conflicts and endure the challenges which was discussed by Escabel, et. al., (2015). Furthermore, everything follows once the PDL's accept the new reality they are in and reasons why they are incarcerated (Escabel, et. al., 2015). Being more prayerful and strengthened faith were common among key informants while acknowledging their incarceration as God's plan. PDL's will realize that it is the Lord who is always by their side and that they become active to redeem themselves. (Flores-Barolo & Vicente, 2019). In addition, the PDLs' belief in a higher being that is always on their side is a way to strengthen and build their resilience (Stansfield et al., 2018).

As the informants cope with jail life inside, they look into the positive spectrum of life and plan for the future outside the jail. A positive outlook is developed and they create plans to address the mistakes they have done. And as result, they become better versions of their previous selves as they avoid the wrongdoings of the past and plan to become good members of the community (Flores-Barolo & Vicente, 2019). PDL's undergo a process of self-reflection and self-renewal throughout their stay inside the jail and continuously reflect and assess themselves and renew and address the unpleasant parts (Flores-Barolo & Vicente, 2019). Older PDL's face the pains of imprisonment but with the help of supporting factors they learn to adapt and to cope with the new normal. A new person is developed as they look forward to living a better life where they envision a new chapter of being free.

Strengths and Limitations. Conducting the study within a jail setting required a meticulous approach to both administrative and ethical considerations. The researchers adhered strictly to the administrative protocols set by the jail authorities and maintained the highest ethical standards throughout the process. The sampling strategy employed ensured maximum variation, with informants representing Metro Cebu, as well as, the Northern and Southern territories of Cebu Province. Interviews were conducted in a private, separate room, which provided a secure environment for both the interviewers and informants. This setting facilitated the collection of rich qualitative data. Furthermore, data gathering in the Cebu City Jail Male Dorm was canceled due to the facility's strict prohibition on the use or entry of cellular phones or any recording devices. Despite this limitation, data saturation was still achieved. However, the primary limitation of the study is its lack of generalizability, as the findings are primarily reflective of the specific experiences of the informants.

Implications

Prison life imposes challenges to the lives of older Persons Deprived of Liberty that are specific to mental, social, and physical health, and the meeting of some basic needs. Depression and sadness are common mental health issues encountered. They experience several physical and physiologic health conditions that can be associated to aging. Food is not a major concern due to regular rations but safe drinking water is not freely available. Water supply is limited and toileting and bathing is greatly affected with the overcrowding in jails.

There is a functioning jail health care system and the presence of activities. The clinic is manned by jail officers who are registered nurses. The clinic addresses basic health concerns and maintenance medications but is subject to availability. Programs like the Therapeutic Community Modality Program (TCMP), daily exercises, religious classes, and livelihood activities are present to address the wellness of PDL's. Social relations inside the jail are present and beneficial to the older PDL and the importance of regular family visits is being highlighted.

Older PDL's adapt to life in jail and become resilient. They adjust to the jail culture, establish a stronger faith, and undergo a self-evaluative process that helps them become better persons as they plan for the future. A positive outlook develops as they renew themselves.

Gerontology and penology nursing is not a strong factor inside our jail system. Nurses inside the jail are tasked to take care of the entire community without any special considerations on older PDL's. Older prisoners are treated similarly to the younger ones and would have similar access to all the supporting activities and necessities inside the jail.

This study helps improve the quality of care for older PDLs, ensuring that they receive the attention and support necessary to live with dignity and optimal health. This study reached the data saturation and utilized bracketing minimizing the biases and enhancing the rigor of the study. However, the proponents identified a study limitation specifically on the locale of the study which only focused on one correctional facility.

Conclusion

Addressing the healthcare needs of older persons deprived of liberty (PDLs) is essential to ensuring their well-being and dignity within the correctional system. The study reveals that older PDLs face unique challenges, including complex health conditions, limited access to specialized care, and significant emotional and psychological stress. Given the aging population in jails and the rising prevalence of age-related health issues, it is imperative that jails enhance their healthcare systems and implement targeted interventions to support this vulnerable group.

To improve the care of older incarcerated adults, a multi-dimensional approach encompassing programmatic, policy, and research-based strategies is necessary. Nurses, as frontline healthcare providers in correctional facilities, play a pivotal role in this process. Their involvement is crucial in both direct patient care and in shaping systemic changes to address the specific needs of older PDLs effectively.

Recommendations

Based on the findings of the study, these recommendations are presented:

1. *Geriatric Care Programs.* That correction facilities may implement specialized geriatric care programs within jails to address the unique medical and psychological needs of older PDLs. This should include regular health screenings/check-ups, chronic disease management, and cognitive assessments. Develop exercise and wellness programs tailored for older adults to maintain physical fitness and improve overall health. Programs like the Therapeutic Community Modality Program (TCMP), daily exercises, religious classes, and livelihood activities should continue and be regularly assessed as they are beneficial to Older PDL's.
2. *Mental Health Services.* That correction facilities may establish dedicated mental health services that cater to the psychological needs of older PDLs, including therapy, support groups, and counseling focused on aging-related issues. This is one of the main concerns encountered by the informants.
3. *Training Programs for Staff.* That correctional facilities may conduct training for healthcare and correctional staff on the specific needs and challenges faced by older PDLs, emphasizing empathy, understanding, and effective communication.
4. *Enhanced Accessibility.* That correctional facilities adapt facilities and living quarters to ensure accessibility for older adults, including modifications for mobility aids, safety features, and ergonomic adjustments. Constant support on the social relations can help in the well-being of PDL's and can be monitored to check and record its effectiveness. Regular family visits should continue as this is a factor that positively affects the well-being of PDL's.
5. *Healthcare Standards and Protocols.* Correctional facilities must develop and enforce policies that ensure all jails meet minimum healthcare standards specifically designed for older PDLs, including access to geriatric care specialists and adequate medical equipment. Create protocols for the management of chronic conditions and cognitive impairments to provide consistent and effective care across facilities. Overcrowding and sleep deprivation were also found in the facility.

6. *Advocacy and Rights Protection.* Correctional facilities must advocate for policy changes that protect the rights of older PDLs and ensure they receive equitable and dignified care. This includes addressing issues related to end-of-life care and ensuring access to legal advocacy services.
7. *Resource Allocation.* Correctional facilities must allocate funding and resources to support the implementation of specialized healthcare programs and necessary facility adaptations and even their basic need provisions for older PDLs. Food and water supply were of their main concern that needed to be allocated adequately. Regular inventory of medical and healthcare stocks can be done and earlier procurement of supplies can follow.
8. *Future Research.* That future researchers must conduct research on the health outcomes of older PDLs to identify specific needs, gaps in care, and effective interventions. This data should inform future policy and program development.

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ABOUT THE AUTHORS



Mark Gilbert S. Milallos, RN, LPT, MSN is currently a Faculty of Cebu Normal University College of Nursing who handles undergraduate clinical supervision and research mentorships. He is a registered nurse and a licensed professional teacher. He is an experienced Utilization Management

Nurse and served the Department of Health during the peak of the COVID-19 pandemic. He is a candidate and is currently working on his dissertation for the degree Doctor of Science in Nursing Major in Gerontology Nursing in Cebu Normal University. He finished his Master of Science in Nursing Major in Medical-Surgical Nursing from the same institution. He obtained a Diploma in Professional Education from Cebu Technological University and his Bachelor of Science in Nursing from the University of Cebu – Banilad Campus. He has authored and co-authored a few published articles in international and national refereed and indexed journals. He has presented some of his research works in both local and international arenas receiving awards in several of those presentations. He is into qualitative research mainly into phenomenology covering subject areas of health research, gerontology nursing, adult health, and gender and development.



Dr. Jezyl Cempron-Cutamora is currently a Professor VI of Cebu Normal University and the Chairperson on Operations – Department of Nursing Research of the Philippine Nurses Association – National. She is the former Dean of Cebu Normal University – College of Nursing, the former Director of the Research

Institute for Ageing and Health (RIAH) and the former Vice-Chair of Ethics Review Committee-Cebu Normal University. She is a registered nurse and she finished her Master's in Nursing and her PhD degree major in Research and Evaluation. She was a DOH scholar for her BSN and a CHED Scholar in her PhD and was an International Support and Collaboration for Continuing Excellence in Educational Development (ISUCCEED) scholar with Our Lady of Fatima University and Saxion University of Applied Sciences - Netherlands. She has authored and co-authored several published research in indexed journals. She has various funded research both internationally and nationally. She received research awards for publication and presentation of research articles and other professional awards. She is into the fields of quantitative health research, big data analytics, and evaluation designs.