

# Effects Of Psychosocial Support On The Mental Health Of Cameroonian Inmates

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**Abstract**—The purpose of this study is to verify whether perceived psychosocial support improves the mental health of inmates of the Bafia prison. this study emerges from the idea that inmates represent a vulnerable population, particularly due to overcrowded prisons, thereby leading to poor detention conditions. It is observed that the absence of constructive communication alongside the violence of other inmates are responsible for the loss of reference points. In other words, the shock of confinement, the shock of the trial, and the poor living conditions of the inmates of the main prison of Bafia would affect their mental health. This paper therefore addresses the problem of the deterioration of mental health in an environment that does not allow inmates to mobilize the resources to cope with prison. since this paper is a quantitative study, we conducted a field study using questionnaires among 112 inmates of the Bafia prison following a purposive sampling technique. To conduct this survey, we administered a questionnaire assessing perceived psychosocial support and perceived mental health. The data collected were subjected to a double analysis: descriptive and inferential. The results of the linear regression analyses reveal that the dimensions of psychosocial support namely: emotional support ( $\beta= 0.22$ ;  $p= 0.001$ ), esteem support ( $\beta= 0.19$ ;  $p= 0.001$ ), informational support ( $\beta= 0.21$ ;  $p < 0.001$ ) and material support ( $\beta= 0.13$ ;  $p= 0.04$ ) have a statistically significant and positive effect on the mental health of the inmates. These results clearly indicate that the

dimensions of psychosocial support could constitute levers to fight precariousness and improve the level of mental health in the Cameroonian prison environment.

**Keywords**— *mental health, psychosocial support, inmates, Bafia*

## I. INTRODUCTION

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In its 2015 report, the [1] estimated that millions of people around the world are incarcerated and held in conditions that do not meet international human rights standards. In Cameroon, for example, the central prisons of Yaounde and Douala designed for 800 to 1000 inmates, house more than 4000 souls each day to date. The main prison of BAFIA, the site of this study, is not an exception. Its capacity designed to accommodate about 200 inmates, rather accommodates about 416 inmates, for an occupancy rate of 208%. Observations made in the prison environment reveal that the cells can no longer contain the large number of inmates, the infrastructure is widely worn out over time and can no longer ensure decent living conditions for inmates. It should be noted as indicated in the [2] that most of the prisons in Cameroon built during the colonial era are dilapidated, cramped and in ruins. The overall capacity of Cameroon's prisons is about 14,965 slots. Cameroon currently has approximately 30 000 inmates.

These conditions of detention severely limit their chances of a productive reintegration into society. From this observation, the overcrowding of prisons in

the world affects the health of inmates and prevents the application of minimum standards of detention defined by the United Nations. Generally, it is widely accepted that whenever an individual violates the law through his or her actions, the enforcement of a sentence of deprivation of liberty is the sovereign power of the judiciary to discipline the violator. However, for a detainee, it is the State's duty to ensure that the fundamental rights of this person are protected. To this end, the United Nations Human Rights Committee considers this responsibility to be a positive obligation of States to protect the rights of persons made vulnerable by their status of detainees. Moreover, people are detained to execute a sanction, not to be sanctioned. Detention should therefore not worsen the suffering caused by the deprivation of liberty, as prison and detention conditions have a considerable impact on the health and welfare of inmates [3].

For all individuals, the right to health is fundamental and indispensable for the exercise of many other rights. It involves not only the right to appropriate and timely medical care, but also the management of health determinants such as the right to food and nutrition, access to safe and potable water, adequate sanitation, the right to clothing and housing, and the right to outdoor air and physical or mental exercise [3]. When these minimum rules of detention are violated, the detention constitutes a sort of double punishment for the detainees. In addition to the deprivation of freedoms, the carceral environment deprives detainees of the enjoyment of all human rights such as the right to health, to food, to dignity, to privacy, to security, to equity before the law and protection of the law, and to the presumption of innocence. Unfortunately, during our field trips, we noticed that there is no other place where access to medicine and good living conditions are more neglected than behind prison walls. As a result, disease becomes the most common cause of death.

These prison conditions eventually impact on the health of inmates. Prison conditions generate lasting psychological effects that lead to psychosocial disabilities. In this regard, the epidemiological data available on the health of detainees show a very high incidence of numerous pathologies, particularly cases of psychiatric disorders [4]. As a result of their living conditions, inmates would lose a number of skills (language, behavioral, intellectual activities, protective and resilient disabilities), social skills, as well as their ability to cope and take care of themselves [5]. Finally, it is clear that the detention conditions in our penitentiary system do not allow the promotion of protective health factors given the overcrowded prisons, which impose a precarious life on the inmates, resulting from the deterioration of their physical and mental health.

Today, depending on whether one lives in a vulnerable environment or not, promoting mental health is of paramount interest, as it is a key factor in the quality of life and daily resource for people's well-being. Although the State's mission is to fight crime

and prevent recidivism, the prison, as one of its institutions, must promote an environment that prepares people for change. However, in view of the prison environment of our system and the means that are allocated to it, prisons are community homes whose members represent a burden for the public authorities and require several investigations to enable decision-makers to fine-tune new policies for the promotion of well-being. It is clear that the State alone cannot guarantee complete well-being for inmates; the social network and the family sphere are all actors to be mobilized as resources or support for inmates. This idea is mainly inspired by the work of [6] who believes that in order to reduce suicide, stress and anxiety among inmates as much as possible, it is necessary to establish a climate of good relations and maintain family ties. Indeed, we postulate that respect, recognition, and minimal enforcement of detention rules, along with a good psychosocial support network, would help mitigate the adverse effects of criminal conviction, incarceration, and stigmatization on the mental health of inmates. A timely and adequate support can prevent the anxiety and suffering inherent in the prison environment from escalating into more serious mental health problems. From this perspective, what is the effect of psychosocial support on the mental health of inmates of the Bafia prison?

This study does not follow the early empirical studies on social support that tended to treat this concept as a unidimensional construct, but rather recent studies that attempt to describe its components and assess their respective contributions on different measures associated with mental health. The contribution of [7] is particularly interesting in view of understanding the importance of social relationships in the maintenance of balance in humans. He describes five essential functions that arise from these relationships in order to ensure balance: emotional support, social integration, the provision for attachment/intimacy (Intimacy), the indication that one is valued (Esteem) and the availability of information, emotional and material help (Assistance). Social support is considered by several authors as a buffer variable producing a protective effect against the effects of stress, preventing the development of symptomatology (*stressbuffering model*) [8, 9], while others consider it as a variable more fundamental to adaptation, having a direct effect on health and well-being, regardless of the stress conditions [10]. In this study, life in prison involves a double challenge, that is to endure the shock of confinement, social disruption, and the shock of the trial, while adapting to the tough environment resulting from poor living conditions. This research is in line with the idea that social support can help to adapt and improve or protect the mental health of inmates.

## II. HYPOTHESIS

### A. General Hypothesis

The level of mental health of inmates in Bafia prison varies according to perceived psychosocial support.

**B. Operational Hypothesis**

- H1: Psychosocial support based on perceived emotional support improves the level of mental health of Bafia prison inmates.
- H2: Psychosocial support based on perceived esteem support improves the level of mental health of Bafia prison inmates.
- H3: Psychosocial support based on perceived informative support improves the level of mental health of Bafia prison inmates.
- H4: Psychosocial support based on perceived material support improves the level of mental health of Bafia prison inmates.

**III. METHOD**

**A. Site and participants**

For this study, we carried out a survey among inmates at the Bafia prison. The participants were selected using the convenience sampling technique. The average age of the inmates interviewed was between 20 and 25 years. This is a prison population that seems very young, with an average of less than one year of incarceration. Furthermore, the majority of respondents, 58 inmates (51.8%), are awaiting trial and 53 (47.3%) are convicted. Overall, 108 inmates (96.4%) are men while four are women, representing 3.6% of the sample.

**B. Material**

The approach used for data collection was primarily based on the administration of a questionnaire consisting of measures of mental health and psychosocial support. A section dedicated to information on the socio-demographic characteristics of participants was also provided.

▪ **Mental Health**

The instrument to measure Perceived Mental Health was developed from the 12-item measurement tool [11]. Item example: item 2: *I can make decisions*; item 1: *I focus on everything I do*.

Participants were asked to express their level of agreement with each item or suggestion using a 4-point Likert scale: 1- Strongly disagree; 2- Disagree; 3- Agree; 4: Strongly agree. The reliability analysis performed shows a satisfactory Cronbach's alpha of 0.70.

▪ **Psychosocial support**

The instrument used to measure perceived psychosocial support was developed from the measurement tool [12], comprising 12 items divided into four dimensions: emotional support (Prison guards treat me with dignity); esteem support (Other inmates trust me); informational support (I receive information about my legal proceedings); and material support (I have been receiving money since I arrived prison).

Participants were asked to express their level of agreement with each proposal using a 4-point House

scale 1: 1 "strongly disagree", 2 "somewhat disagree", 3: "somewhat agree", 4 "strongly agree": The reliability analysis performed equally shows a satisfactory Cronbach's alpha of 0.70.

**C. Statistical treatment**

In this study, two types of analysis were used: descriptive analysis and inferential analysis. These first analyses enable us to describe the results obtained for each of the variables of this study. For this purpose, the study presents the descriptive results (mean and standard deviation) for the different measurement scales. Inferential analysis was used to test the hypotheses of the study. The choice of statistical processing tools used was determined by the nature of the data collected (numerical) and by the hypotheses of the study. To determine whether psychosocial support improves inmates' mental health, we used correlation and simple linear regression analyses. This technique allows to specify the contribution of the different dimensions of psychosocial support on mental health.

**IV. RESULTS**

**A. Correlation analysis**

The results of the correlation analysis show that the dimensions of perceived psychosocial support have a significant and positive relationship with perceived mental health. Hence, emotional support has a significant and positive relationship with perceived mental health ( $r= 0.30$ ;  $p< 0.01$ ). However, the value of the correlation coefficient remains low. Esteem support has a significant and positive relationship with perceived mental health, although the value of the correlation coefficient appears to be low ( $r= 0.31$ ;  $p< 0.01$ ). Informational support has a significant and positive relationship with perceived mental health, although the value of the correlation coefficient appears to be low ( $r= 0.33$ ;  $p< 0.01$ ). Material support has a significant and positive relationship with perceived mental health, although the value of the correlation coefficient appears to be low ( $r= 0.18$ ;  $p< 0.05$ ).

Table 1: Correlation matrix (N= 112)

	1	2	3	4	5
Emo_Support	-				
Es_Support	0.65**	-			
Inf_Support	0.44**	0.33**	-		
Mat_Support	0.29**	0.23*	0.46**	-	
Mental health	0.30**	0.31**	0.33**	0.18*	-
Mean	2, 35	2, 47	2, 16	2, 13	2, 56
Standard deviation	0, 77	0, 91	0, 85	0, 81	0, 57

\*\* . The correlation is significant at the 0.01 level (2-tailed); \* . The correlation is significant at the 0.05 level (2-tailed).

**B. Inferential analysis**

Simple linear regression analysis provides better insight into the relationships between these variables.

- Results of the first operational hypothesis

This hypothesis was formulated as follows: psychosocial support based on perceived emotional support improves the level of mental health of inmates in Bafia prison.

Table 2: Simple regression of emotional support on mental health

	AdjustedR <sup>2</sup>	β	t	p
<b>Mental health</b>	0.08		3:34	<b>0.000</b>
<b>EM_Support</b>		<b>0.22</b>		

The results reveal that perceived emotional support has a statistically significant influence on mental health ( $\beta= 0.22$ ;  $p= 0.001$ ). As expected, perceived emotional support with regard to the value of the regression coefficient enhances mental health. The contribution of perceived emotional support in explaining mental health is nearly 8.4% ( $R^2_{adj}$ ). This observation is consistent with our hypothesis. The hypothesis  $H_1$  is thereby logically confirmed.

- Results of the second operational hypothesis

This hypothesis was formulated as follows: psychosocial support based on perceived esteem support improves the level of mental health of inmates in Bafia prison.

Table 3: Simple regression of perceived esteem support on mental health

	AdjustedR <sup>2</sup>	β	t	p
<b>Mental health</b>	0.09		3:47	<b>0.00</b>
<b>EST_Support</b>		<b>0.19</b>		

The results reveal that perceived esteem support has a statistically significant influence on mental health ( $\beta= 0.19$ ;  $p= 0.001$ ). As expected, perceived esteem support with regard to the value of the regression coefficient improves with mental health. The contribution of perceived esteem support in explaining mental health is nearly 9.1% ( $R^2_{adj}$ ). This observation is consistent with our hypothesis. The hypothesis  $H_2$  is thereby logically confirmed.

- Results of the third operational hypothesis

This hypothesis was formulated as follows: psychosocial support based on perceived

informational support improves the level of mental health of inmates in Bafia prison.

Table 4: Simple regression of perceived informational support on mental health

	AdjustedR <sup>2</sup>	β	t	p
<b>Mental health</b>	0.10		3.66	<b>0.000</b>
<b>INF_Support</b>		<b>.219</b>		

The results reveal that perceived informational support has a statistically significant influence on mental health ( $\beta= 0.21$ ;  $p= 0.000$ ). As expected, perceived informational support with regard to the value of the regression coefficient enhances mental health. The contribution of perceived informational support in explaining mental health is nearly 10% ( $R^2_{adj}$ ). This observation is consistent with our hypothesis. The hypothesis  $H_3$  is thereby logically confirmed.

- Results of the fourth operational hypothesis

This hypothesis was formulated as follows: psychosocial support based on perceived material support improves the level of mental health of inmates in Bafia prison.

Table 5: Simple regression of perceived material support on mental health

	AdjustedR <sup>2</sup>	β	t	p
<b>Mental health</b>	0.026		2:02	<b>0.04</b>
<b>MAT_Support</b>		<b>.13</b>		

The results reveal that perceived material support has a statistically significant influence on mental health ( $\beta= 0.13$ ;  $p= .04$ ). As expected, perceived material support with regard to the value of the regression coefficient enhances mental health. The contribution of perceived material support in explaining mental health is nearly 2.6% ( $R^2_{adj}$ ). This observation is consistent with our hypothesis. The hypothesis  $H_4$  is thereby logically confirmed.

The results of the various hypothesis tests indicate that psychosocial support contributes to the improvement of the mental health of interviewed inmates.

V- DISCUSSION

In this study, psychosocial support was studied in four dimensions: emotional support, esteem support, informational support and material support (House, 1981). The descriptive analysis carried out shows that inmates of the Bafia main prison who participated in

our study seem to report an average level of psychosocial support of all the dimensions assessed in general. The indices of central tendency (mean) and dispersion (standard deviation) indicate the following values: the dimension of emotional support (mean= 2.35; SD = 0.77), calculated esteem support (mean= 2.47; SD = 0.91), informational support (mean= 2.16; SD = 0.85) and material support (mean= 2.13; SD = 0.81). One must admit that the interviewed inmates in this study seem to benefit from support, although tangible for some, but weak in mobilizing resources required to fight the adversity of the prison environment.

This observation is justified by the data in our results, since none of the dimensions tested among our respondents is above the theoretical average of the scale of 2.5. These results give the impression that interviewed inmates are abandoned and neglected. As a result, it might seem normal that a good number of them live in a state of discomfort due to the harsh living conditions and the almost near absence support. This explains why in a study [13] it was found that life in prison generates psychological distress in more than 50% of the inmates in lack of support.

The descriptive analysis carried out shows that the level of mental health of the inmates is quite poor, which constitutes a major challenge to overcome

- Emotional support and mental health

The results showed that when inmates perceive that they feel are receiving emotional support, their mental health tends to improve. As a matter of fact, the Bafia prison does not have any social worker, let alone a mental health specialist, whose role is essential in providing psychological first aid during prison admission, to help the person deal with the shock of confinement. And yet, it is known that this support constitutes a powerful stress moderator and plays a protective role, especially in social isolation context such as prison. The person experiences a break from his or her living environment. He needs a professional who will give a listening ear and engage in constructive communication. Unfortunately, such is not the case in our prisons. In as much as humanization requires listening, speaking, touching, and looking, these four concepts are barely taken into account in the inmate's treatment.

- Esteem support and mental health

Psychosocial support based on perceived esteem support helps to build self-esteem, which is an individual protective factor for mental health. Esteem support will help inmates to feel recognized and to adopt appropriate behaviours in diverse situations. This support focuses on showing that prison is not the end of life, rather an opportunity for inmates to start a new life with a fresh start. It must therefore be a carrier of hope because the inmates deserve to feel useful. For this reason, according to [3], trade schools or educational activities are promoted within prisons, requiring special attention from the prison administration to allow inmates express their know-

how or to acquire new skills in view to social reintegration after incarceration. A lack of educational activity, drowns the inmates in idleness. This might lead them into developing interest in the exchange of unhealthy experiences responsible for recidivism and the resurgence of criminality in society.

- Material support and mental health

The results showed that material support, which seems to have the lowest score in our results (Mean = 2.13; E-T = 0.81), however give the best illustration of the misery the interviewed inmates go through. This is because in a prison where overcrowding is not a myth (218%), inmates need significant material support from third parties to add some dignity to their lives. If inmates receive material support from time to time, it would be interesting to see public authorities, benefactors and families improve donations and basic necessities.

- Informational support and mental health

The results of the descriptive analyses revealed that the vast majority of interviewed inmates in this study felt they did not have adequate informational support. This indicates that when inmates perceive adequate informational support, their mental health tends to improve. Yet, this is useful insofar as it provides ways to get information about their legal proceedings, family and businesses. We believe living clueless about one's family and business is similar to being dead. Let's say providing information support to a detainee is allowing him prepare his defense, his release, his social and professional reintegration with confidence, thus preventing him to experience intense anxiety.

Finally, the results obtained from the hypotheses tests clearly indicate that the dimensions of psychosocial support could constitute levers to fight precariousness and improve the level of mental health in the Cameroonian prison environment.

#### VI- Limitations

Several limitations should be considered regarding the interpretation and generalization of the results of this study. First, the size of the sample (N=112) requires modesty in the evaluation of the results obtained, since this proportion is not representative of the reference population. It would therefore be interesting to assess a larger sample. Furthermore, the reliability study carried out in the context of this research revealed Cronbach's alphas that were generally acceptable. This confirms the need to improve our tools for a better adaptation to the context. On the other hand, the measurement tools used in this study were not locally adapted to suit in the context of the study. This is particularly the case of mental health measurement tool. This study would have enabled the research of the dimensions of each of the variables specific to our context and population.

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