Anti-Social Behavior, Prison Condition and the Development of Stable Personality by Minor Prisoners

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ABSTRACT

This study was based on antisocial behaviour, prison conditions and their influence on the development of a stable identity among child prisoners, in other to investigate this aspect, it lead to the formation of items to investigate aspects of prison conditions and how they influence the formation of a stable identity of child prisoners. This therefore led to the formation of the research question: anti-social behaviours and prison conditions influence the building of a stable identity of child prisoners. From these, five objectives were generated from the following indicators, overcrowded nature of prisons, health care service, physical and sexual abuse, solitary confinement, and social support. A sample of 40 was used for the study from two prisons in the south west region of Cameroon and the purposive sampling techniques was used to select the participants. The instrument used for the collection of data was a questionnaire which composed of a likert scale section and an open ended section. And for this study a survey design was used and data was analysed using descriptive statistic, mean estimation and thematic analysis. Using the percentages of statistical data, Findings revealed that the overcrowded prisons, physical and sexual abuse, solitary confinement, and social support could all negatively influence the formation of stable identity among child prisoners while health care service could not be link directly to a negative effects.

KEYWORDS: antisocial behavior, prison conditions, personality, minor prisoners

INTRODUCTION

Many young children are imperilled by abuse, neglect, domestic, community violence and poverty. Without effective intervention and help, these children suffer, struggle and fall into despair and hopelessness. Some young teens cannot manage the emotional, social and psychological challenges of adolescence and eventually engage in destructive and violent behaviour. Sadly, many have ignored the crisis and dysfunction that creates child delinquency and instead have subjected kids to further victimization and abuse in the adult criminal justice system (Abrams, 2006).

In order to be able to tackle anti-social behaviour effectively it is important that practitioners with responsibility for addressing the problem have a clear knowledge and understanding of the behaviours occurring in their locality. The interactional theory of Thornberry and Krohn (2005) focuses on factors encouraging anti-social behaviour at different ages and their views are influenced by the findings in the Rochester Youth Development Study (Thornberry et al.,2003). This study is interested in looking at some of the antisocial behaviour that course children to be sent to prison, and also see how the prison condition influence their formation of a stable identity, while looking at some of the mechanisms put in place to ensure and help these children grow into stable and socially acceptable citizens.

This chapter comprises of the statement of the problem, the research questions, and the general and specific objectives of the study. The chapter also depicts the purpose of the study, justifications and significance of the study. The chapter closes with operational definition of terms used in the study.

The Background to study

Antisocial behaviour is defined as a pattern of behaviour that is verbally or physically harmful to other people, animals, or property, including behaviour that severely violates social expectations for a particular environment. They may include stealing, lies telling, runaway tendencies, bulling, smoking, examination malpractices, abortion, rape and cultism. It is categorized with conduct disturbance, under defiance and aggression (Cullinan, 2004). It is worth noting that antisocial behaviour is not a mental disorder but requires attention because it completely derails the child from school and home (American psychiatric association, 1994).

According to **Gibbs, Potter, Barriga, & Liau, (1996)**Antisocial behaviour can be broken down into: the presence of antisocial behaviour (i.e., angry, aggressive, or disobedient) and the absence of pro-socialbehaviour (i.e., communicative, affirming, or cooperative). The presence of antisocial behaviour can be placed under circumstances that are not socially acceptable and are regarded as morally and or social deviant like stealing, lies telling, bulling and more*(Berger, 2003).,* prosocial behaviour on the other hand is behaviour that is balancing the needs of others with our own, for the overall benefit of everyone.

Pro-social societies have these basic pro-social rules:
➢ Self-respect
➢ Respect for others
➢ Respect of property and space
➢ Act toward others as you would want to be treated
➢ Act in the moment and anticipate the future

Most children exhibit some antisocial behaviour during their development, such as lying, stealing verbal assault. Children also demonstrate varying levels of pro-social and antisocial behaviour. for example, some children may exhibit high levels of both antisocial and pro-social behaviours; for example, the popular but rebellious child. Some others may equally exhibit both types of behaviours; such as, the withdrawn, thoughtful child. According to Gibbs, Potter, Barriga, & Liau, 1996, high levels of antisocial behaviours are usually considered a clinical disorder for example young children may exhibit hostility towards authority, and be diagnosed with oppositional-defiant disorder. Older children may lie, steal, or engage in violent behaviours, and be diagnosed with conduct disorder

A highly significant characteristic of children with antisocial behaviour is the incapacity to learn from their social and cultural environment as well as in an academic situation (American Psychological Association, 2000). According to Cecil (2007) this inability can't be attributed to factors such as health issues, intellectual deficits or learning disabilities. Researchers have also found that antisocial behaviours can be attributed to aspects such as Modelling, Bandura (1961, 1963), deindividuation, Zimbardo (1969), relative deprivation Milgram's (1963),Runciman (1966) Abeles (1976), environmental stressors, Calhoun (1962),Baron and Ransberger (1978), Berkowitz et al. (1979).

According to Irving (2005) an individual's antisocial tendencies typically has a learning style that is more receptive to reward than disciplinary action. In fact, a child with antisocial behaviour will continue to engage in maladaptive behaviour despite the threat of punishment. Punishment as a method to control the occurrence of antisocial behaviour might fail because in some cases it can instead promote the occurrence. Many at times it has been noticed that individuals turn to carry grudges towards those who punished them or those who reported or caused them to be punish and such situations might lead to violence or harassment or outward disobedience and disrespect towards such persons.

Because children with antisocial behaviour are unable to learn appropriate behaviour in a particular social or cultural context, they tend to exhibit inappropriate behaviour, such as temper tantrums, use of profanity, bossiness, excessive jealousy, impertinence, fighting or flamboyant attention-seeking *(Tang,1990).*With such activities these children can be classified as being socially maladjusted as they always find themselves in trouble with their teacher, peers and some cases in conflict with the law because it's not unusual for children with antisocial behaviours to react to and defy authority figures. In addition, the child with antisocial behaviour will repeatedly violate social norms until this behaviour forms a pattern in terms of frequency, intensity and duration, such inappropriate behaviour inhibits the ability of the child with antisocial tendencies to form healthy interpersonal relationships. Equally, this may also be

difficult as the child usually lacks empathy or warmth toward other people, he grows even more isolated and ends up either in rehabilitation or does something that requires judicial attentions and implications; this ends up with them being sent to prison(Craighead, 2010).

Scholars such as (Taylor, et al., 2014) have identified various causes of antisocial behaviours amongst children. These causes range from personal, family to societal related issues. Literature is evident in some studies that a child can exhibit antisocial behaviour due to poor family background. Meyer (1995) reported that specific parenting practices are highly correlated with antisocial behaviour in early childhood and are prognostic of more serious form of antisocial behaviours. According to him, coercive or punitive interactive circles can occur in the home as the child makes demands on the parents who lack certain parenting skills.

The influence of peer in child's behaviour cannot be underestimated. It could be positive or negative. Mayer (1995) reported that the involvement of the child with deviant peers appears to accelerate the growth of antisocial behaviour. Further, children with antisocial behaviour turn to choose similar peers as playmates. This association patterns usually develop during the primary school years when peer group acceptance and the need to belong first becomes important. Aggressive children are the most likely to be rejected by their peers and this rejection drives social outcast to form bonds with one another. This relationship can encourage and reward aggression and other antisocial behaviours. These associations may later lead to gang membership (Black, 2006).

Anti-social behaviour can be as a result of some factors related to an individual. South Holland district council (2003) listed the following personal prefactors of antisocial behaviour
➢ Alienated and lack of social commitment
➢ Early involvement in problem behaviour
➢ A high proportion of unsupervised time spent with peers and friends or peers involved in problem behaviour
➢ Early involvement in the use of illegal drugs and crime
➢ Violence and victimization

Antisocial behaviour may also be a direct attempt to alter the environment; *Bandura*, (1977) suggests that negative behaviours are reinforced during childhood by parents, caregivers, or peers. In one formulation, a child's negative behaviour such as whining, hitting initially serves to stop the parent from behaving in ways that are aversive to the child (the parent may be fighting with a partner, yelling at a sibling, or even crying). The child may apply the learned behaviour at school, and a vicious cycle sets in: when the child starts exhibiting this learned behaviour, he might be rejected by his peers. And because of this rejection, he becomes angry and attempts to force his will or assert his pride. This might lead to peer rejections, giving up an opportunity to might learn more positive behaviours.

The authorities of the former west Cameroon in the early 1960s considered socially maladjusted children as young criminals and put them together with adult criminals in the Buea central prison. Adult criminals were considered individuals above the age of 18, old enough to take full

responsibility for their actions and therefore could be tried before a court and sentenced to serve a length of time in prison for crimes they committed. This was done with the risk of the former contaminating the latter. This was also done because of the lack of a rehabilitation centre in the country. The only rehabilitation centre for maladjusted children in the territory was carried out in Lagos and Enugu Nigeria.

The movement of these children from Cameroon to Nigeria involved a lot of risk and cost. Some rehabilitators believed that keeping these maladjusted children in their own environments, (Cameroon) will go a long way to reduce the psychic torment which they suffered from being carried away so far from home with no chance of seeing a familiar face or environment. This consideration provided the fertile ground for the idea of the creation of the rehabilitation centre for the maladjusted children in Buea, Cameroon.

To this effect, presidential decree No 73/115 of 22nd march 1973, created the Borstal Institute to re-socialise and rehabilitate maladjusted children in Buea. The centre had a responsibility to rehabilitate, re-educate, and to provide a healthy environment for the children. Secondly the centre was to provide formal education to those children who were interested in schooling as well as professional and technical skills. Regardless of the creation of the Borstal institute, the Cameroonian magisterial and penal code still permitted the imprisonment of children along with adults.

Reasons for the creation of the borstal institute
➢ To separate minors from major criminals
➢ To improve on the conditions of minors in detention
➢ To reduce distance, cost and risk involved in the transportation of minors from this part of Cameroon to Northern Nigeria.
➢ To ensure the protection, resocialisation/rehabilitation and reinsertion of:
  • Juvenile Delinquents
  • Socially Maladjusted Youths/Status Offenders
  • Delicate Social cases: Orphans, Abandoned children, Run-away or Street children, all aged between 12 and 18 years, following court instructions.
➢ To give these children a chance and a hope for a better and a brighter future.

Generally, there are several ways of admitting children into the Borstal Institute, these include;

Request by parents
In this case a parent might have identified some unacceptable behaviour in a child and decides that child needs to be rehabilitated and registers the child with the Borstal Institute. Again the child's presence at the institute can be as a result of direct request from the parent to the justice system as an alternative to prison and its under conditions of paying the fines and the tuition

Request from a social worker
Social workers who work in schools and other child institute can make the request for the placement of a child who has been observed to portray antisocial tendencies.

Government request (street swipe)
The government sometimes does what is known as 'street swipes' where all street children are rounded up and sent to the rehabilitation centre this is mostly done in big towns were the number of street children are many and identified in a particular place.

And request by a court
The final option is left at the discretion of the court to decide if a child is to be sent to prison or to a rehabilitation centre depending their age or the reason why they were held. For example there are children who skip school and spend time at the game halls or gambling parlours, the police sometimes arrest them and the court can decide to send them to the rehabilitation for a particular length of time.

These children are also considered and classified differently, children who are requested by parents or social worked will be classified under children who have exhibited anti-social behaviour at home, school and environment where they stay while socially maladjusted children or juvenile detainees are those children who have done things that are considered as a felony or crime to the state and so the first option is prison but can be changed to Borstal under certain consideration which might range from the gravity of the crime, request from a guidance or the discretion of the judge. But most of the children who are arrested by the police do not get the chance to be sent to the rehabilitation centre because of the process involved in the transfer to Borstal which takes longer than the three days. The process of transfers requires the proper investigation from a social work, permission from parents in writing, financial demands and others.

Law N°2005 of 27 July 2005 on the Criminal Procedure Code section 705 makes special and clear cut specifications on the detention and treatment of child prisoners or in other words minors. It states that they should be placed in a special place in prison separated from the adult's prisoners or to be placed in a special institute where they can be trained and properly rehabilitated. A child in this case means every human being below the age of eighteen years unless, under the law applicable to the child, maturity is attained earlier in cases such as murder they can be judge as majors. Contained in rule 11 (a) of the United Nations Rules for the Protection of Juveniles Deprived of their Liberty: A juvenile is every person under the age of 18, and its specification on training and proper rehabilitation is because of knowledge of the fact that these children are in no way psychologically nor physically able to withstand the pressures of prison and there for should be kept apart so as to avoid them being used, exploited, abused , couched and influence by the adult (Linonge, 2010).

According to United Nations Rules for the Protection of Juvenile Deprived of their Liberty of (1990) section E69, Children who are detained shall be treated in a manner which promotes their sense of dignity and worth, facilitates their reintegration into society, reflects the best interests of the child and takes their needs into account. Children must not be subjected to corporal punishment, capital punishment or life imprisonment without chance of release. Children who are detained shall be separated from adult prisoner; Juveniles of compulsory school age have the right to education and to vocational training. This declaration takes into consideration of the prison conditions and their effects on children in prison knowing that these children are in danger of abuse, being used or being contaminated. Being separated from the other prisoners, educated and

rehabilitated will facilitate re-insertion and prevent recidivism (Njugwes 2008).

Cameroon ratified the CRC (convention on the rights of the child) on January 1993,the African charter on June 20, 1987 and the African children's charter on September 5 1997, the constitution of Cameroon as amended in 2008 also recognised and guarantee to all, the fundamental human right instructions (including those on the administration of juvenile justice and treatment). In addition, article 45 of the constitution provides that duly approved or ratified treaties shall follow their publications, and override national laws. In essence, Cameroons ratification of the above mentioned conventions requires mandatory adherence.

According to Kabeya (2013) at the International Catholic Child Bureau (ICCB), imprisonment or detention of children, whether temporarily (while awaiting trial) or permanently (resulting from a sentence), should be for a short amount of time, in Cameroon the time for detention on a remand is six months and renewable once for a minor offence and twice for a major felony and used only as a last resort, when no other solutions are available. there for an individual can only be held for 1 year for a minor offence and one year and six months without a sentence. The case is the opposite in our Cameroonian prisons, since children are held in prison for years and subjected to corporal and even harsher punishment, and no planned program for rehabilitation.

Children can be deprived of their freedom for delinquency activities such as: burglary, begging, vagrancy, risk of delinquency, crimes like assault, murder, and many other reasons. The above activities can be reclassified for convenience for the studies, as it had been stated earlier; the allocation of children to the Borstal institute or prison will depend on the gravity of their activities. In the case of delinquency, begging, vagrancy, and risk of delinquency are activities that can be observed by a teacher, parent, or a social work and these children can be recommended to the Borstal institute while activities such as burger, assault, aggravated theft, murder which are felony and attract legal actions, these children are sent to prison prior to judgement.

Human is right a nongovernmental organisation based in Buea, carried out a study in 2014 and realised that children in Cameroon are imprisoned or sent to the Bostal Institute for activities such as: theft, nocturnal activities, insubordination, rape, lies telling, use of illegal substance (marijuana), fighting, vagrancy, truancy, stubbornness and gambling.

In Cameroon, Approximately a thousand (1000) children are in prisons with more than 2/3rd in Yaounde, Douala Bafoussam, Maroua and Garoua central in prison. About 400 children in prisons in Douala and Yaounde, and a total of 147 in Buea and Kumba per the survey of 2014 carried out by human is right Buea. This numbers somehow indicate that there is a huge problem in respect to the occurrence of anti social behaviour and the imprisonment of children. And at the same time there was a total of 37 children in the Buea Borstal Institute and there for needs to be addressed (human is right, 2014).Most children deprived of their freedom are in preemptive detention that is, they have not been trialed for the crimes for which they were accused, and they are

between the ages of 10 and 18. The exact number of children deprived of their freedom is impossible to determine because of a lack of studies, according to United Nations branch responsible for the aid, education and health of children and women in developing countries, they estimates that more than one million children are affected by preemptive detention.(UNICEF,2013).

According to the CRC (Convention on the Rights of the Child), it is essential that children are separated from adults, in order to protect them from harmful influences ("criminal contamination") and risky situations. Studies from Wonkblog (2013) show that children who are imprisoned with adults are five times more likely to be sexually harassed and twice as likely to be physically abused. Because most of these children are searching for a solace and because most of them do not have food and shelter in the prison, they sometimes hang with older prisoners so as to be able to survive. Most of these inmates turn to take advantage of them and uses them in various ways.

Secondly children also have the right to health care, education and any aid they require, including psychological, physical and judicial help (legal aid). Leisure activities should also be at their disposal, and their freedom of religion should be respected as much as possible. In the Buea central prison there is a single doctor and three nurses and the doctor is also responsible for the Kumba prison. Therefore, it is speculative to say that the amount of health services is not enough.

Furthermore, there is a single social worker at the prison, no psychologies or counsellor to try to manage the psychological aspects of the children and the inmates in general. This lack is a stumbling block in fulfilling the aspect of rehabilitation of prisoners. The prisoner to psychologies ratio is not near balanced and because of the lack of specialist in correctional psychologies there are little or no programs that can be used to help manage the psychological needs of the prisoners.

Thirdly the use of restraining implements(chains used to restrain inmate) who are stubborn and also the use of isolation is a call for concern. This is done with the intention of ensuring that the undesired behaviour is not repeated in other word negative reinforcement to cause extinction. Last this should be limited to the most extreme cases and torture is strictly forbidden. An independent and competent authority should have the right to pay regular visits to detention sites in order to verify proper living conditions for children (Murray & Farrington 2008).

Lastly it is important for children not to be cut off from the outside world, especially from visits from their relatives and friends. This limits any poor treatment and will help to reintegrate them back into society upon their release. Because most of these children do not have family and friends and because they are placed in isolation there is a limited amount of interaction and visit from friends and family. The visits from family and friends give these children a sense of hope and an aspiration to go out and be better and at the same time help a stable identity know that they are not rejected and abandoned this helps maintain a certain level of comfort and them not giving into despair.

Reports from (ICCB) the International Catholic Child Bureau shows that the desirability or starting point should always be to assess what precisely it is that one is seeking to achieve by the passing of a prison sentence. Logically, this can be very different for different categories of offender. There are also different stages in the progression of an offender. Rehabilitation is one potential aim, but the feasibility of this will depend upon the offence, the offender and the attitude of the offender. This means that not every child is inclined to certain aspects of antisocial behaviour or would turn into full scaled criminals therefore imprisonment should be used as a last resort after every other method such as counselling, behaviour modification, therapy and or rehabilitation has failed. But the case in Cameroon gives room for doubt since there is little or no specific and specialized rehabilitation, counselling and behaviour modification programs for correctional facilities. This lack there for begs the question 'does prison encourage or deter these children?'

Unfortunately, most of these rules are not often followed. Children are regularly shut away in prisons whose living conditions do not meet international standards. Sometimes, they are imprisoned with adults; other times looked away in an isolated unit of the prison away from the others. for minor infractions or even without having committed any infraction at all. Hygienic conditions usually leave much to be desired, and there is often no access to health care or education. Some disciplinary measures violate basic human rights, and detention authorities sometimes use torture against children. Other prisoners can also be a source of violence if there is poor surveillance by guards or if living conditions are bad, although such things are rarer among children. The violence can be physical (assault, rape, murder) or psychological (extortion, manipulation, threats), (Abrams, 2006; Pogarsky, Kim and Paternoster, 2005; Teevan, 1976).

The intentions or reason why children may be imprisoned may include the following:

➢ **Punishment.**
Some offences are very serious. The person committing them will generally be regarded as deserving of punishment. Deprivation of liberty is seen as a substantial punishment. There is also a public policy aspect of this. Unless the public regard the punishment as at least in some respects fitting the crime respect for the law will be diminished and psychological it goes in line to support one of the principles of operant conditioning by adding prison as an unpleasant stimulus to the environment after the behaviour occurs, with the intentions of decreasing the likelihood that the behaviour will occur again. Surveys indicate that both the public and offenders consider prison to be the most severe or effective punisher of criminal behaviour (Doob, Sprott, Marinos, & Varma, 1998; Spelman, 1995; van Voorhis, Browning, Simon, & Gordon, 1997). Policy makers often assume that prison is the severest punishment available (Wood & Grasmick, 1999). DeJong (1997) remarked that the expectations of the public and policy-makers are that incarceration has powerful deterrent effects.

➢ **Deterrent.**
The idea is that the person concerned will not commit the offence because they are concerned about the consequences. However, the likely sentence is only one of a number of factors which could possibly deter offenders. For example, if an offender regards the prospect of detection, still less conviction, as low, then that is likely to have more of an impact on offending patterns than the prospect of the sentence. Obviously very severe sentences may have a deterrent effect. Some offences of course involve gain and planning, and this may well be influenced by a deterrent. Impulse crimes are perhaps rather less likely to be influenced. this can be linked to the social learning theory where an individual will avoid a certain behaviour because he or she know the consequences of that activity Skinner(1953). This will help prevent them from getting engaged in certain activities because they know if they do they will have to return to prison or a juvenile home.

➢ **Protection of the public.**
This can be subtly different from categories one and two. Whilst offenders are in prison, then unless they escape (or are allowed out) they will not be committing offences amongst the public at large. This has more of an impact in some cases than others. When particular gangs have been imprisoned certain types of crime have fallen noticeably in their particular area

➢ **Rehabilitation.**
It is obviously better for virtually any prisoner to be rehabilitated back into normal law-abiding society. Prison is at least potentially an opportunity to do something about it. Whilst it might seem odd to contemplate sending someone to prison in order to rehabilitate them, whilst they are in prison if there is a realistic prospect of altering the causes or pattern of offending it is plainly sensible to take it. Rehabilitation in other words behaviour modification is the act of understanding and providing guide lines to help modify or cause the extinction of an undesired behaviour, this can be done by using two of skinners principles of operant conditioning that's is extinction a process where reinforcements are withheld or punishment process of implementing adverse or unpleasant stimulus in to the environment to make sure that the undesired behaviour is not repeated, Skinner(1953).

➢ **No other choice.**
It is this category which is almost certainly a contributory cause to the swelling prison population. (Indeterminate sentences for repeat offenders has also had a substantial impact). Sometimes you will have repeat petty offenders who simply ignore everything you do to them. In the end the courts end up imprisoning them because there is simply nothing else they can think of to do with them.

According to prison reform international (PRI), in 2014, prison conditions should not be an additional punishment. The prison sentence is the sanction: it holds individuals accountable for their actions and protects society. It deprives someone of their liberty and impacts on certain other rights, such as freedom of movement, which are the inevitable consequences of imprisonment, but people in prison retain their human rights and fundamental freedoms. However, in reality prisons often do not meet even the most basic of standards, and many prison staff consider harsh treatment to be a legitimate way to deal with inmates.

Living conditions in a prison are among the chief factors determining a prisoner's self-esteem and dignity. Prisoners who experience humane detention conditions will be more

willing and able to respond to rehabilitative programs. Prison conditions such as; the issue of prison, Solitary confinement, Overcrowding, Healthviolence, sexual abuse, and other conditions pose grave risks to prisoner psychological, social ,cognitive and safety of the prisoner. Those who experience punitive conditions and mistreatment on the other hand are likely to return to society psychologically shattered and in poor or worse state of physical and mental health than when they entered. (PRI, 2014)

Burrhus Frederic Skinner theory of operant conditioning (sometimes referred to as instrumental conditioning) is a method of learning that occurs through rewards and punishments for behaviour and a consequence for that behaviour.

Some basic principles in operant conditioning include; Reinforcement, Punishment, Extinction, generalization and discrimination. In the prison environment prisoners either get to be punished for bad behaviour by being chained for days or weeks depending on the activity or being rewarded by being sent to a better sleeping hall or given privileges such as cooking unit or 'taxi' units to look for inmates who have visitors for small tips.

Vygotsky's socio-cultural theory emphasised the importance of relationships and interactions between children and more knowledgeable peers and adults. This theory is very applicable to this study since as it tries to look at antisocial behaviours children exhibit in the society how they are learned and how it affect their lives. Again the prison which has its own culture and a melange of individuals from divest cultures and background and how they interact and influence each other.

He believed that the environment plays an important role in a in the social aspects of development. He focused on the notion that children internalise feelings, emotions and ideas and language is a key factor in the development of concepts. Berk, (1996).

Bronfenbrenner developed the ecological systems theory. He emphasized a balance between nature (heredity) and nurture (environment). To illustrate his theory, he depicts the child as surrounded by four concentric circles, each representing a different set of factors that influence the child. The four sections, from the innermost to the outermost

Micro-systems is the individual his friends family, health, health services and other personal factors. This has to deal with the concepts and personality with which he enters the prison with.

Meso-system this has to do with the interaction among the various settings of his or her immediate environment.

Exo-system this has to do with what is occurring in the setting in which he or she is present in this case the prison.

Macro-system. cultural attitudes and ideologies of his environment. This includes the rules and regulations of the prison.

These different aspects of the above theories contribute immensely to the formation of a identity for these children

and because identity can be influenced by factors such as interaction, culture, physical experience and socialization, It is very essential to make sure all this factors are put together for these children to develop a stable and acceptable identity. Socialization can be positive socialization which is social learning that is based on pleasurable and exciting experiences. We tend to like the people who fill our social learning processes with positive motivation, loving care, and rewarding opportunities, and or negative socialization which occurs when others use punishment, harsh criticisms or anger to try to "teach us a lesson;" and often we come to dislike both negative socialization and the people who impose it on us Henslin (1999:76). There for the presence of family, friends and other well wishers have a lot to contribute to the building of these children in prison.

An individual's personality is the complex of mental characteristics that makes them unique from other people. It includes all of the patterns of thought and emotions that cause us to do and say things in particular ways. Personality development occurs by the ongoing interaction of temperament, character, and environment. Personality traits are defined as the relatively enduring patterns of thoughts, feelings, and behaviours that distinguish individuals from one another. The dominant view in the field of personality psychology today holds that personality emerges early and continues to change in meaningful ways throughout the lifespan. Evidence from large-scale, long-term studies has supported this perspective (Jay C. Thomas, Daniel L. Segal – 2006).

At a basic level, personality is expressed through our temperament or emotional tone. However, personality also colours our values, beliefs, and expectations (Ritberger 2009). Therefore as expressed in the ecological theory by Bronfenbrenner, the macro system which encompass the culture and ideologies of the prison have a very great role to influence the personality development of these children, There are many potential factors that are involved in shaping a personality. These factors are usually seen as coming from heredity and the environment. Research by psychologists over the last several decades has increasingly pointed to hereditary factors being more important, especially for basic personality traits such as emotional tone. However, the acquisition of values, beliefs and expectations seem to be due more to socialization and unique experiences, especially during childhood.

We often share personality traits with others, especially members of our own family and the community in which we live. In this study, prison as a community has a great role to play in the building of a personality for these children who interact with one another and the rules and regulations put in place by the prison authorities which can be considered as their beliefs and culture. On the other hand, socialization which can be positive or negative influences the formation of personality in much the same way. It is normal for us to acquire personality traits as a result of enculturation, enculturation which is the adoption of the behaviour patterns of the surrounding culture helps mould these children because they have to follow the behaviour of their friends and other prisoners so as to be on the favoured side or to avoid being rejected or find them self in trouble. Most people adopt the traditions, rules, manners, and biases of their culture and as a result construct a personality similar

to the members of that culture. Given this fact, it is not surprising that some researchers have claimed that there are common national personality types, especially in the more culturally homogenous societies.

In 1950, Riesman proposed three common types of modal personality that occur around the world. He called them tradition oriented, inner-directed, and other directed personalities. The tradition-oriented personality is one that places a strong emphasis on doing things the same way that they have always been done in this case a child might be forced to hold on to his personal ways (sometimes the same that landed him in prison) and as a result find himself opposing some of the prison regulations and finding himself in trouble with the authorities and other inmate which might lead to punishment isolation and sometimes even abuse and harassment. Those who have inner-directed personalities are guilt oriented. That is to say, their behaviour is strongly controlled by their conscience. As a result, there is little need for police to make sure that they obey the law. These individuals monitor themselves. If they break the law, they are likely to turn themselves in for punishment because they are conscience oriented, they may be avoided by other inmate because they know that he might report on them if they did something wrong and therefore isolation and rejection may kick in, and if these happens it might lead to psychological and social stressors kicking in and may lead to a distortion of this Childs idea of self and hence affect the formation of a stable identity. In contrast, people with other-directed personalities have more ambiguous feelings about right and wrong. When they deviate from a societal norm, they usually don't feel guilty. However, if they are caught in the act or exposed publicly, they are likely to feel shame children with such identity may turn to associate more with the hardened criminals and corrupted and couched to a worst state.

Statement of the problem
The reason for the incarceration of minors is to rehabilitate them so that they can be reinserted into the society with a different and acceptable social and cognitive behaviour. However, inadequacy in resources and the limited number of rehabilitation centres for children in Cameroon has led to a practice whereby children are sent to prison with the same intention of rehabilitating them and they are termed as minor offenders and kept in a separate corner of the prison. Many of those children upon release turn to be recidivist and return to prison or seem to behave worse than when they first entered prison. Is it that the prison environment and conditions socially and mentally destroy these children? It is then only important that we take a look at the prison, and how the prison condition influence the development of these children both behaviour wise and in developing a stable identity.

Main and specific objectives of the study main objective
Main objective
To investigate anti-social behaviours and prison conditions influence the building of a stable identity of child prisoners in Cameroon

Specific objectives
➢ To explore the anti-social behaviours that carry children to prison
➢ To find out how overcrowded prison conditions affect the formation of a stable identity of child prisoners

➢ To investigate the availability of proper health care service of the prison affect the formation of a stable identity among child prisoner
➢ To investigate how physical and or sexual abuse in prison influence the building of stable identity among child prisoners
➢ To Assess the effects of solitary confinement on the development of stable identity among child prisoners
➢ To investigate the effects of social support on the development of a stable identity of child prisoners

Main research question
Do anti-social behaviours and prison conditions influence the building of a stable identity of child prisoners?

Specific research question
➢ What are the anti-social behaviours that carry children to prison ?
➢ In what ways does out overcrowded prison conditions affect the formation of a stable identity of child prisoners?
➢ How does the health service conditions of the prison affect the development of a stable identity development ?
➢ How does physical and or sexual abuse in prison influence building of stable identity by child prisoners?
➢ What are the effects of solitary confinement on the development of a stable identity by child prisoners?
➢ What are the effects of social support on the development of a stable identity of child prisoners?

Justification of the study
This study is justified by the fact that not much research has been carried out in the area of children prisoners especially as it relates to anti-social behaviours and identity development in Cameroon. However, some research has been done but not particularly directed to the psychological aspects of these children. Moreover the aspect of a identity is a very important aspect to be look at, because it is important to know if these children can develop a stable identity in prison, one which does not interfere with their day-to-day lives if they are reintegrated into the society and not lead to recivism. To have a view of how a stable identity can be built away from family and natural environment but rather in an environment that can be classified as a controlled environment. Were ideals, beliefs and cultures are different from home or a formal educational environment of the child.

Placing children in detention has negative effects on their physical, mental, and emotional development, because of being locked up and shut away from society. They do not have the necessary tools to develop their identity. Prison also deprives them of appropriate health care and education, and can cause negligence or physical and mental brutality, either caused or tolerated by their guards.

Many children suffer from anxiety, fear, suicidal thoughts, or destructive behavior. Many fall ill because of the poor hygienic, feeding, and living conditions, and others turn to drugs. Medical and psychological care is often unavailable or inappropriate.

Upon their release from prison, many children have a hard time finding their place within the community and in relation to authority figures, especially if they were imprisoned for a long time. They have fallen terribly behind

on an educational and professional level. They find their relationships with their family and friends difficult to pick up again, because their time in prison is shameful to both the child and their family. Excluded from society, they will more easily fall back into delinquency.

This research therefore seeks to investigate the factors and aspects of the correctional facility (prison), the conditions of the minors, and the interaction between them and how it helps shape their identity and most importantly the strategies put forth to help rehabilitate these children to mold them into better and well behaved individuals with the hope of a deeper understanding of this aspects could be gained.

Significance for the study
This study is significant to a large population of individuals as it not only involves psychologist who are trying to study the prison and create a link to the identity development and psychosocial wellbeing of these children, but it will also involve and educate policies makers, judges and magistrate, prison administrators, parents, social workers, non-governmental organization and the society at large.

Policy makers, judges and magistrate
For the policy makers this paper will help fulfill and make clear the declarations of the criminal procedure code section 705 that makes special and clear cut specifications on the detention and treatment of child prisoners or in other words minors. Also the United Nations Rules for the Protection of Juveniles Deprived of their Liberty makes special and clear descriptions to be considered when children are to be placed under such conditions. It states that,

'Children who are detained shall be treated in a manner which promotes their sense of dignity and worth, facilitates their reintegration into society, reflects the best interests of the child and takes their needs into account. Children shall not be subjected to corporal punishment, capital punishment or life imprisonment without chance of release. Children who are detained shall be separated from adult prisoners.... Juveniles of compulsory school age have the right to education and to vocational training'.

By this magistrates and judges should at least use their powers to send these children to Borstal Institute rather than prison knowing well the effects of incarceration to these children.

Parents
This study can help to give parents a view into the outcome of their children and help them make the right decision especially when it comes to the detention procedures of their children. Parent should also know that visiting their children in prison helps them develop and maintain a sense of self worth which is very important for maintain good psychosocial status.

Non-governmental organizations
This study can go a long way to educate the non-governmental organizations about the psychological needs of prisoners to which most of them concentrate on the physical aspects of the prisoners like food and them getting clothes and cleaning the cells, but also they could contribute to the re-education and rehabilitation of these prisoners.

Prison administrators
The placement and treatment of children is more complex than that of the adult prisoners, the understanding of the scars left by the experience and encounters of these children is long lasting and more adverse than those of the adult. Therefore, is only important for the prison administrators to understand that even due these children are placed amongst the top criminals in the nation they are not of the same standards or levels. With this knowledge they would be able to take into considerations the physical, social, and mental damages that these children can go through as a result of the experience in prison.

Scope and Delimitations of the Study
This study is largely limited to the children(minors) in prison and educationally on the social and behavioural aspect of psychology, because it looks at some of the antisocial aspects that cause the incarceration of children, equally how they affect the society and then the psychosocial wellbeing of these children. We shall not be looking at the courses of the anti-social behaviours or their effects but what their they may cost the children if they are put in prison as a result of them.

Secondly, looking at the prison condition and their effects on the psychosocial wellbeing of children prisoners, it's just like looking at the effects of the society or environment on the psychosocial development of the children which in its self is social psychology.

The scope of the study is geographical, conceptual and methodological. The geographical scope is restricted to prisons in the South West Region of Cameroon which holds children with anti-social behaviours. Only two Divisions were considered for this study, Fako and Meme divisions. The Buea and Kumba central prisons will suit the purpose of the study.

Conceptually, the study was limited to antisocial behaviour, behaviour modification strategies used with the intentions to rehabilitate these minors so that they can be reintegrated into the society as well behaved individuals.

Finally, the development of a stable identity is another concept that we intend to investigate by looking at the prison conditions and how they can help shape the identity of these minors who are sent there for rehabilitation.

There is also a methodological delimitation. The study maintained a survey design. The instrument used for data collection was is questionnaire.

Definition of key terms
Antisocial behaviour
According to concise oxford dictionary, antisocial behaviour is defined as hostile or criminal behaviour that is contrary to the customs of society and causing annoyance and disapproval in others.

Conceptually, it is a pattern of behaviour that is verbally or physically harmful to other people, animals, or property, including behaviour that severely violates social expectations for a particular environment.

Personality

According to the psychological dictionary, personality is a set of qualities that makes a person or thing distinct from another.

The concise oxford dictionary defines it as a combination of characteristics or qualities that form an individual's distinctive character.

Conceptually, an individual's personality is the complex of mental characteristics that makes them unique from other people. It includes all of the patterns of thought and emotions that cause us to do and say things in particular ways. At a basic level, personality is expressed through our temperament or emotional tone.

Child prisoner or Juvenile

The definition of who is a juvenile or a child may vary from country to country. Similarly, the distinction in law between a child and a juvenile is not always clear. For the purposes of this our study, we will adopt the definition contained in article 1 of the Convention on the Rights of the Child:

A child means every human being below the age of eighteen years unless, under the law applicable to the child, majority is attained earlier.

REVIEW OF LITERATURE
Introduction

Plenty of research has examined the preparation of prisoners for the outside world. But few studies have examined supporting them while they're in prison, says Morgan, 1999 (as cite by Crawford, 2003). There is a great need for these children to receive psychological services, and most people don't want to work with them, some prisoners need help coping with the length of their incarceration. Being able to deal with being separated from love ones and friends or accepting that the prison is going to be their home for a period of time.

Much early research concluded that imprisonment had negative psychological and physical effects on its prisoners, leading to psychological deterioration. These effects include emotional withdrawal, depression, suicidal thoughts or actions and increasing levels of hostility (Clement, 1979). Prison aim to cure criminals of crime; however their records have not been encouraging. Instead, prisons do more harm than good. The pain of jail confinement affects all prisoners in different ways; to begin with the prisoner needs to withstand the shock of prison entry by quickly adapting to prison life. Prisoners are exposed to a new culture which is very different from their own culture. There has been a longstanding debate over the effectiveness of correctional institutions. Some argue that incarceration deters offenders while others argue that the experience of being incarcerated causes individuals to continue in their life of crime. Psychological effects of incarceration, effects of long term incarceration, how incarceration affects juveniles. The analytic frameworks and debates about whether the prison and long term incarcerations positively or negative affects the prisoner is getting extensive across the globe.

Theoretical review

Under the theoretical frame work, we shall be looking at psychological theories that can be related to anti social behaviours prison conditions and how they can be related to the formation of a stable personality in respect to the fact that prison life and environment is all about interaction, prison cultures, activities and believe coping and modeling, the interaction with one another and the environment, these theories include:

The theory of operant conditioning by Burrhus Frederic Skinner

Operant conditioning, involves the use of reinforcement to encourage behaviours (Skinner, 1954). The operant (e.g., a gift, "good girl", "good boy") is the reinforced. This theory sees behaviour as a function of its consequences. What this means is that the learner will repeat behaviour that is reinforced, especially positively. Reinforcement (operant) can be verbal or material. But punishment can also weaken behaviour. Learning by repetition such as learning the times-table and alphabets requires practices. In instrumental (operant) conditioning the learner is active not passive as in the case of classical conditioning. Operant conditioning is the use of consequences to modify the occurrence and form behaviour. Discrimination learning is a major form of operant conditioning. Skinner used the term operant to refer to any "active behaviour that operates upon the environment to generate consequences" Skinner, (1953). In other words Skinner's theory explained how we acquire the range of learned behaviour we exhibit each and every day.

The principles of operant conditioning

Some basic principles in operant conditioning include; Reinforcement, Punishment, Extinction, generalization and discrimination.

Reinforcement: the principle of reinforcement states that when a given act is followed closely by a **reinforcer,** the organism tends to increase the frequency of that act under the same or similar conditions. The reinforcer is any object, event or act which increases the frequency of that performance. Reinforcers in prison come in a variety of forms such as, food, gifts, privileges such as good sleeping space, working in the prison or 'taxi' unit of the prison and protection etc. There are two basic types of reinforcement: positive and negative reinforcement.

➢ **Positive reinforcement**: It is any pleasant or desirable consequence that follows a response and increase the probability that the response will be repeated. It is sometimes referred to as punishment by application. It occurs when a stimulus turns to maintain or increased the behaviour that it follows. The role of reinforcement is to increase the target behaviour through the presentation of a stimulus.

➢ **Negative reinforcement:** It is the termination of an unpleasant condition after a response, which increases the probability that the response will be repeated. This is also known as punishment by removal. It occurs when the rate of behaviour is observed to increase following the removal of the stimulus. A stimulus whose removal is reinforcing leading to a greater probability that the response bringing about this removal will reoccur.

Punishment: it is a situation where an unpleasant or an adverse event or painful stimulus is added to the environment after a certain behaviour occurs, decreasing the likelihood that the behaviour will occur again. With punishment, target behaviour is weakened by presenting an

aversive or unpleasant stimulus after the behaviour occurs. Many people confuse negative reinforcement with punishment .The two are not the same though both involve the use of aversive stimulus. But the effects of each are opposite. The process of reinforcement, whether positive or negative, always involves strengthening behaviour. Punishment involves decreasing or suppressing or eliminating behaviour. When behaviour is accompanied by punishment, it is less likely to occur. When behaviour is followed by reinforcement, it is more likely to occur.In context the primary reason for imprisonment as a mode of punishment is to decrease the possibility of that said behaviour which generated the said consequence to be extinguished there of The type of punishment most people are familiar with is positive punishment. Positive punishment is easier for people to identify because it is common in society. It is usually called "punishment" or "punishment by application" (D. Hockenbury & S. Hockenbury, 2010). Positive punishment occurs when a stimulus is presented following an undesired behavior and subsequent occurrences of the undesired behaviour are reduced or eliminated (Cheney & Pierce, 2004). Using the example of a chatty student, the student could be orally reprimanded for spending too much time conversing with classmate. It is important to realize that even though consequences such as suspension, flogging, etc. induce dislike, they do not qualify as punishments unless they lessen or eliminate the undesired behaviour.

According to Wolfgang (2001), negative reinforcement should be used sparingly in classroom settings, while positive reinforcement should be emphasized. While negative reinforcement can produce immediate results, he suggests that it is best suited for short-term use.

Extinction: It is when rein forcers are withheld. A rat in a Skinner box will eventually stop pressing the bar when it is no longer rewarded with food pellets. In human and other animals, the withholding of reinforcement can lead to frustration or even rage. For example, if a vending machine takes your coins but fails to deliver candy or soda, you might shake the machine, or even shake before giving up. When we do not get something, we expect, it makes us angry. Skinner proposes that instead of aversive control of punishment, teachers should use positive reinforcement, together with attractive and attention compelling approaches to teaching. The collective name that is given to the attempt to apply behavioural principles to teaching is behavioural modification. The techniques that are used to threaten behaviour are shaping, token economics and contingency contracts. Those that are use to weaken behaviour include extinction and punishment (Snowman and Biehler, 2000).

It therefore involves withholding the pleasing stimulus that is maintaining the unwanted behaviour *each time* the behaviour occurs. This happens until the behaviour gradually decreases to zero or the desired level (M. Sundel & S. Sundel, 2005). Using the example of a disruptive employee, his supervisor instructs his co-workers to ignore his non work-related comments and not respond to them. The response from his co-workers is the pleasing stimulus maintaining his behaviour. Without it, the employee no longer chats about non work-related business and becomes more productive as a result. It is important to remember that extinction is *not* permanent and that the behaviour may

return after the extinction process is complete, a process called **spontaneous recovery** (Coon, 2006).

Extinction may decrease the frequency of desirable behavior as well. If good behaviour is consistently ignored, it may cease, just as in the elimination of undesirable behaviour (Tosi, Mero & Rizzo, 2001). For example, an employee regularly stays late at work to assist the next shift in catching up after a very busy day. No praise or thanks is ever given to the employee by her co-workers or supervisor, so eventually she leaves work on time and stops assisting the next shift. Ignoring her good behaviour caused its extinction (Tosi et al., 2001). Note that because good behaviour may also be eliminated.

Generalization and discrimination: generalization is the tendency to make the learnt response to a stimulus similar to that for which the response was originally reinforced. Discrimination in operant conditioning involves learning to distinguish between a stimulus that has been reinforced and other stimuli that may be very similar. Discrimination develops when the response to the original stimulus is reinforced but responses to similar stimuli are not reinforced.

Prison conditions can be said to be in many ways similar to the conditions or laboratory in skinner and other behavioural psychologists developed the principles of operant conditioning. Like a very big skinner box, prisons are often arranged and managed in such a way that certain response and behaviours occur more than others. To prevent prisoners from misbehaving, there are strict and harsh consequences for disobeying and misbehaving.

Apart from the positive implication, there are also negative implications which include: severe punishment on the other hand can lead to an intense reaction. For example, an instructor or teacher who punishes an unserious student always likes criticizing, flogging or neglecting can cause the student to hate the subject and the lecture. The same can be applied to the prison environment if the guard and other inmates punish these inmates can turn to hate him or even turn to be violent towards them.

Lev Vygotsky theory of social constructivism
According to Vygotsky (1978) every function in the child's cultural development appears twice: first, on the social level and, later on, on the individual level; first, between people (intrapsychological) and then inside the child (intrapsychological). This applies equally to voluntary attention, to logical memory, and to the formation of concepts. All the higher functions originate as actual relationships between individuals. Vygotsky's theory of social learning has been expanded upon by numerous later theorists and researchers.

Moreover, Vygotsky distinguished between two developmental levels; the level of actual development is the level of development that the learner has already reached, and is the level at which the learner is capable of solving problems independently. The level of potential development (the "zone of proximal development") is the level of development that the learner is capable of reaching under the guidance of teachers or in collaboration with peers. The learner is capable of solving problems and understanding

material at this level that they are not capable of solving or understanding at their level of actual development; the level of potential development is the level at which learning takes place. It comprises cognitive structures that are still in the process of maturing, but which can only mature under the guidance of or in collaboration with others. This theory relates to the study in that zone of actual development is the point where they can carry out this unacceptable behaviour on their own while the zone of proximal development is that point were the other inmate can influence the behaviour and reinforce it or the prison system can discourage with punishment or modify with the rehabilitation programs.

Vygotsky theory of social constructivism is of great importance to this study because it focuses on the interactions that a child is engaged in within the society and it is through these interactions that the child can perceive as being loved or not. If a child is able to feel that that he/she is being loved by friends, parents and other inmate he/she will have a stable mind and this can contribute it the social support profile and thus the child will develop a stable identity in prison.

According to Vygotsky as explains by Miller (2011), humans are embedded within a socio cultural matrix and as such human behaviour can be understood within the cultural context in which people find themselves. The individual as such formulates new knowledge by changing old perceptions. According to Vygotsky, (1978), this implies a child potentially develops through problem solving under adults guidance or collaboration with more knowledgeable peers. As such a learner moves from a lower level of reasoning, to a higher one through clues, modelling, explanations, discussions, joint participation etc .for this to occur, there must be a socio cultural milieu within which the learner or individual child operates or interact. This outlook permitted Vygotsky to come out with three main characteristics of his theory which include;

➢ The child in activity in the cultural context (Zone of Proximal Development),
➢ The socio- cultural origin of mental functioning and
➢ The socio-cultural methodology.

Zone of Proximal Development is a central pierce to Vygotsky theory of constructivism (Nsamenang & Tchombe, 2011), the zone of proximal development emphasizes on an individual interaction with his social environment for acquisition of experience. Vygotsky felt that learning occurs within a dyad as a minimum unit of learning. Initially, an individual will interact with another person who supports him or her to learn new skills- a process called inter mental learning. The change from inter mental learning (inter personal) to intra mental (intra personal) will depend on the rate of interaction with other persons. As explained by Rogof (1990), ZPD can refer to any situation in which some activity is leading learners beyond their current level of functioning like play, work studies etc.

Vygotsky's theory was an attempt to explain consciousness as the end product of socialization. For example, in the learning of language, our first utterances with peers or adults is for the purpose of communication but once mastered they become internalized and allow "inner speech".

The human ecological theory by Urie Bronfenbrenner(1979)

Urie Bronfenbrenner was an American psychologist. He was the son of Doctor Alexander Bronfenbrenner and Eugenia Kamenetskaja, born on April 29, 1917 in Moscow, Russia. He was 6 years old, when coming to the United States. He died on September 25, 2005. Bronfenbrenner is revered as one of the leading world authorities in the field of development psychology. His most important brainchild was the ecological systems theory, where he defines the four concentric systems that are the microsystem, the mesosystem, the exosystem and the macrosystem. He later added a time-related fifth system, the chronosystem. As of lately, this theory has been renamed as the bioecological systems theory. It underlines the child´s own biology as the primary microenvironment that is the fuel for development.

The Bronfenbrenner ecological systems theory lays stress on the quality and context of the child´s surroundings. Bronfenbrenner maintains that because the child develops, the interaction with the environments acquires a complex nature. The chance for complexity appears since the physical and cognitive structures of a child grow and mature. Bronfenbrenner, while being one of the conceivers of the Head Start program, uses the bioecological model and with great clarity points out the problems that we run into with our students and our families (Paquette and Ryan, 2001). They are of the opinion that Bronfenbrenner has said that ecology has changed our society. At the time when we are so much engaged to defend our physical environment against the curses of technology, we have not done a thing to reach a similar state of security in the environment of our social life.

Similarly, Saarinen, Ruoppila and Korkiakangas (1994) argued that Bronfenbrenner adapted the ideas, contained in the definition of ecology, while studying socialization, which is observing how a child or a young person little by little becomes a full-fledged member of the society. Here as well socialization is seen as a fruit of development. The ecological systems theory holds that we encounter different environments throughout our lifespan that may influence our behaviour in varying degrees. These systems include the micro system, the mesosystem, the exosystem, the macro system, and the chronosystem.

First and foremost, the micro system's setting is the direct environment we have in our lives. Your family, friends, classmates, teachers, neighbours and other people who have a direct contact with you are included in your micro system. The micro system is the setting in which we have direct social interactions with these social agents. The theory states that we are not mere recipients of the experiences we have when socializing with these people in the micro system environment, but we are contributing to the construction of such environment. This means that through these interactions, students are being given some sort of support by their close ones since they can share ideas and be guide on what to do in cases of worries.

The mesosystem is the second system of the ecological theory which involves the relationships between the microsystems in one's life. This means that your family experience may be related to your school experience. For example, if a child is neglected by his parents, he may have a low chance of developing positive attitude towards his

teachers. Also, this child may feel awkward in the presence of peers and may resort to withdrawal from a group of classmates. Therefore a weak support system might influence the relation of the student and the teacher I such a way that the student will always want to keep to him or herself even if he/she does not know anything especially in the classroom context and this will eventually lead low performance in school since a disturb mind cannot work.

The exosystem being the third is the setting in which there is a link between the context wherein the person does not have any active role, and the context wherein is actively participating. Suppose a child is more attached to his father than his mother. If the father goes abroad to work for several months, there may be a conflict between the mother and the child's social relationship, or on the other hand, this event may result to a tighter bond between the mother and the child. Getting close to the child is very important as this provide the child with the notion that though his/her father or mother is not around, he/she can still get the same support that was being by the other parent.

The macrosystem is the fourth and it involves the actual culture of an individual. The cultural contexts involve the socioeconomic status of the person and/or his family, his ethnicity or race and living in a still developing or a third world country. For example, being born to a poor family makes a person work harder every day. Knowing the kind of support that is available to you is very essential. This is because this will enable you to work within your support network and with this in mind your objectives can easily be achieved. It will equally avoid you a lot of stress looking for a support network where you do not fit. For example if you are born poor and you now that you are poor, you will be contempted with the little help you get from others and try to make the best out of it.

The chronosystem is the fifth and last system in the ecological system. It includes the transitions and shifts in one's lifespan. This may also involve the socio-historical contexts that may influence a person. One classic example of this is how divorce, as a major life transition, may affect not only the couple's relationship but also their children's behaviour. Children are generally negatively affected on the first year after the divorce. The next years after it would reveal that the interaction within the family becomes more stable and agreeable. It is for this reason that these children will need some informational support as concerns the issue at stake so as to be calmer when it is time to do so. They will have to understand the reasons for their decisions and also made belief that their divorce should not change their relationships as they will still be the parents they have always been to them (very supportive).

Bronfenbrenner (1986) proposes that students in the same school may have unique experiences and perceptions based on their specific social interaction patterns with peers and teachers. Students' perceptions of the teacher and peer environment at school, in turn, are prognostic(predictive) of future adaptations .for example, students who feel that teachers in their school are unsupportive become less motivated to work and engage academically (Wang & Holcombe, 2010). Thus, we used students' self-reports of school climate to focus on how the students themselves derived meaning from their own perceptions of the school environment. This implies that the way a child perceives the support being given to him/her is very important because a child who feels that support is always available to him/her will be stress free with no psychological issues as oppose to that who feels that help is never available when needed.

The coping theory of Zamble and Porporino,1988.
The Coping Theory
Generally speaking, it makes little sense to search for the psychological effects of incarceration without acknowledging that these effects may vary widely among individuals. This fact is recognized by proponents of the coping theory who examine individual differences in how prisoners adapt to their environment. Operating on the premise that how individuals cope with problems is more important than the frequency and severity of the problems experienced, the coping theory focusses on the interaction of the personal and environmental factors involved as prisoners adapt to a life of incarceration.

An example of how coping behaviours would represent an interaction between the prisoners and the penitentiary environment could be the comparison of two individuals, both of whom are facing a long sentence in the same institution. Both would experience the same environment characterized by restrictions and deprivations and both would likely be confronted with events during incarceration which are beyond their control. However, as a result of individual history, attributes, beliefs and coping capabilities, one person could interpret the lack of control as the result of personal inadequacy, while the other could interpret it as continuing abuse by others. While the first may sink into depression, apathy and withdrawal, the second might become resentful, angry and rebellious in an attempt to counter the control. The way the two individuals deal with their long sentences could also determine how they are each affected by the environment. While one might cope with the stress of long confinement by avoiding all thoughts of the future, the other may cope by finding a safe and comfortable behavioural niche within the institution. The first could take on the behaviour and values of the other prisoners and be seen by outsiders as acting impulsively and carelessly; the second might have much weaker ties to the prisoners subculture. The behaviour each exhibits would in turn affect the way each is seen by staff and other prisoners, and their subsequent treatment would differ. This would further affect the emotional responses and the ways the two individuals appraise their environments, with subsequent behaviour then being affected by each factor continuously (Zamble & Porporino, 1988).

Conceptual review
The concept of antisocial behaviours
Antisocial behaviours are disruptive acts characterized by covert and overt hostility and intentional aggression toward others. Antisocial behaviours exist along a severity continuum and include repeated violations of social rules, defiance of authority and of the rights of others, deceitfulness, theft, and reckless disregard for self and others. Antisocial behaviour can be identified in children as young as three or four years of age. If left unchecked these coercive behaviour patterns will persist and escalate in severity over time, becoming a chronic behavioural disorder (Coloroso, 2003).

Antisocial behaviour may be overt, involving aggressive actions against siblings, peers, parents, teachers, or other adults, such as verbal abuse, bullying and hitting; or covert, involving aggressive actions against property, such as theft, vandalism, and fire-setting. Covert antisocial behaviours in early childhood may include noncompliance, sneaking, lying, or secretly destroying another's property. Antisocial behaviours also include drug and alcohol abuse and high-risk activities involving self and others (Connor, 2002).

Gender differences in antisocial behaviour patterns are evident as early as age three or four. There has been far less research into the nature and development pattern of antisocial behaviour in girls. Pre-adolescent boys are far more likely to engage in overtly aggressive antisocial behaviours than girls. Boys exhibit more physical and verbal aggression, whereas antisocial behaviour in girls is more indirect and relational, involving harmful social manipulation of others. The gender differences in the way antisocial behaviour is expressed may be related to the differing rate of maturity between girls and boys. Physical aggression is expressed at the earliest stages of development, then direct verbal threats, and, last, indirect strategies for manipulating the existing social structure (Reid, John, et al., 2002).

In social learning theory, Albert Bandura (1977), states that behaviour is learned from the environment through the process of observational learning, including cognition and the environment. The influence of behavior, environment and person depends on which factor is strongest at any particular moment. Bandura et al. (1961, 1963) showed that, if children watched someone else behave aggressively towards Bobo-the-doll (punching it, shouting at it and hitting it with a hammer), they were more likely to be aggressive and to imitate specific actions when they were placed on their own with the doll (after being mildly frustrated).

Causes and symptoms of antisocial behaviour
Antisocial behaviour develops and is shaped in the context of coercive social interactions within the family, community, and educational environment. It is also influenced by the child's temperament and irritability, cognitive ability, the level of involvement with deviant peers, exposure to violence, and deficit of cooperative problem-solving skills. Antisocial behaviour is frequently accompanied by other behavioural and developmental problems such as hyperactivity, depression, learning disabilities, and impulsivity.

Multiple risk factors for development and persistence of antisocial behaviours include genetic, neurobiological, and environmental stressors beginning at the prenatal stage and often continuing throughout the childhood years (Reid, John, et al., 2002).

Genetic factors
Genetic factors are thought to contribute substantially to the development of antisocial behaviours. Genetic factors, including abnormalities in the structure of the prefrontal cortex of the brain, may play a role in an inherited predisposition to antisocial behaviours.

Neurobiological risks factors
They include maternal drug use during pregnancy, birth complications, low birth weight, prenatal brain damage, traumatic head injury, and chronic illness

High-risk factors in the family setting include the following:
➢ parental history of antisocial behaviours
➢ parental alcohol and drug abuse
➢ chaotic and unstable home life
➢ absence of good parenting skills
➢ use of coercive and corporal punishment
➢ parental disruption due to divorce , death, or other separation
➢ parental psychiatric disorders, especially maternal depression
➢ economic distress due to poverty and unemployment

Companions and peers are influential in the development of antisocial behaviours. Some studies of boys with antisocial behaviours have found that companions are mutually reinforcing with their talk of rule breaking in ways that predict later delinquency and substance abuse (Reid, John, et al, 2002).

The cause of antisocial personality disorder, or ASP, is unknown. Like many mental health issues, evidence points to inherited traits. But dysfunctional family life also increases the likelihood of ASP. So although ASP may have a hereditary basis, environmental factors contribute. Researchers have their own ideas about ASP's cause. One theory suggests that abnormalities in development of the nervous system may cause ASP. Abnormalities that suggest abnormal nervous system development include learning disorders, persistent bedwetting and hyperactivity (Duncan, 2004). A recent study showed that if mothers smoked during pregnancy, their offspring were at risk of developing antisocial behaviour. This suggests that smoking brought about lowered oxygen levels with may have resulted in subtle brain injury to the foetus. (Duncan, 2004).

Yet another theory suggests that people with ASP require greater sensory input for normal brain function. Evidence that antisocial have low resting pulse rates and low skin conductance, and show decreased amplitude on certain brain measures supports this theory. Individuals with chronically low arousal may seek out potentially dangerous or risky situations to raise their arousal to more optimal levels to satisfy their craving for excitement (Wood, 2004).

Social and home environment also contributes to the development of antisocial behaviour. Parents of troubled children frequently show a high level of antisocial behaviour themselves. In one large study, the parents of delinquent boys were more often alcoholic or criminal, and their homes were frequently disrupted by divorce, separation or the absence of a parent. In the case of foster care and adoption, depriving a young child of a significant emotional bond could damage his ability to form intimate and trusting relationships, which may explain why some adopted children are prone to develop ASP (Wood, 2004).

Many factors have been identified that contribute to the cause of antisocial behaviour, literature confirmed that the major risk factors for antisocial and delinquent behaviour among children and youth fall into five life domains:

Family environment
➤ Parent-child separation, which may be either permanent or temporary, resulting from family disruptions, including out-of-home placement (e.g., foster care or other residential or institutional care)
➤ Antisocial/criminal family members, including parents and siblings
➤ Parental conflict, including witnessing domestic violence
➤ Poor family management practices, including lack of parental monitoring and supervision, harsh, inconsistent and/or lax discipline, and low parental support
➤ Positive attachment as a protective factor
➤ Child maltreatment, including physical, sexual and emotional abuse, and physical and emotional neglect
➤ Large family size
➤ family history of problem behaviour

The family is the first school of every child like stated by Bronfenbrenner,(1979) your family experience may be related to your school experience. For example, if a child is neglected by his parents, he may have a low chance of developing positive attitude towards his teachers

Schooling & educational attainment
➤ school exclusion and truancy patterns
➤ low achievement at school
➤ Antisocial/delinquent peer associations,gang membership
➤ Peer rejection
➤ Poor academic performance
➤ Poor school attendance, including suspension, expulsion, truancy and dropping outLow school bonding

The micro systems influence each other, that is the family and the school, the child may not perform in class and may also exhibit aggressive behaviours learnt at home in school. This child may feel awkward in the presence of peers and may resort to withdrawal from a group of classmates. Therefore, a weak support system might influence the relation of the student and the teacher I such a way that the student will always want to keep to him or herself even if he/she does not know anything especially in the classroom context and this will eventually lead low performance in school since a disturb mind cannot work.

Community life / accommodation / employment
➤ community disorganisation and neglect
➤ the availability of drugs and alcohol
➤ lack of neighbourhood attachment
➤ Community safety/violence

the environment in which on finds himself or grows help shape his or her behaviour, this involvement is explain by Vygotsky theory of social it focuses on the interactions that a child is engaged in within the society and it is through these interactions that the child can perceive as being loved or not. According to Vygotsky as explains by Miller (2011), humans are embedded within a socio cultural matrix and as such human behaviour can be understood within the cultural context in which people find themselves. The individual as such formulates new knowledge by changing old perceptions. the cultural contexts involvethe socioeconomic status of the person and/or his family, his ethnicity or race and living in a still developing or a third world country. For

example, being born to a poor family makes a person work harder every day. Knowing the kind of support that is available to you is very essential.

Personal and individual factors
➤ early involvement in problem behaviour
➤ attitudes that condone problem behaviour
➤ for young people, a high proportion of unsupervised time spent with peers and friends or peers involved in problem behaviour mental illness early involvement in the use of illegal drugs and crime
➤ Aggression, particularly early onset aggressive behaviour
➤ Antisocial beliefs, attitudes and behaviours, including early onset antisocial behaviour and conduct problems, and psychopathy/callous-unemotional traits

There is no specific standing on the term 'individual factors' because generally they are influenced by family, school, culture , and other. There the individual can be related to the person but related to the others like the formation of a youth culture The role other social identities (race, ethnicity, and social class) play in the formation of youth self and How major institutions of socialization (e.g., family, religion, and schools) shape and reflect the individual
(Source: Home Office, Research Development & Statistics, ASB - A collection of published evidence, 2004)

Treatment techniques for antisocial behaviour
Enhanced parent-teacher communications and the availability of school psychologists and counsellors trained in family intervention within the school setting are basic requirements for successful intervention and treatment of childhood antisocial behaviours.School-based programs from early childhood onward that teach conflict resolution, emotional literacy, and anger management skills have been shown to interrupt the development of antisocial behaviour in low-risk students. Students who may be at higher risk because of difficult family and environmental circumstances will benefit from more individualized prevention efforts, including counselling, academic support, social-skills training, and behaviour contracting (Walker, Hill ., et. al. 2004).

Academic settings with the capacity to deliver professional parental support and provide feedback in a motivating way can help parents to develop and hone effective parenting skills that may interrupt further progression of antisocial behaviour patterns in their children. Access to written and video information on parenting skills and information about community family resources, as well as promotion of parent-support groups, are effective intervention strategies for changing family dynamics that shape antisocial behaviour in the children.

Prevention of antisocial behaviour
Healthy nutrition and prenatal care, a safe and secure family and social environment, early bonding with an emotionally mature and healthy parent, role models for pro-social behaviours, non-coercive methods of parenting, peer relationships with pro-social individuals, and early intervention when problems first appear are all excellent means of assuring development of pro-social behaviours and reducing and extinguishing antisocial behaviours in children (Walker, Hill ., et. al. 2004).

The concept of prison environment
The issue of imprisonment
Prison conditions should not be an additional punishment. The prison sentence is the sanction: it holds an individual accountable for their actions and protects society. It deprives someone of their liberty and impacts on certain other rights, such as freedom of movement, which are the inevitable consequences of imprisonment, but people in prison, retain their human rights and fundamental freedoms. However, in reality prisons often do not meet even the most basic of standards, and many prison staff consider harsh treatment to be a legitimate way to deal with prisoners (PRI, 2014).

Living conditions in a prison are among the chief factors determining a prisoner's self-esteem and dignity. Prisoners who experience humane detention conditions will be more willing and able to respond to rehabilitative program. Those who experience punitive conditions and mistreatment on the other hand are likely to return to society psychologically shattered and in poor or worse state of physical and mental health than when they entered. Humane prison conditions also reduce the prevalence of violence in prisons (PRI 2014)

States bear a heightened obligation towards prisoners because when they deprive someone of their liberty, they assume a duty of care. States are also obliged to ensure that prisoners are treated humanely. This includes providing adequate accommodation, food and water, sanitation and healthcare, access to light, fresh air and exercise. There are international standards relating to clothing and bedding, contact with the outside world and access to legal representation. Rules regulating the prison regime cover discipline and punishment and instruments of restraint to ensure fair and equal treatment and safeguard against abuse and arbitrary application. There are also specific standards which address the needs of particular groups, such as women and children.

Ensuring humane prison conditions that are in line with international and regional standards for the treatment of prisoners is key to the establishment of fair and effective criminal justice systems. Access to effective complaints systems, as well as independent external inspection and monitoring mechanisms, are indispensable safeguards to ensure that the rights of prisoners are upheld in practice.

The Prison Environment
The physical, emotional and psychological prison environment faced by all prisoners is determined by the prevailing beliefs and attitudes held by the criminal justice system and the general public concerning the appropriateness of certain types of punishment. Some maintain that in order for a punishment to be acceptable to the public, it must clearly demonstrate adverse effects. Others insist that the punishment of incarceration does not have to, and should not, be equated with harm and that the creation of a humane and effective prison environment requires the development of mechanisms with which to reduce deprivation of liberty (Wormith, 1985).

Beliefs and attitudes about punishment can be complex and inconsistent. For example, a 1985 Gallup Poll showed that while over half of those polled felt prisoners had too many rights, 23% felt they had too few rights and almost two thirds felt that greater emphasis in prison should be placed on rehabilitation and community reintegration, even at the expense of security risk (Wormith, 1985). Many people therefore do not equate prisoners' rights with rehabilitation and reintegration. Unfortunately this inconsistency does not provide the policy makers with any clear guidance from the general public.

While there has been increased attention paid to the emotional, psychological and physical well-being of prisoners in recent years, a sentence of imprisonment still means that an offender is relegated to a life isolated from the rest of society. Prisoners are an insular minority vulnerable to oppression and discrimination, not only from the "outside" but from the strict rules and values of the prisoner's power structure and its own codes of silence and loyalty. Whether male or female, young or old, prisoners have to adjust to an environment in which relationships (sexual or platonic) with the opposite sex are denied them. In penitentiaries for men especially, homosexual sex is often viewed as a commodity which must be forced, bought or traded; new prisoners have to find their place in the sexual order by developing a sexual identity and establishing a reputation in the prison "sex pressure game," which is designed to determine who is weak or strong (Hopper, 1990). The emergence of prison gangs comprised of groups of prisoners for group protection and power dominance has become yet another reality for the incarcerated offender.

The state of Cameroon prisons
The US Department of State has described Cameroon prison conditions as "draconian, inhuman and degrading." This is contained in the 2009 edition of its annual country reports on human rights practices. The document summarises human rights issues in all countries around the world. The US State Department Human Rights report condemns both the physical conditions of Cameroon prisons and the slowness of Cameroon's judicial system. According to the report, prisoners were kept in dilapidated, colonial-era prisons, where the number of prisoners was as much as four to five times the intended capacity. The report quotes the Ministry of Justice which reported that government held 24.000 prisoners in detention facilities originally built for 16.000 detainees.

According to statistics provided by the annual human rights report, Douala's New Bell Prison, built for 800 prisoners, housed 2.813 prisoners, Buea Prison, built for 200 prisoners held 420 detainees while Kumba Prison built for 200 prisoners held 481 persons by the end of 2009. Further figures as stated in the US State Department report indicates the dramatic overcrowding of the Maroua Central Prison which was originally built for 350 prisoners but held more than 1000 detainees. The situation in the Yaounde Kondengui Prison and the Bamenda Central Prison is also alarming. According to the report, Kondengui prison originally built for about 700 prisoners held 3500 prisoners while Bamenda Central Prison that was meant to hold less than 50 prisoners was carrying 700 detainees. They said the Bamenda Central Prison was overcrowded and the prisoners were living in poor health conditions. Some of the prisoners, according to the HRDG officials, had no files and therefore no charges against them. "Trial of prisoners is very slow," they said **Ngawe ,(as cited in Cameroon the post online 2010)**

When Amnesty International visited New Bell Prison last August, 2009 the conditions they found were appalling, "Prisoners are held in an overcrowded and life-threatening environment – some are held in leg irons – where access to proper food and medical care is sorely lacking."Prison guards are poorly trained and ill-equipped to deal with the number of prisoners, a situation leading to frequent disturbances and escape attempts, some of which are deadly."In August 2010, New Bell Prison was accommodating more than an appalling 2,453 prisoners with just an official capacity of 700.Many of the prisoners were in pre-trial custody and was in detention together with convicted prisoners.

It is not the first time that a journalist or a writer has been imprisoned in Cameroon for bravely speaking out the truth. Neither is this the first time that prisoners have got close to death because of the appalling conditions in prisons. But the shocking fact still remains true that no action has been taken as yet. (Amnesty International 2011)

Overcrowding

According to the reports by PRI, (2014) Prison overcrowding is one of the key contributing factors to poor prison conditions around the world. It is also arguably the biggest single problem facing prison systems and its consequences can at worst be life-threatening at best prevent prisons from fulfilling their proper function. Data suggests that the number of prisoners exceeds official prison capacity in at least 114 countries. Overcrowding is a consequence of criminal justice policy not of rising crime rates, and undermines the ability of prison systems to meet basic human needs, such as healthcare, food, and accommodation. It also compromises the provision and effectiveness of rehabilitation program, educational and vocational training, and recreational activities. Overcrowding, as well as related problems such as lack of privacy, can also cause or exacerbate mental health problems, and increase rates of violence, self-harm and suicide.

Moreover overcrowding will result in the general scarcity of resources. For example availability of library books, washroom availability, television lounge seating and shortage of recreational materials. This lack of consequences can have various negative consequences on prisoners. When prisoners are denied resources, they are frustrated. Competition among prisoners for limited resources also results in violence, aggression and frustration. The next negative effect caused by overcrowding on prisoners is behavioural problems. Crowded prison setting can increase stress, fear and tensions in prisoners. Prisoners find it difficult to cope with stress. This makes them depressed and aggressive. Overcrowding will negatively influence the interaction and social relations of the prisoners. Crowded environment results in social withdrawal, competition of resources and less cooperation among the prisoners (PRI 2014)

Even though prison overcrowding is not the only reason for the dangerous conditions and the abuse that prevail in many of the prisons, it is one of the major problems faced by prisons. Prison overcrowding has various negative influences in the prison prisoners. Overcrowded prisons harbor illness and unhealthy environment. Moreover it also makes the prisoners struggle for resources. This struggles

and competitions further criminalize the prisoners. Prisoners thus are not benefited through this confinement if the prisons are overcrowded. Prisons are supposed to provide a healthy environment for the prisoners where they get a chance to regret, repent and renew themselves for the free world that welcomes them after the confinement. Overcrowded prisons do not give this environment. Overcrowded prisons are not only uncomfortable but also destructive as prisoners who come out carry the consequences of their bad experiences to the free world after they are released (PRI 2014)

The social and psychological effects of overcrowding:
The social and psychological effects of overcrowding can be summarized as follows:

Health effects:
Overcrowding poses serious direct and indirect health risks to all segments of the population, particularly the elderly, young children, and the disabled:
➢ overcrowding results in insufficient ventilation in homes, causing or exacerbating respiratory illness;
➢ susceptibility to disease, the severity of diseases, the spreading of illness, and the mortality due to disease all increase as a result of social and physical overcrowding;
➢ Overcrowding exacerbates health risks related to insufficient and poor water supply and poor sanitation systems.

Social effects:
Overcrowding contributes to far-reaching social problems:
➢ it places a strain on social relations within the home and community;
➢ overcrowding in schools and homes is linked to substandard education and functional illiteracy, and may be related to increased child labour;

Psychological effects:
Direct and indirect psychological effects result from overcrowding:
➢ lack of privacy is linked to depression and other negative psychological outcomes;
➢ overcrowding contributes to psychological frustrations which, in turn, have a bearing on behavioural responses and residents' ability to cope with the conditions;

Limited health resources
International law recognizes the right of everyone, including people deprived of their liberty, to the enjoyment of the highest attainable standard of physical and mental health. However, in practice, many prisoners receive healthcare of a far inferior standard to that available outside in the community, if they receive treatment at all. Prisoners with existing healthcare conditions may have their health needs ignored or neglected, and others may develop health problems whilst in prison thanks to unhealthy and unhygienic prison conditions and poor control of infectious diseases.

Health protection in prisons is a serious public health issue, which states ignore at their peril, as the vast majority of people in prison will return to the community at the end of their sentence. Prisons can be a breeding ground for HIV/AIDS, tuberculosis (TB) and other infectious diseases. The incidence of TB, which thrives in cramped, overcrowded

conditions, can be 10-100 times higher in prisons than among the general population. Studies have shown that in most countries in Europe and in Central Asia, rates of HIV infection are much higher in prisons than outside, because of, for example, high rates of drug dependency and dangerous practices such as needle sharing (PRI's Annual Report 2014).

Drug dependency in prisons is widespread. In the European Union, regular drug use or dependence prior to imprisonment ranges between 8% and 73%. Addressing the needs of prisoners with drug problems is a critical challenge for successful rehabilitation, in terms of both public health and preventing reoffending. Treatment should be preferred over incarceration where possible, but prison can be an opportunity to help prisoners address dependency. However, returning to drug use on release is a common problem and success depends on continuing treatment and support in the community.

The increase in physical contact, the lack of ventilation and light, as well as a shortage of time spent outdoors favours disease propagation, essentially infectious and parasitic diseases. For example, it has been observed that the prevalence of respiratory symptoms that long over three weeks as well as pulmonary tuberculosis symptoms are 39 and 35 times more frequent, respectively, in overcrowded prisons than in the general population (Vieira, Ribeiro, Siqueira, Galesi , dos Santos , Golub, 2010). Hussein, Akthar, Nanan, (2003), also found that the risk to develop a latent tuberculosis infection was almost three times higher among inmates who were housed in barracks of under 60m 2 of area.

Poudat et al have documented a lower prevalence of scabies and other parasitoses in penitentiary modules in which inmates were housed alone (Poudat & Nasirian, 2007). As to skin diseases, both infectious and non-infectious, were too more frequent in overcrwded barracks (Kuruvila, Shaikh, & Kumar,2002). Although it is a more controversial aspect, it has been suggested that overpopulation could be an indicator in reference to sexually transmitted diseases, such as syphilis and HIV or B hepatitis, since it favours risk-taking behaviours among inmates (Todrys, Amon, Malembeka , Clayton,2011).

Physical abuse
When humans are young, their world revolves around their parents or primary care-givers. Parents or care-givers are the primary source of safety, security, love, understanding, nurturance and support. Child abuse violates the trust at the core of a child's relationship with the world (Walker, 1994). When the primary relationship is one of betrayal, a negative schema or set of beliefs develops. This negative core schema often affects an individual's capacity to establish and sustain significant attachments throughout life. Survivors often experience conflictual relationships and chaotic lifestyles, frequently report difficulties forming adult intimate attachments and display behaviours that threaten and disrupt close relationships (Henderson, 2006).

Many survivors' lives are characterized by frequent crises e.g. job disappointments, relocations, failed relationships, financial setbacks. Many are the result of unresolved childhood abuse issues. The reasons are complex, but for many survivors ongoing internal chaos prevents the establishment of regularity, predictability and consistency. Many survivors function in 'crisis mode', responding with stopgap measures which don't resolve the underlying issues. This can be exhausting and dispiriting and contribute to feelings of helplessness and hopelessness (The Morris Center, 1995).

The long-term impact of child abuse is far-reaching; some studies indicate that, without the right support, the effects of childhood abuse can last a lifetime. This study by (Draper et al., 2007) found:

➢ Child abuse survivors demonstrate
• Poor mental health: are almost two and a half times as likely to have poor mental health outcomes,
• Unhappiness: are four times more likely to be unhappy even in much later life
• Poor physical health: are more likely to have poor physical health.

➢ Childhood physical and sexual abuse
• Medical diseases: increases the risk of having three or more medical diseases, including cardiovascular events in women
• Relationships: causes a higher prevalence of broken relationships, lower rates of marriage in late life,
• Isolation/social disconnection: cause lower levels of social support and an increased risk of living alone
• Behavioural health effects: is associated with suicidal behaviour, increased likelihood of smoking, substance abuse, and physical inactivity.

The impact of child abuse does not end when the abuse stops and the long-term effects can interfere with day-to-day functioning. However, it is possible to live a full and constructive life, and even thrive – to enjoy a feeling of wholeness, satisfaction in your life and work as well as genuine love and trust in your relationships. Understanding the relationship between your prior abuse and current behaviour is the first step towards 'recovery'.

Over two decades of research have demonstrated potential negative impact of child abuse and neglect on mental health including:
▪ depression
▪ anxiety disorders
▪ poor self-esteem
▪ aggressive behaviour
▪ suicide attempts
▪ eating disorders
▪ use of illicit drugs
▪ alcohol abuse
▪ post-traumatic stress
▪ dissociation
▪ sexual difficulties
▪ self-harming behaviours
▪ personality disorders.

Victims of child abuse and neglect are more likely to commit crimes as juveniles and adults.

In addition, because many prisons are clearly dangerous places from which there is no exit or escape, prisoners learn quickly to become hypervigilant and ever-alert for signs of threat or personal risk. Because the stakes are high, and because there are people in their immediate environment poised to take advantage of weakness or exploit carelessness or inattention, interpersonal distrust and suspicion often result. Some prisoners learn to project a tough convict

veneer that keeps all others at a distance. Indeed, as one prison researcher put it, many prisoners "believe that unless aprisoner can convincingly project an image that conveys the potential for violence, he is likely to be dominated and exploited throughout the duration of his sentence (McCorkle 1992),

According to an article presents by Wolff& Shi (2010), an analysis of approximately 2,200 physical and 200 sexual victimizations reported by a random sample of 6,964 male inmates. Physical injury occurred in 40% of physical assaults and 70% of sexual assaults between inmates and in 50% of assaults perpetrated by staff. Emotional reactions to assaults were experienced by virtually all victims. Wolff and Shi (2008) explored the types of sexual victimization experienced by approximately 500 male inmates over a 6-month period. In this study, although sexual victimization rarely occurred, when it did, it was more likely to involve abusive sexual contacts (i.e., intentional touching of sexually specific areas of the body) than non-consensual sex acts (i.e., sexual assault or rape). However, incidents of inappropriate touching were reported less frequently (28%) to authorities than incidents involving non-consensual sex acts (37% to 50%).

Physical and sexual victimization have psychological consequences as first reported by Carroll (1974) and Toch (1977). More contemporary research amplifies these earlier findings. The multidimensional impact of prison-based sexual assault on physical, emotional, and psychological well-being is summarized by Knowles (1999). This was also explored by Struckman-Johnson and colleagues (Struckman-Johnson et al. 1996;Struckman-Johnson & Struckman-Johnson, 2006), whose study confirmed the negative effects of rape identified by Knowles. Particularly, immediately following a severe incident, victims were highly distressed and most experienced negative feelings, specifically distrust of others, social nervousness, and depression. Wolff and Shi (2008) report that inmates experiencing sexual victimization also were more likely to report feeling mostly or very unsafe across a variety of potentially harmful situations and prison areas. The percentage of male inmates reporting feeling unsafe increased if they were sexually victimized by staff and/or experienced concurrent physical victimization (by other inmates or staff). Similarly, inmates who experienced physical victimization also reported feeling less safe from various types of harm and in assorted areas of the prison during the 6 months, compared to their counterparts who did not report victimization. Those feeling the least safe in prison were male inmates who reported being physically victimized by other inmates and staff (Wolff & Shi, 2008).

Physical victimization is categorized as personal (e.g., assault) or property (e.g., theft; (Wool dredge, 1994,1998). Compared to personal victimization, rates of property victimization are higher (Wool dredge, 1998). More recently, Wolff and Shi (2009) delineated 7 specific types of physical victimization. The most common types experienced by male inmates in this study were theft (24.3%), being threatened or harmed with knife or shank (12.4%), and being slapped, hit, kicked, or bit (10.2%). Physical victimization was infrequently reported by inmates to the authorities, although reports increased if the perpetrator was a staff person or if the incident involved being beat up. The majority of these victims reported experiencing 1 or 2

types of physical victimization perpetrated by other inmates over a 6-month period, most commonly theft, harmed with shank, and slapped, kicked, or hit.

Solitary confinement

According to PRI's Annual Report,(2014)Excessive use of solitary confinement in prisons around the world is becoming an increasing concern. Some form of short-term isolation from the rest of the prison population is used almost everywhere as punishment for breaches of prison discipline. However, many states use solitary confinement more routinely and for longer periods of time. In the United States, for example, it is estimated that 80,000 individuals are being held in some form of isolation – and the US is not alone.

States justify their use of solitary confinement in a number of different ways. It may be used as disciplinary punishment for convicted prisoners, to protect vulnerable prisoners or considered to help prison staff to 'manage' certain individuals. It is used to isolate a detainee during the pre-trial stage of investigation, often as part of coercive interrogation, and it can be used to lock away prisoners who have – or are perceived to have – mental illnesses.

While there is no universally agreed definition of solitary confinement – often also called 'segregation', 'isolation', 'lockdown' or 'super-max' – it is commonly understood to be the physical isolation of individuals who are confined to their cells for 22 to 24 hours a day, and allowed only minimal meaningful interaction with others.

Contact with family or visitors is often restricted or denied altogether, despite the fact that contact with family in particular, has been shown to be an important factor in successful rehabilitation.

Medical research shows that the denial of meaningful human contact can cause 'isolation syndrome', the symptoms of which include anxiety, depression, anger, cognitive disturbances, perceptual distortions, paranoia, psychosis, self-harm and suicide. Prolonged isolation can destroy a person's identity and their mental health and its effects may last long after the end of the period of segregation. Solitary confinement increases the risk of torture or ill-treatment going unnoticed and undetected, and it can in itself constitute torture and ill-treatment, in particular where it is prolonged or indefinite.

Many of the issues that confined prisoners have during isolation are also prevalent post-isolation. Those who are isolated also exhibit maladjustment disorders and problems with aggression, both during confinement and afterwards (Briggs et al., 2003). Furthermore, inmates often have difficulty adjusting to social contact post-isolation, and may engage in increased prison misconduct and express hostility towards correctional officers. (Weir, 2012; Dingfelder, 2012; Constanzo, Martinez, Klebe, Torrence & Livengood, 2012). While cases in which inmates have exhibited positive behavioral change after isolation have been documented, such a result is rare (Smith, 2006).

In addition to having disruptions in their emotional processes, inmates' cognitive processes tend to deteriorate while they are in isolation. Some confined inmates report

memory loss, and a significant portion of isolated inmates report impaired concentration (Smith, 2006; Shalev, 2008). Many are unable to read or watch television since these activities are their few sources of entertainment. Confined inmates also report feeling extremely confused and disoriented in time and space (Haney, 2003; Shalev, 2008).Another confinement related psychological symptom that inmates may experience is disrupted thinking, defined as an inability to maintain a coherent flow of thoughts. This disrupted thinking can result in symptoms of psychosis (Haney, 2003; Shalev, 2008). Inmates who exhibit these symptoms of psychosis often report experiencing hallucinations, illusions, and intense paranoia, such as a persistent belief that they are being persecuted (Shalev, 2008). In extreme cases, inmates have become paranoid to the point that they exhibit full-blown psychosis that requires hospitalization (Smith, 2006).

Despite the frequent use of solitary confinement in prisons, there has been a continuous debate over the effectiveness of this experience on rehabilitating prisoners' behaviour (Briggs, Sundt, & Castellano, 2003). While some research defends solitary confinement as a humane practice, the majority of research suggests a wide range of psychological and physiological effects associated with solitary confinement (Haney, 2003; Shalev, 2008; Smith, 2006). Given that approximately twenty-two percent of prisoners are already experiencing psychological symptoms upon incarceration, it is imperative to identify the effects of solitary confinement on inmates (Smith, 2006). Understanding the psychological and physical effects of solitary confinement can help policymakers determine whether solitary confinement should continue to be used in prisons (Smith, 2006). Therefore, this review of the existing literature will examine the psychological and physiological effects of solitary confinement on their wellbeing

Social support
Research shows that incarcerated adults who have strong relationships with loved ones fare better in prison and pose less of a risk to public safety when they return to the community Phone calls, letter writing, and visitation with family members, and other so-called "pro-social supports," help sustain these relationships. They also help adults adjust to imprisonment and limit what has been called the "pains of incarceration" all of which has been associated with reduced behavioral infractions. Wooldgredge, (1999)

It seems likely that such findings also hold true for incarcerated youth. However, there is very limited research on whether family visitation affects incarcerated juveniles' behaviour Wooldgredge, (1999)

Social support is one of most important factors in predicting the physical health and well-being of everyone, ranging from childhood through older adults. The absence of social support shows some disadvantage among the impacted individuals. In most cases, it can predict the deterioration of physical and mental health among the victims. The initial social support given is also a determining factor in successfully overcoming life stress. The presence of social support significantly predicts the individual's ability to cope with stress. Knowing that they are valued by others is an important psychological factor in helping them to forget the negative aspects of their lives, and thinking more positively

about their environment. Social support not only helps improve a person's well-being, it affects the immune system as well. Thus, it also a major factor in preventing negative symptoms such as depression and anxiety from developing Wooldgredge, (1999).

Family and Peer Support
For adolescents, family support is the most important element in their lives. As part of their growth experience, adolescents usually expect a lot of things from their parents. Inadequate support from the parents will likely increase the chance of getting depression among adolescents who get into unfortunate situation with their parents. This occurs because adolescent usually become confused when they expect to get plenty of help and positive reinforcement from their parents, but it does not happen (Stice, Ragan, & Randall, 2004).

Beside family support, peer support also is very important factor for adolescents. Children can expect a lot from their friends. Peer support can be considered as an alternate method of getting social support if the adolescents receive inadequate attention from their parents. This social support method is not as reliable as family support because young children could easily withdraw from their own friends if they become depressed. Another problem arises in this area, when the depressed students isolate themselves from public gatherings. This would prevent those suffering adolescents from getting any social support at all (Stice et al., 2004). Receiving social support is very essential for adolescents to become successful with them and achieve a satisfactory level at school.

Social support and Health
Many studies indicate that anyone who has high social support tends to have less chance of getting depression and anxiety disorders. In contrast, only a handful of studies show that there is no relationship between social support and lowering the blood pressure. The level of social support also has been found to be related to a lower rate of disease and early death. The familial support is a psychological enhancement to help the individual reduce their stress. These findings are somewhat weak and further studies need to be done to gather more specific information about the influence of social support on physical health (Uchino et al., 1996).

There is a significant relation between emotions and health. Anyone who has positive emotion and beliefs is likely to enhance their physical health. As expected, being in a good mood will cause refreshed mind to relieve some of the stresses. Laughing is said to have a good deal of influence on reducing or forgetting about the hassles of daily life. Strong social support is necessary to help succeed in achieving these traits of overall physical well-being (Salovey, Detweiler, Steward, & Rothman, 2000).

The Psychological Effects of Incarceration
On the Nature of Institutionalization
The adaptation to imprisonment is almost always difficult and, at times, creates habits of thinking and acting that can be dysfunctional in periods of post-prison adjustment. Yet, the psychological effects of incarceration vary from individual to individual and are often reversible. To be sure, then, not everyone who is incarcerated is disabled or

psychologically harmed by it. But few people are completely unchanged or unscathed by the experience. At the very least, isolated prison is painful, and incarcerated persons often suffer long-term consequences from having been subjected to pain, deprivation, and extremely atypical patterns and norms of living and interacting with others. (haney,1997)

The term institutionalization is used to describe the process by which prisoners are shaped and transformed by the institutional environments in which they live. Sometimes called prisonization when it occurs in correctional settings, it is the shorthand expression for the negative psychological effects of imprisonment (Bonta & Gendreau 1990). In general terms, the process of prisonization involves the incorporation of the norms of prison life into one's habits of thinking, feeling, and acting (Haney,2001).

It is important to emphasize that these are the natural and normal adaptations made by prisoners in response to the unnatural and abnormal conditions of prisoner life. The dysfunctionality of these adaptations is not "pathological" in nature (even though, in practical terms, they may be destructive in effect). They are "normal" reactions to a set of pathological conditions that become problematic when they are taken to extreme lengths, or become chronic and deeply internalized (so that, even though the conditions of one's life have changed, many of the once-functional but now counterproductive patterns remain) (Haney,2001).

When most people first enter prison, of course, they find that being forced to adapt to an often harsh and rigid institutional routine, deprived of privacy and liberty, and subjected to a diminished, stigmatized status and extremely sparse material conditions is stressful, unpleasant, and difficult, however, in the course of becoming institutionalized, a transformation begins. Persons gradually become more accustomed to the restrictions that institutional life imposes. The various psychological mechanisms that must be employed to adjust (and, in some harsh and dangerous correctional environments, to survive) become increasingly "natural," second nature, and, to a degree, internalized. To be sure, the process of institutionalization can be subtle and difficult to discern as it occurs. Thus, prisoners do not "choose" do succumb to it or not, and few people who have become institutionalized are aware that it has happened to them. Fewer still consciously decide that they are going to willingly allow the transformation to occur (Haney, 2001).

The process of institutionalization is facilitated in cases in which personers enter institutional settings at an early age, before they have formed the ability and expectation to control their own life choices. Because there is less tension between the demands of the institution and the autonomy of a mature adult, institutionalization proceeds more quickly and less problematically with at least some younger prisoners. Moreover, younger prisoners have little in the way of already developed independent judgment, so they have little if anything to revert to or rely upon if and when the institutional structure is removed. And the longer someone remains in an institution, the greater the likelihood that the process will transform them (Haney,2001).

Among other things, the process of institutionalization (or "prisonization") includes some or all of the following psychological adaptations:

Dependence on institutional structure and contingencies

Among other things, penal institutions require prisoners to relinquish the freedom and autonomy to make their own choices and decisions and this process requires what is a painful adjustment for most people. Indeed, some people never adjust to it. Over time, however, prisoners may adjust to the muting of self-initiative and independence that prison requires and become increasingly dependent on institutional contingencies that they once resisted. Eventually it may seem more or less natural to be denied significant control over day-to-day decisions and, in the final stages of the process, some prisoners may come to depend heavily on institutional decision makers to make choices for them and to rely on the structure and schedule of the institution to organize their daily routine. Although it rarely occurs to such a degree, some people do lose the capacity to initiate behaviour on their own and the judgment to make decisions for themselves. Indeed, in extreme cases, profoundly institutionalized persons may become extremely uncomfortable when and if their previous freedom and autonomy is returned.

A slightly different aspect of the process involves the creation of dependency upon the institution to control one's behaviour. Correctional institutions force prisoners to adapt to an elaborate network of typically very clear boundaries and limits, the consequences for whose violation can be swift and severe. Prisons impose careful and continuous surveillance, and are quick to punish (and sometimes to punish severely) infractions of the limiting rules.

Emotional over-control, alienation, and psychological distancing

Shaping such an outward image requires emotional responses to be carefully measured. Thus, prisoners struggle to control and suppress their own internal emotional reactions to events around them. Emotional over-control and a generalized lack of spontaneity may occur as a result. Admissions of vulnerability to persons inside the immediate prison environment are potentially dangerous because they invite exploitation. As one experienced prison administrator once wrote: "Prison is a barely controlled jungle where the aggressive and the strong will exploit the weak, and the weak are dreadfully aware of it (Keve,1974). Some prisoners are forced to become remarkably skilled "self-monitors" they calculate the anticipated effects that every aspect of their behaviour might have on the rest of the prison population, and strive to make such calculations second nature.

Prisoners who labour at both an emotional and behavioural level to develop a "prison mask" that is unrevealing and impenetrable risk alienation from themselves and others, may develop emotional flatness that becomes chronic and debilitating in social interaction and relationships, and find that they have created a permanent and unbridgeable distance between themselves and other people. Many for whom the mask becomes especially thick and effective in prison find that the disincentive against engaging in open communication with others that prevails there has led them to withdrawal from authentic social interactions altogether (Kampfner 1978).The alienation and social distancing from others is a defence not only against exploitation but also against the realization that the lack of interpersonal control

in the immediate prison environment makes emotional investments in relationships risky and unpredictable.

Social withdrawal and isolation

Some prisoners learn to find safety in social invisibility by becoming as inconspicuous and unobtrusively disconnected from others as possible. The self-imposed social withdrawal and isolation may mean that they retreat deeply into themselves, trust virtually no one, and adjust to prison stress by leading isolated lives of quiet desperation. In extreme cases, especially when combined with prisoner apathy and loss of the capacity to initiate behaviour on one's own, the pattern closely resembles that of clinical depression. Long-term prisoners are particularly vulnerable to this form of psychological adaptation. Indeed, Taylor wrote that the long-term prisoner "shows a flatness of response which resembles slow, automatic behaviour of a very limited kind, and he is humourless and lethargic (Taylor 1961). Prisoners who retreat into social withdrawal for their own protection begin to feel lonely and isolated. In a discussion of coping with loneliness in prison, Rokach and Cripps (1998) compared incarcerated males with men in the general population. They found that men in the general population utilize reflection and acceptance as the most productive method for easing loneliness. In contrast, incarcerated men reported that this same coping mechanism was less beneficial (Rokach & Cripps, 1998). Without using substantive data, the authors cited high rates of antisocial personality disorder among offenders as the reason why they did not turn to reflection and acceptance (Rokach & Cripps, 1998). I would assert that prison does not provide a safe holding environment (Winnicott, 1963) in which to delve into the root causes of one's loneliness. Someone who feels alone should be able to profoundly reflect on feelings of loneliness and to allow others to support or even guide his or her process. A prison setting is a place where people are eager to prey on any sign of open and honest connection. It would seem that profound reflection on one's loneliness would actually be an unwise coping mechanism while incarcerated.

The combined impact of solitude, the emotional in-authenticity of prison life, and the separation from loved ones often leads to depression among incarcerated individuals (Ashkar & Kenny, 2008). There are few social or proactive activities with which prisoners can involve themselves. Askhar and Kenny (2008) describe social isolation and prolonged sleep, which are often traits of depression, as passive coping strategies for the young offenders they studied in Australia. Inmates survive the monotony of prison by retreating to their cells to listen to the radio or to sleep. In exploring conformist psychology, Jacoby (1975) states that personal insecurity is a direct response to collective repression (p. 48). In such an inherently repressive situation, I would argue that emotional insecurity and its consequent depression are entirely reasonable responses.

Incorporation of exploitative norms of prison culture

In addition to obeying the formal rules of the institution, there are also informal rules and norms that are part of the unwritten but essential institutional and prisoners culture and code that, at some level, must be abided. For some prisoners this means defending against the dangerousness and deprivations of the surrounding environment by embracing all of its informal norms, including some of the most exploitative and extreme values of prison life. Note that prisoners typically are given no alternative culture to which to ascribe or in which to participate. In many institutions the lack of meaningful programming has deprived them of pro-social or positive activities in which to engage while incarcerated. Few prisoners are given access to gainful employment where they can obtain meaningful job skills and earn adequate compensation; those who do work are assigned to menial tasks that they perform for only a few hours a day. Attempts to address many of the basic needs and desires that are the focus of normal day-to-day existence in the free world to recreate, to work, to love necessarily draws them closer to an illicit prisoner culture that for many represents the only apparent and meaningful way of being.

Of course, embracing these values too fully can create enormous barriers to meaningful interpersonal contact in the free world, preclude seeking appropriate help for one's problems, and a generalized unwillingness to trust others out of fear of exploitation. It can also lead to what appears to be impulsive overreaction, striking out at people in response to minimal provocation that occurs particularly with persons who have not been socialized into the norms of prisoner culture in which the maintenance of interpersonal respect and personal space are so inviolate. Yet these things are often as much a part of the process of prisonization as adapting to the formal rules that are imposed in the institution, and they are as difficult to relinquish upon release.

Diminished sense of self-worth and personal value

Prisoners typically are denied their basic privacy rights, and lose control over mundane aspects of their existence that most citizens have long taken for granted. They live in small, sometimes extremely cramped and deteriorating spaces (a 60 square foot cell is roughly the size of king-size bed), have little or no control over the identity of the person with whom they must share that space (and the intimate contact it requires), often have no choice over when they must get up or go to bed, when or what they may eat, and on and on. Some feel infantilized and that the degraded conditions under which they live serve to repeatedly remind them of their compromised social status and stigmatized social role as prisoners. A diminished sense of self-worth and personal value may result. In extreme cases of institutionalization, the symbolic meaning that can be inferred from this externally imposed substandard treatment and circumstances is internalized; that is, prisoners may come to think of themselves as "the kind of person" who deserves only the degradation and stigma to which they have been subjected while incarcerated.

Over time these internalizations can bring a prisoner to self-identify as a bad person. In Mahlers (1979) exploration of the psychological birth of an individual, she discusses the moment when infants realize they have a separate identity than their caretaker by sayingit is not a sense of who I am but that I am. It could be argued that long-term prisoners begin to feel a sense of disappearance into non-existence; they no longer are. This could actually be a protection against constantly hoping to have your individual existence affirmed only to be met with repeated degradation of your Self. A prisoner may slip into a sense of being a lesser human in order to save himself or herself from a more acute

existential crisis. Accepting a diminished status is the only way to eventually regain ones self-worth later.

Post-traumatic stress reactions to the pains of imprisonment

For some prisoners, incarceration is so stark and psychologically painful that it represents a form of traumatic stress severe enough to produce post-traumatic stress reactions once released. Moreover, we now understand that there are certain basic commonalities that characterize the lives of many of the persons who have been convicted of crime in our society (Dutton, Hart, 1992; Haney 1995; Haney 1997; Huff-Corzine, Corzine, & Moore, 1991).

A "risk factors" model helps to explain the complex interplay of traumatic childhood events (like poverty, abusive and neglectful mistreatment, and other forms of victimization) in the social histories of many criminal offenders. As Masten and Garmezy have noted, the presence of these background risk factors and traumas in childhood increases the probability that one will encounter a whole range of problems later in life, including delinquency and criminality (Masten, & Garmezy, 1985, Lahey & A Kazdin 1985).

Dependence and Learned Helplessness

An immediate consequence of incarceration is the loss of personal control over daily decisions (Haney, 2001). Prisoners live in a world of rules, regulations, limits, and boundaries. Prisoners lose the right to make choices such as what to wear and when to eat, sleep, and use the telephone. As a result, prisoners must constantly exercise great constraint, muting their own self-initiative in order to conform to the infinite mandated decisions of prison life. In connection to this, Schill and Marcus (1998) discuss the theory of learned helplessness and its prevalence among prisoners. They argue that prolonged exposure to uncontrollable aversive experiences such as incarceration leads to a decrease in motivational, cognitive, and behavioral functioning. Consequently, individuals learn to rely on others to dictate their daily functions. In a study of 60 male adult inmates in Texas, men who had spent over five years in prison had developed a helpless attributional style, becoming compliant and disinterested in making personal decisions (Schill & Marcus, 1998). Similarly, Schill and Marcus (1998) showed that prisoners exhibit a learned helplessness that is consistent with those who undergo long term hospitalization or institutionalization. In contrast, Herman (1997) refutes learned helplessness theory when exploring the topics of violence and captivity. She asserts that individuals do not learn to be helpless but rather choose to place their independent self in temporary hibernation for reasons of survival (Herman, 1997).

According to Seligman in 1967, learned helplessness is a behaviour typical of an individual who has endured repeated painful or otherwise aversive stimuli which he or she was unable to avoid or escape. After such experience they often fail to learn escape or avoidance. They loss control and give up trying. And it is known that clinical depression and related mental illnesses may result from such real or perceived absence of control over the outcome of a situation. According to Abramson, Divine and Hollon (2012) learned helplessness is a key factor in depression that is caused by inescapable prejudice. Similarly, prisoners have no way too

escape the punishment of isolation and they know the inescapable shock that comes with it and have no way of avoiding it when it comes so they naturally give up the hope of fighting or avoidance so thry become helpless and go in knowing what the outcomes will be.

In Hartmanns (1936) discussion of human development, differentiation, and adaptation, he states that processes of adaptation are, first of all, purposive only for a certain range of environmental situations; moreover, they involve internal self-limiting factors. By silencing the need to make autonomous decisions, prisoners are not becoming robots; they are exercising self-preservation. The self-limitation of taking on a helpless attributional style(Schill & Marcus, 1998) is extremely purposive in prison, as it helps someone simply move through the day without a constant reminder of his or her powerlessness. Within Hartmanns (1936) ego psychology, the ego defence of helplessness would reflect a reciprocal cause and effect relationship with the prison environment.

Deprivation of liberty

Few of the conditions imposed on prisoners are as severe the loss of liberty. Prisoners, particularly those serving their sentences in maximum security facilities or in special handling units (SHUs), must live in a world where their freedom of movement is rigidly restricted and regulated. For long term prisoners, liberty may be deprived for substantial portions of their lives and can have a serious effect on their mental health. The prisoners's loss of liberty occurs at two levels; first by confinement to the correctional institution and second, by confinement within the institution. At the first level, offenders are cut off from family, relatives and friends, producing what can be a painful deprivation and frustration in terms of lost emotional relationships, loneliness and boredom. Most of their waking hours are spent within the confines of their cells.

The second level of loss of liberty occurs when offenders are put in solitary confinement. Sensory stimulation is quite limited and prisoners may, in some facilities, be allowed to read a book while in their cells or exercise for one half hour per day outside of the cell. Studies of the effects of solitary confinement generally show that short periods in isolation do not have detrimental repercussions on the mental health of prisoners. Prolonged periods of isolation may have negative impact on prisoners as indicated by studies conducted by Cormier and Williams (1966) and Grassian (1983)(cited in Bonta & Gendreau, 1990). but because adequate controls were not included in these studies, more studies need to be conducted before a definitive conclusion on the effects of solitary confinement can be made. Many mental health experts would argue that solitary confinement is, for the majority of offenders who spend long periods in solitary, a psychologically damaging punishment. Dr. Henry Weinstein, a psychiatrist who has studied American prisoners in solitary confinement, discovered that such extreme isolation results in a variety of psychological symptoms ranging from "memory loss to severe anxiety to hallucinations to delusions and, under the [most] severe cases of sensory deprivation, people go crazy" (CNN, 1998, p. 2). The almost complete loss of liberty that solitary confinement entails is dehumanizing and may hurt the prisoners's potential for rehabilitation.

Deprivation of autonomy

The world of the prisoners is characterized by a multitude of rules and commands designed to control his or her behaviour. Yet, some argue that the prisoners is not much worse off than the individual in the free community who is regulated in a great many aspects of his or her life by the dictates of custom. However, regulation by a bureaucratic staff is felt far differently than regulation by custom. Most prisoners express an intense hostility against their far-reaching dependence on the decisions of corrections officials, which is what makes their restricted ability to make choices one of the major deprivations of imprisonment (Sykes, 1966). Long term prisoners often lose their sense of self efficacy once autonomy is taken away. Offenders are told where to live and when and what to eat, they are required to wear regulation clothing, perform certain jobs and follow numerous rules (Santos, 1995). Self motivation and personal achievement are neither facilitated nor reinforced among prisoners. The rules, commands and decisions that are imposed on prisoners are not accompanied by explanations, as many corrections officers feel that they do not need to justify their demands and actions; prisoners are to do what they are told and not ask questions. Thwarting the prisoners's ability to make choices and refusing to provide an explanation for prison rules and regulations involves a profound threat to the prisoners's self image by reducing the prisoners to the weak, helpless, dependent status of childhood (Sykes, 1966).

Deprivation of security

When incarcerated, an offender is placed into prolonged proximity with other prisoners who in many cases have a long history of violent, aggressive behaviour. It is a situation which has proven to be anxiety provoking for even the hardest of recidivists. Regardless of the mutual aid and support which may flourish in the prisoners population, there are a sufficient number of offenders within this group of offenders to deprive the average prisoners of the sense of security which comes from living among people who can be reasonably expected to abide by the rules of society (Sykes, 1966). This loss of security arouses acute anxiety, not just because violent acts of aggression and exploitation can take place, but also because such behaviour constantly calls into question the individual's ability to cope in prison and hinder their abilities to live normally in the outside world (Sykes, 1966).

Another threat to the personal security of prisoners is the possibility of contacting the HIV virus from another prisoners through sexual activity, sharing syringes used to inject intravenous drugs and through unsanitary tattooing practices. Correctional Service Canada (CSC) statistics indicate that in 1997, the known cases of HIV in federal institutions totalled 158 and the number of unknown cases were thought to be much higher (CSC, 1998).

Prior to the rise of HIV and other life threatening infectious diseases like hepatitis C, physical deterioration in prisons was not definitively established in the social-scientific literature. Bonta and Gendreau (1990) argue that this is in part due to the widespread availability of medical services within correctional institutions. In general, prison food is adequate and prisoners often eat a healthier variety of foods than they would on the "outside." In the last decade, however, it has become apparent that prisoners are at a much higher risk than the general public for contacting HIV and hepatitis B and C. From January to July of 1995, 18 new cases of active hepatitis B and 200 new cases of hepatitis C arose in federal correctional facilities (Malkin, 1995). In that year, after studies were conducted at three penitentiaries, it was estimated that between 28% and 40% of federal prisoners were hepatitis C positive. In the month of August 1995, 152 federal prisoners had been classified as HIV positive, up 40% since April 1994 (Jürgens, 1996). The number of HIV cases in federal prisons has continued to rise. In 1997, there were 158 known cases of HIV (CSC, 1998). It has been reported that prison infection rates for HIV is 10 times that of the general Canadian population (Jürgens, 1996; CSC, 1998). The longer a person remains in prison thus, the more likely they are to become infected with the HIV virus.

Abraham Maslow (1943) proposes a theory which stroke a unique balance between Biological and Social needs. According to Maslow, people have many needs that complete for expression. All needs are not created equally but human motives are organised in a hierarchy that is systematically arrange with basic needs which must be satisfied before the less basic needs are aroused. Maslow arranges the needs in a pyramid according to importance as follow.

Abraham Maslow (1943) In respect to this study food, water and safety are the higher needs. There for, safety needs and physiological needs like food, water, friendship, health and family should be provided by for these children in other to give them a chance of normal development both physically, mentally and in respect of building a stable personality. so as to reduce school stress. Peers, families and guards should thus, have love for this children so that they can feel their physiological needs and achieve a sense of balance and reduce the level of stress.

Abraham Maslow proposed the theory called hierarchy of needs theory. Maslow believed that within every individual, there exists a hierarchy of five needs and that each level of need must be satisfied before an individual pursues the next higher level of need. (Maslow, 1943).

Again Maslow's hierarchy, talk about the need for security and protection. When we have our physiological needs for food and water met, our safety needs dominate our behaviour. These needs have to do with our natural desire for a predictable, orderly world that is somewhat within our control. Safety needs in today's world can manifest themselves as job security, savings accounts, insurance policies, financial security, and health and well-being (Maslow,1967).

Deterioration

The word deterioration which signifies a symptom of reduced quality or strength has been used to describe the effect of prison on prisoners. The deterioration model holds that long term incarceration causes the deterioration of aprisoner's personality and mental, emotional and physical well-being. Clinical and psychiatric case studies have long suggested that imprisonment can be devastating, at least for some offenders. For example, some studies into functional "psycho-syndrome" have shown prisoners with defects in cognitive functions, such as loss of memory and a general clouding of comprehension and ability to think; other defects

included emotional problems (apathy and rigidity), problems in relating to others (infantile regression and increased introversion), and the appearance of psychotic characteristics (obsessions, loss of reality contact) (Zamble & Porporino, 1988).

However, other studies which applied even more stringent methodology provided no consistent findings of significantly quantifiable psychological deterioration. There have been numerous attempts to use traditional measures to assess the effects of imprisonment on personality, but no clear conclusions were reached from these studies. Studies using the self esteem dimension of personality as a measure resulted in contradictory findings; some studies showed self esteem increased after some period of incarceration, while other studies indicated no change in self esteem (Zamble & Porporino, 1988).

Several studies, such as those carried out by a team of psychologists at Durham University in England, attempted to assess the effects of imprisonment using comprehensive batteries of psychological measures with groups of prisoners who varied in the amount of time they had served. It was concluded that there was no over-all deterioration in perceptual-motor or cognitive functioning in connection with duration of imprisonment. Furthermore, there were no consistent changes in attitudes or personality resulting from length of imprisonment. Other similar studies in Germany and Canada showed that while a large proportion of prisoners showed signs of depression and emotional withdrawal, very few differences were found based on length of incarceration. Furthermore, bitterness and expressions of demoralization by the prison environment, such as sleep disturbance and loss of appetite, were most evident among prisoners who had served the least time (Zamble & Porporino, 1988).

Effects of Imprisonment: Three Schools of Thought

There are three schools of thought regarding the ability of prisons to punish. The first is that prisons definitely suppress criminal behaviour. The second perspective, the "schools of crime" viewpoint, proposes just the opposite, that is, that prisons increase criminality. The third, which we label the "minimalist/interaction" position, contends that the effects of prison on offenders is, with few exceptions, minimal.

We review the basic assumptions of each school, present the best evidence in support of their views and provide a brief critique of the merits of their position.

Prisons as punishment

The view that the experience of prison in itself acts as a deterrent is rooted in the simple specific deterrence theory Andenaes,(1968) which predicts that individuals experiencing a more severe sanction are more likely to reduce their criminal activities in the future. Economists have taken the lead in support of the specific deterrence model (Hirsch, Bottoms, Burney, & Wikström, 1999). They maintain that incarceration imposes direct and indirect costs on prisoners (e.g., loss of income, stigmatization) (Nagin, 1998; Orsagh & Chen, 1988; Pyle, 1995; Wood & Grasmick, 1999). Thus, faced with the prospect of going to prison or after having experienced prison life, the rational individual would choose not to engage in further criminal activities. In

addition, another "cost" argument, identical to that which the "schools of crime" advocates employ (see next section), is that, if prison life is a degrading, dehumanizing experience then it surely must be regarded as an additional "psychological" cost of doing time.

In addition, Nagin (1998), who feels strongly that the deterrence literature in general is persuasive, despairs that if the rate of imprisonment keeps climbing, prisons will be seen as less stigmatizing thereby neutralizing any possible deterrence effect. Others suggest that only some classes of offenders may be deterrable, such as those who are more strongly bonded to society (i.e., at lower risk) (see DeJong, 1997). Orsagh and Chen (1988) have posited a U -shaped threshold theory for the punishing event, by which a "moderate" dosage of prison would be optimal. And, there is the current view that the modern prison is too comfortable; only "no-frills" prisons offer enough punishment to act as an effective deterrent (Corcoran, 1993; Johnson, Bennett, and Flanagan, 1997). As in days gone by, prisons should be places of only bare bones necessities, 7 where life is lived in fear (e.g., caning is appropriate) (Nossiter, 1994).

Schools of crime

The belief that prisons are "schools of crime" also has widespread support. The earliest writings on crime by scholars such as Bentham, De Beaumont and de Tocqueville, Lombroso and Shaw, suggested that prisons were breeding grounds for crime (see Lilly, Cullen, & Ball, 1995). Jaman, Dickover, and Bennett (1972) put the matter succinctly by stating that "the prisoners who has served a longer amount of time, becoming more prisonised in the process, has had his tendencies toward criminality strengthened and is therefore more likely to recidivate than the prisoners who has served a lesser amount of time" (p. 7). This viewpoint is widely held today by many criminal justice professionals and policy makers (see Cayley, 1998; Latessa & Allen, 1999; J. Miller, 1998; Schlosser, 1998; Walker, 1987), some politicians (e.g., Clark, 1970; Rangel, 1999, who said that prisons granted Ph.D.s in criminality), and segments of the public (Cullen, Fisher, & Applegate, in press). Aspects of our popular culture (e.g., cinema) also reinforce the notion that prisons are mechanistic, brutal environments that likely increase criminality (Mason, 1998).

How might prisons enhance criminality? There is a large body of literature of primarily an anecdotal, qualitative, and phenomenological nature, which asserts that the prisonisation process destroys the psychological and emotional well-being of prisoners (see Bonta & Gendreau, 1990; Cohen & Taylor, 1972). In contrast to the prisons as punishment view, "schools of crime" advocates view the glass as half-full rather than half-empty. By their reasoning, if prison psychologically destroys the inhabitants, then their adjustment to society upon release can only be negative, with one likely consequence being a return to crime.

A more precise specification of the mechanisms involved comes from behavioural analysts. These researchers pay less heed to putative psychologically destructive features of the prison environment, rather, they focus simply on which beliefs and behaviours are reinforced or punished therein. Bukstel and Kilmann's (1980) classic review of the effects of prison literature summarized several studies (e.g., Buehler, Patterson, & Furniss, 1966) that employed behavioural

technologies to examine and record in detail the social learning contingencies that existed in various prisons. Bukstel and Kilmann (1980, p. 472) claimed that each study found "overwhelming positive reinforcement" by the peer group for a variety of antisocial behaviours, so much so, that even staff interacted with the prisoners in a way that promoted a procriminal environment. As with the phenomenological literature, the inference here is that prisons should promote criminality.8

Although the literature remains sparse, studies do exist which have correlated the psychological changes offenders undergo in prison with their recidivism upon release. Importantly, the findings from this research are not consistent with the "schools of crime" position (see Gendreau, Grant, & Leipciger, 1979; Wormith, 1984; Zamble & Porporino, 1990). Many of the coping behaviours or psychological changes seen among prisoners are not predictive of recidivism, and only a few are correlated with changes in recidivism.

Minimalist/interaction school

Different frames of reference have contributed to this perspective. The first three coalesce nicely to provide compelling reasons why prisons should have no appreciable effect on recidivism. There is the human and animal experimental learning and behaviour modification literatures (see Gendreau, 1996). Coupled with the social psychology of persuasion knowledge base, they provide ample evidence to refute the notion that it is an easy matter to coerce offenders. Furthermore, the offender personality literature attests to the fact that the makeup of offenders is a complicating factor. We address each in turn.

Firstly, there has been a tremendous amount of research on which punishing events are the most effective in suppressing behaviour (Matson & DiLorenzo, 1984). Prison life events are not included among them. In addition, there are several absolutely crucial criteria that must always apply in order for punishment to be maximally effective (Schwartz & Robbins, 1995). Some of these are that the punishing stimuli must be immediate, as intense as possible, predictable, and the delivery of punishment serves as a signal that reinforcement is not available for the punished response. Given the nature of these strictures, it has been noted that "it is virtually impossible to meet these criteria in the real world in which offenders live unless some unbelievably efficient Orwellian environment" (Gendreau, 1996, p. 129) exists akin to a giant Skinner box. Others who have examined this issue have come to a similar conclusion (e.g., Clark, 1995; J. McGuire, 1995; Moffitt, 1983). Furthermore, and this is a critical point, punishment only trains a person what not to do. If one punishes a behaviour what is left to replace it? In the case of high-risk offenders, simply other antisocial skills! This is why punishment scholars state that the most effective way to produce behavioural change is not to suppress "bad" behaviour, but to shape "good" behaviour (Blackman, 1995). Also, the road travelled from committing a crime to incarceration is circuitous given that only a "tiny fraction" of criminal victimizations result in prison time, in most cases, months later (Bennett, DiIulio, & Walters, 1996, p. 49). And, offenders' knowledge of sanctions, even of highly publicised ones (e.g., Bennett, et al., 1996; Jaffe, Leschied, & Farthing, 1987), is far from accurate.

Secondly, the social psychology literature on persuasion and resistance processes provides another compelling rationale as to why at least the threat of punishment, such as prison, is decidedly problematic. This is a complex literature which deserves a fuller analysis; suffice it to say, that for persuasion to occur the principle of positive reciprocity (i.e., do something nice to somebody) must apply. The source of the message must be credible, attractive, and authoritative (but not authoritarian), and the appeal of the message engineered so that commitment on the part of the receiver is achieved (Cialdini, 1993; W. J. McGuire, 1995). Once commitment has occurred, several other steps must be met in order for behaviour to change (Fishbein, 1995).9 Additionally, clinicians who are skilled in breaking down resistance to change express empathy, avoid argumentation, support self-efficacy, and do not excessively confront or threaten (Miller & Rollnick, 1991). To repeatedly threaten someone is to invite the well-documented process of psychological inoculation whereby individuals think of reasons to resist change (see Eagly & Chaiken, 1993). We suspect that offenders are masters of this behaviour. A study by Hart (1978) of punishment in the army is a good example of the occurrence of the inoculation principle.

Despite this overall trend, these researchers left room for some interactions to occur (e.g., Bonta & Gendreau, 1990; Paulus & Dzindolet, 1993; Wright, 1991) by asking the questions what types of offenders under which prison living conditions might be adversely affected (Bonta & Gendreau, 1990, p. 366). For example, Zamble and Porporino (1990) found the higher risk incarcerates coped the least well in prison. They suggest that they could be prone to a greater degree of recidivism. On the other hand, a commonly expressed view is that it is low-risk offenders for whom prison has the greater negative impact. Leschied and Gendreau (1994) contended, on the basis of aggregate recidivism trends in Canada and a social learning model of criminal behaviour (Andrews & Bonta, 1998), that incarcerated low risk offenders should be negatively influenced by the potent antisocial values of their higher risk peers (also see Feldman, Caplinger, & Modarsky, 1983; Leschied, Jaffe, & Austin, 1988). Higher risk offenders should be little influenced by a term of imprisonment.

Prison Reform and Personality Development

Prisons represent the most difficult psychological spaces on earth. The stress associated with being locked away and isolated from those you love is impossible to imagine. The problems are amplified by the problematic behaviour of guards and other prisoners, and a negative social environment is almost guaranteed. The importance of the social environment is emphasized across developmental psychology. Authors such as Dabrowski and Fresco emphasize the social environment as the primary factor which determines how an individual will develop as time passes. (Sheldonkreger2011)

The affect of prison life on the personality has been studied in great depth by psychologists like Philip Zimbardo. His notorious "Stanford Experiment" involved taking normal, healthy college students and placing them in a simulated prison environment for a few weeks. Zimbardo himself played the role of the prison executive, and students were divided into the roles of guards and prisoners. Within just a few days, the negative environment drove these students to

a very low level - abusing each other verbally, simulating sodomy, being unjust in punitive measures, and so on. Zimbardo was forced to dismiss one student who lost psychological control and broke into full psychoneurosis. Yet, he continued the experiment: The environment had even been able to permeate his consciousness. In fact, it was only after his girlfriend plead with him that he called the study off. the depraved conditions in prison systems across the globe contradicts our goal of rehabilitating prisoners. However, a new series of studies has shown that Transcendental Meditation - an effortless stress release technique originally taught by Maharishi Mahesh Yogi - is an extremely effective way to establish a healthy psychology in prosecuted criminals (Alexander et al 2003). In fact, the profound reduction in rates of recidivism has inspired Oregon to adopt Transcendental Meditation as a primary tool in criminal rehabilitation.

Research by Louw, Van Ede, & Louw (1998). indicated that young child's environment plays an important enabling role in their psychological, cognitive and social development. In this regard research found that a child is strongly influenced by its home and social environment, as well as the culture it grows up in during early childhood. During this period the child has to master certain developmental tasks such as language and communication skills, emotional control, gender-role identity, social and emotional relationships, socialisation and moral development. These skills are acquired by means of interaction with his environment. The child's ability to master further developmental tasks during later stages depends to a large extend on how well he have completed these tasks during early childhood.

It is a well-known and undisputed fact that imprisoned adults find the environment within a correctional centre socially and emotionally depriving Schoeman, (1998). If these negative and depriving aspects of a prison environment are taken into consideration it is safe to assume that the impact that it will have on infants and young children during their formative years will be even more detrimental. This environment that lacks opportunities for the mastering of developmental skills and tasks will result therein that children who remain with their imprisoned mothers during early childhood will have a disadvantage in life.

Research indicated that environmental limitations are often linked to institutional care where the infrastructure, stimulation and routine are not stimulating and conducive to personal growth and development by (Louw, Van, & Louw 1998). A correctional facility is an example of such an institution. In this regard Moen, (2003). States that surroundings within South African prisons are not child friendly and that the physical space in which children can explore are restrictive. Children are seldom, if ever given the opportunity to explore the world outside the prison walls. The result thereof is that basic objects and experiences that most children take for granted are unknown to these children. The researchers are concerned that these depriving conditions will have a negative impact on the child's ability to reintegrate and adjust in a "normal" community environment.

The emotions a person experience are unique and form the basis element of his/her personality. Each emotion has a specific adaptation function for instance fear will stop a baby from falling down stairs.During early childhood children's heightened cognitive and social development contributes to changes in their emotional experiences. Basic emotions will show during infancy whilst more complex emotions such as guilt, shame and pride develop at a later stage. During this stage children are more aware of their own as well as other's emotions. They become more adept at controlling their own emotions. Emotional control is acquired by means of social interaction where a young child learns situation appropriate emotions and behaviour. (Mwamwenda, 1995). emphasised that during this developmental phase children identify with their parents, adopting their values, personality traits and beliefs as their own. This is an extension of attachment established during infancy. He states that identification assists a child in two ways, namely that once a children has adopted their parents' values they will mould their behaviour to these values even in the absence of the parent. Secondly, identification facilitates independence, for even in the absence of his parents the child knows his parent's wishes and is able to act accordingly. It is therefore clear that the emotional development of a child is strongly influenced by interaction with its parents or caregiver. In the physical or emotional absence of this interaction a child will not be able to develop the necessary emotional skills required during later life stages.

Personality and Violence
The psychological concept of "personality" has been defined as stable patterns of behaviour, thoughts or actions that distinguish one person from another (Seigel and McCormick, 2006). A number of early criminologists argued that certain personality types are more prone to criminal behaviour. The Gluecks (Glueck and Glueck, 1950), for example, identified a number of personality traits that they felt were associated with violence, including self-assertiveness, defiance, extroversion, narcissism and suspicion. More recently, researchers have linked violent behaviours to traits such as hostility, egoism, self-centredness, spitefulness, jealousy, and indifference to or lack of empathy for others. Criminals have also been found to lack ambition and perseverance, to have difficulty controlling their tempers and other impulses, and to be more likely than conventional people are to hold unconventional beliefs (Atkins, 2007; Capara et al., 2007; Costello and Dunaway 2003; Johnson et al., 2000; Sutherland and Shepard, 2002; Miller and Lynam, 2001).

The Multiphasic Personality Inventory (MMPI) and the Multidimensional Personality Questionnaire (MPQ) have frequently been used to assess the personality characteristics of young people. The use of these scales has consistently produced a statistically significant relationship between certain personality characteristics and criminal behaviour. Adolescents who are prone to violence typically respond to frustrating events or situations with strong negative emotions. They often feel stressed, anxious and irritable in the face of adverse social conditions. Psychological testing also suggests that crime-prone youth are also impulsive, paranoid, aggressive, hostile, and quick to take action against perceived threats (Avshalom et al., 1994).

There is considerable debate about the causal direction of the personality-violence association. On the one hand, some scholars have argued that there is a direct causal link between certain personality traits and criminal behaviour.

However, others maintain that personality characteristics interact with other factors to produce crime and violence. For example, defiant, impulsive youth often have less-than-stellar educational and work histories. Poor education and employment histories subsequently block opportunities for economic success. These blocked opportunities, in turn, lead to frustration, deprivation, and ultimately, criminal activity (Miller and Lynam, 2001).

Factors in childhood which are postulated to be linked to personality disorder include:
➢ Sexual abuse
➢ Physical abuse
➢ Emotional abuse
➢ Neglect
➢ Being bullied

Emotional or behavioural factors that might play a part include:
➢ Truanting.
➢ Bullying others.
➢ Being expelled/suspended.
➢ Running away from home.
➢ Deliberate self-harm.
➢ Prolonged periods of misery.

Possible personality disorders

Personality disorders present with a wide range of problems in social relationships and regulation of mood. Such individuals have usually been like it throughout their adult lives. The patterns of perception, thought and response are fixed and inflexible, although their behaviour is often unpredictable. These patterns do not adhere to their own culture's expectations. The ICD-10 criteria for clinical diagnosis refer to conditions not directly attributable to gross brain damage or disease, or to another psychiatric disorder, which meet the following criteria:
➢ Markedly disharmonious attitudes and behaviour, involving usually several areas of functioning - eg, affectivity, arousal, impulse control and relationships with others.
➢ The abnormal behaviour pattern is persistent, lasts for a long time and is not limited to episodes of mental illness.
➢ The abnormal behaviour pattern is widespread and obviously maladaptive to a broad range of personal and social situations.
➢ The above manifestations always appear during childhood or adolescence and continue into adulthood.
➢ The disorder leads to considerable personal distress but this may only become apparent at a later stage.
➢ The disorder is usually, but not always, associated with significant difficulties with work and social relationships. Clinically significant distress or impairment must occur in all settings and not be limited to one area only.

Common presenting features are as follows:

Paranoid personality disorder (PPD) - they display pervasive distrust and suspicion. Common beliefs include:
➢ Others are exploiting or deceiving them.
➢ Friends and associates are untrustworthy.
➢ Information confided to others will be used maliciously.
➢ There is hidden meaning in remarks or events others perceive as benign.

➢ The spouse or partner is unfaithful. Pathological jealousy is sometimes called the Othello syndrome.

Dissocial personality disorder (DPP)- there is a tendency to act outside social norms, a disregard for the feelings of others and an inability to modify behaviour in response to adverse events (eg, punishment). A low threshold for violence and a tendency to blame others may be features.

Emotionally unstable personality disorder- people with this personality disorder tend to be impulsive and unpredictable. They may act without appreciating the consequences. Outbursts of emotion and quarrelsome behaviour may be exhibited. Relationships tend to be unstable and there may be suicidal gestures and attempts.

Histrionic personality disorder- this is characterised by shallow and labile affectivity and theatricality. There is lack of consideration for others and a tendency for egocentricity. People with this type of personality often crave excitement and attention.

Anankastic personality disorder - this is characterised by feelings of doubt, perfectionism and excessive conscientiousness. There is a compulsion to check and a preoccupation with details. This personality type tends to be stubborn, cautious and rigid. Insistent and unwelcome thoughts may intrude or impulses that do not attain the severity of an obsessive-compulsive disorder.

Anxious (avoidant) personality disorder- this is characterised by feelings of tension and apprehension, insecurity and inferiority. People with this type yearn to be liked and accepted, are sensitive to rejection. There is a tendency to exaggerate potential dangers and risks, leading to an avoidance of everyday activities.

Dependent personality disorder - this is characterised by a reliance on others to take decisions and a fear of abandonment. There is an excessive reliance on authority figures and difficulty in acting independently. This can affect the capacity to deal with the intellectual and emotional demands of daily life.

Empirical review

According to the williamgladden foundation Statistics in 2005, people under age 20 commit the majority of reported thefts. The highest overall crime rates are among those people between the ages of 17 and 21. Juveniles under age 18 are responsible for about 35% of all larcenies, including theft, purse snatching and pocket picking. Juveniles also commit over 25% of all robberies. Juvenile theft is a common form of delinquent behaviour that most children participate in at least once. For the majority of juveniles, theft is merely an isolated incident. For a smaller population of juveniles, theft is a part of "fitting in" with a peer group, and will be "outgrown" by young adulthood. For a very small percentage of these delinquent youth, theft is a central part of a developing criminal lifestyle, and they may continue to steal or commit other illegal activities as adults. Many of these chronic delinquents will end up in jail or prison.

According to a study by Sharma & Marimuthu in 2014 society has seen an increase in the incidents of aggression/violence among youth. It includes behaviors such

as slapping, hitting, rape, recklessness, driving and shooting in school, truancy, road rage and other high-risk behaviors. Nearly 18.6% of females aged 12-17 got into a serious fight at school or work. 14.1% participated in a group-against-group fight and 5.7% attacked another person with an intent to seriously harm him/her.

On the other hand, The National Household Survey on Drug Abuse (Gfroerer, 1996) shows an overall decline in the average age of first use of alcohol, from 17.2 years in 1975 to 15.9 years in 1993; daily cigarette use, from 18.6 years in 1975 to 16.8 years in 1994; and, especially, marijuana use, from 18.9 years in 1975 to 16.3 years in 1994. Substance abuse and delinquency often share the common factors of school and family problems, negative peer groups, lack of neighborhood social controls, and a history of physical or sexual abuse (Hawkins et al., 1987; Wilson and Howell, 1993). Substance abuse is also associated with violent and income-generating crime by youth, which increases community residents' level of fear and the demand for juvenile and criminal justice services, thereby further increasing the burden on these resources. Gangs, drug trafficking, prostitution, and youth homicides are other related social and criminal justice problems often linked to adolescent substance abuse. Substance abuse and delinquency often share the common factors of school and family problems, negative peer groups, lack of neighborhood social controls, and a history of physical or sexual abuse (Hawkins et al., 1987; Wilson and Howell, 1993). Substance abuse is also associated with violent and income-generating crime by youth, which increases community residents' level of fear and the demand for juvenile and criminal justice services, thereby further increasing the burden on these resources. Gangs, drug trafficking, prostitution, and youth homicides are other related social and criminal justice problems often linked to adolescent substance abuse.

The effect of prison life on the personality has been studied in great depth by psychologists like Philip Zimbardo. His notorious "Stanford Experiment" involved taking normal, healthy college students and placing them in a simulated prison environment for a few weeks. Zimbardo himself played the role of the prison executive, and students were divided into the roles of guards and prisoners. Within just a few days, the negative environment drove these students to a very low level - abusing each other verbally, simulating sodomy, being unjust in punitive measures, and so on. Zimbardo was forced to dismiss one student who lost psychological control and broke into full psychoneurosis. Yet, he continued the experiment: The environment had even been able to permeate his consciousness. In fact, it was only after his girlfriend plead with him that he called the study off. the depraved conditions in prison systems across the globe contradicts our goal of rehabilitating prisoners. However, a new series of studies has shown that Transcendental Meditation - an effortless stress release technique originally taught by Maharishi Mahesh Yogi - is an extremely effective way to establish a healthy psychology in prosecuted criminals (Alexander et al 2003). In fact, the profound reduction in rates of recidivism has inspired Oregon to adopt Transcendental Meditation as a primary tool in criminal rehabilitation.

In what is widely recognised as a seminal study of over crowing in households, entitled Overcrowding in the Household: An Analysis of Determinants and Effects, Gove and Hughes (1983) conclude that the number of rooms available per person plays a critical role in determining the nature of interactions in the household, and is related to poor mental and physical health. They found also that objective crowding affects negatively parents' relationships and interactions with their young children, sexual behaviour between couples, and social relationships with those living outside the home. A central aspect of subjective overcrowding is a "felt lack of privacy," including a feeling of lack of control over others' access to information about oneself and one's life.

Gove and Hughes' (1983) investigation also produced evidence that the relationship of subjective experience of crowding to mental health is stronger than the relationship between persons per room (objective crowding) and mental health (Gove and Hughes 1983:75). Gove and Hughes underscore the fact that perceptions of overcrowding are an important aspect of the lived reality, and should be considered as such. In other words, perceptions (subjective crowding) toward their environment need to be considered as of parallel importance as the quantifiably measured conditions of overcrowding (objective crowding). This finding is useful for informing researchers and stakeholders concerned about the issue of overcrowding in refugee camps in the West Bank and Gaza.

Gove and Hughes assert that the subjective experience of overcrowding is determined by too many social demands and a lack of privacy, and that the experience of these interferes with one's behaviour and mental health. They also find that crowding has a greater effect on mental health for women (Gove and Hughes 1983).

Fuller's study of psychological well-being and household overcrowding in Thailand considers crowding as a chronic stress which is accompanied by lack of privacy. He found that wives who feel they lack privacy are more likely to contemplate suicide (Fuller et al. 1996:276). Fuller's studies on overcrowding are unique in their attempts to unravel the complex interaction between individual behaviours, the physical environment, and cultural norms and expectations which mitigate the effects (Fuller et al. 1993, 1996).

Baum and Koman's study of the psychological effects of social and spatial density found that people living in high social density environments were more likely to become socially withdrawn, while responses to spatial density would be include aggressive behaviour (Baum and Koman 1976). Other findings in the literature include the 'selective and modest' effects of overcrowding on human sexual behaviour (Edwards and Booth 1977). Crowding in the household is also seen to exacerbate the effects of high density in the surrounding area. High population density in urban areas, in particular, "the disintegration of small community associations that give individuals health social contacts, security, social control, personal identification and stability of culture" is linked to increased levels of emotional stress, social disorganization, and physical conflict (Morgan 1972). It has been also found that anxiety and hostility tend to intensify over time in situations of overcrowding (Zeedyk, et al. 1983).

These surveys provide important baseline information about density. For example, in the camps in Amman, there was an average of 3.9 persons per room among the sampled households, with half living at a density of 4 or more persons per room and about 5 percent living at 8 or more persons per room. Moreover, the survey found that noise outside the home was equally a cause for dissatisfaction as was lack of space within it. It also found that households which had lived in the area longer were less satisfied with their living conditions than shorter-term residence, reflecting perhaps a build-up of frustration over many years. Observations on the social effects of overcrowding are indirect. It is not clear whether a correlation can be made between this fact and the condition of overcrowding (Abu Helwa and Birch 1993).

Studies Confirmed that inmates often experience various physiological symptoms, even after a short amount of time in confinement. Isolated inmates often report symptoms similar to those of hypertension, such as chronic headaches, trembling, sweaty palms, extreme dizziness and heart palpitations. (Smith, 2006; Haney, 2003; Shalev, 2008). Inmates also experience trouble with their eating and digestion, especially within the first three months of solitary confinement (Smith, 2006). A lack of appetite and drastic weight loss is often accompanied with irregular digestion, particularly diarrhea. Inmates in isolation may also have difficulty sleeping, and some may experience insomnia (Smith, 2006; Haney, 2003). Consequently,, inmates report feelings of chronic lethargy (Shalev, 2008).

Researchers have found little to suggest that extreme isolation is good for the psyche. In one notorious study from the 1950s, University of Wisconsin psychologist Harry Harlow placed rhesus monkeys inside a custom-designed solitary chamber nicknamed "the pit of despair." Shaped like an inverted pyramid, the chamber had slippery sides that made climbing out all but impossible. After a day or two, Harlow wrote, "most subjects typically assume a hunched position in a corner of the bottom of the apparatus. One might presume at this point that they find their situation to be hopeless." Harlow also found that monkeys kept in isolation wound up "profoundly disturbed, given to staring blankly and rocking in place for long periods, circling their cages repetitively, and mutilating themselves." Most readjusted eventually, but not those that had been caged the longest. "Twelve months of isolation almost obliterated the animals socially," Harlow found.

According to international experts:
The basic essentials for public health are proper housing, adequate nutrition, and a clean, sufficient water supply. Because these factors are the primary determinants of a population's health status, they have priority over all others, including adequate medical care (Bellisari 1994).

Anna Bellisari, a health researcher who writes about the health risks of water shortage in the West Bank and Gaza, explains that:
Water shortages and pollution, especially in vastly overcrowded camps, are classic preconditions for infections such as viral, bacterial, fungal, and parasitic diseases, either waterborne or associated with poor public sanitation and personal hygiene (Bellisari 1994).

The Multiphasic Personality Inventory (MMPI) and the Multidimensional Personality Questionnaire (MPQ) have frequently been used to assess the personality characteristics of young people. The use of these scales has consistently produced a statistically significant relationship between certain personality characteristics and criminal behaviour. Adolescents who are prone to violence typically respond to frustrating events or situations with strong negative emotions. They often feel stressed, anxious and irritable in the face of adverse social conditions. Psychological testing also suggests that crime-prone youth are also impulsive, paranoid, aggressive, hostile, and quick to take action against perceived threats (Avshalom et al., 1994).There is considerable debate about the causal direction of the personality-violence association. On the one hand, some scholars have argued that there is a direct causal link between certain personality traits and criminal behaviour. However, others maintain that personality characteristics interact with other factors to produce crime and violence. For example, defiant, impulsive youth often have less-than-stellar educational and work histories. Poor education and employment histories subsequently block opportunities for economic success. These blocked opportunities, in turn, lead to frustration, deprivation, and ultimately, criminal activity (Miller and Lynam, 2001).

The empirical consensus on the most negative effects of incarceration is that most people who have done time in the best-run prisons return to the freeworld with little or no permanent, clinically-diagnosable psychological disorders as a result. Prisons do not, in general, make people "crazy." However, even researchers who are openly skeptical about whether the pains of imprisonment generally translate into psychological harm concede that, for at least some people, prison can produce negative, long-lasting change. And most people agree that the more extreme, harsh, dangerous, or otherwise psychologically-taxing the nature of the confinement, the greater the number of people who will suffer and the deeper the damage that they will incur. For a more detailed discussion of these issues, see, for example: Haney, C., "Psychology and the Limits to Prison Pain: Confronting the Coming Crisis in Eighth Amendment Law,"Psychology, Public Policy, and Law, 3, 499-588 (1997),

Among the most unsympathetic of these skeptical views is: (Bonta, and Gendreau 1990) "Reexamining the Cruel and Unusual Punishment of Prison Life," Law and Human Behavior, (1990). However, even these authors concede that: "physiological and psychological stress responses were very likely to occur under crowded prison conditions"; "when threats to health come from suicide and self-mutilation, then prisoners are clearly at risk"; "in Canadian penitentiaries, the homicide rates are close to 20 times that of similar-aged males in Canadian society"; that a variety of health problems, injuries, and selected symptoms of psychological distress were higher for certain classes of prisoners than probationers, parolees, and, where data existed, for the general population"; that studies show long-term incarceration to result in "increases in hostility and social introversion and decreases in self-evaluation and evaluations of work and father"; that imprisonment produced "increases in dependency upon staff for direction and social introversion," a tendency for prisoners to prefer "to cope with their sentences on their own rather than seek the aid of others," "deteriorating community relationships

over time," and "unique difficulties" with "family separation issues and vocational skill training needs"; and that some researchers have speculated that "prisoners typically undergo a 'behavioral deep freeze'" such that "outside-world behaviors that led the offender into trouble prior to imprisonment remain until release. (Bonta & Gendreau 1990).

Again, precisely because they define themselves as skeptical of the proposition that the pains of imprisonment produce many significant negative effects in prisoners, Bonta and Gendreau are instructive to quote. They concede that: there are "signs of pathology for prisoners incarcerated in solitary for periods up to a year"; that higher levels of anxiety have been found in prisoners after eight weeks in jail than after one; that increases in psychopathological symptoms occur after 72 hours of confinement; and that death row prisoners have been found to have "symptoms ranging from paranoia to insomnia," "increased feelings of depression and hopelessness," and feeling "powerlessness, fearful of their surroundings, and emotionally drained. (Bonta & Gendreau 1990).

Surveys indicate that both the public and offenders consider prison to be the most severe and effective punisher of criminal behaviour (Doob, Sprott, Marinos, & Varma, 1998; Spelman, 1995; Voorhis, Browning, Simon, & Gordon, 1997).Policy makers often assume that prison is the severest punishment available (Wood & Grasmick, 1999). DeJong (1997) remarked that the expectations of the public and policy-makers are that incarceration has powerful deterrent effects.

What kind of data is used to support the prison as punishment hypothesis? The most persuasive evidence comes from some ecological studies where the results are based on rates or averages (aggregate data). An example of one of the most positive results came from a study carried out by Fabelo, (1995)that reported a 30% increase in incarceration rates across 50 U.S. states, corresponding with a decrease of 5% in the crime rate for a five-year period.5 Fabelo's data has been interpreted as convincing evidence that prisons punish (Reynolds, 1996).

Some caveats about the potency of the prisons as punishers school should be noted. Not all researchers view the ecological evidence regarding prisons as convincing (Gendreau & Ross, 1981; von Hirsch, et al, 1999). It must be emphasized that ecological studies, based as they are on aggregate data, may say absolutely nothing about individual behaviour (Andrews & Bonta, 1994; Menzel, 1950; Robinson, 1950). Furthermore, the effects found in aggregate studies, which are expressed in correlational terms, are almost invariably wildly inflated6 when compared to individual level results (Freedman, Pisani, Purves, & Adhikari, 1991; Robinson, 1950; Zajonc, 1962; Zajonc & Mullaly, 1997). Causality, moreover, cannot be inferred as a host of other underlying factors (e.g., economy, demographics, incapacitation policies, etc.) - Henshel (1978) listed 15 such factors - that may influence the prison sanction-crime rate relationship (see also Gendreau & Ross, 1981; von Hirsch et al., 1999).

A Canadian study was carried out to test the coping hypothesis by observing, over a period of 16 months, the coping and adapting behaviour of prisoners serving sentences similar in length in the same penitentiary. Conditions for the incarcerated are very different from those on the outside. By its nature, imprisonment requires that prisoners live apart from their families, live together in groups that would not otherwise exist and be seriously constrained in their choices. As a result the prisoners's world is socially and psychologically artificial. A primary objective of this study was to further understand what being incarcerated does to the prisoners and to be able to make some conclusions about the general effects of imprisonment.

CONCLUSION
The Cameroon prison regulation is drawn from the national and international instruments and has three main objectives. The first objective is Security which involves protecting the society through the effective imprisonment of convicted persons and those awaiting trial. The second objective is economic based on occupying the prisoner through work to participate in the national development effort. The third objective is social and involves preparing the prisoner for better rehabilitation through an individualised system and treatment and developing hiscapacities to take care of himself, thus favouring his return to normal social life (Linonge, 2010). If one looked at the objectives of prison regulations in Cameroon one could be tempted to say that all is well in Cameroon prisons, considering that it provides an environment for better treatment of prisoners. Like Thaddeus Besong puts it, the aims of the prison administration in Cameroon reflect Montero's aim (protection of offenders and suspected offenders against unofficial retaliation), and deterrence which is better than the severity of punishment.

RESEARCH METHODOLOGY
This chapter states and describes the methods and procedures adopted and used in the execution of this investigation. This was done under the following subheadings; Research design, Area of the study, Population of the study, Sample of the population, Sampling technique, Instruments for data collection, Validation of instruments, Administration of instruments, Method of data analysis and Ethical considerations.

Research design
The survey research design was adopted for this study, numerical representation and manipulation of observations was used for the purpose of describing and explaining the phenomena of interest. The survey research design usually involves the collection of data from a sample element drawn from a well-defined population through the use of questionnaires, interview guides and check list. A survey research design is one in which a group of people or items are studied by collecting and analysing data from only a few items considered being a representative of the entire group or population.

One very accurate attribute of the survey research design is the intention of generalizing the findings to the population from which the sample was drawn. Hence, predicting outcomes is also possible. in survey design gives room for predictive inclination which leads the study into formulating and using research questions to guide the study. Hence, the survey research designs was used because it offers opportunity to execute studies with various designs, each of

which is suitable for addressing particular research questions of interest, in this case studying children in prison was a perfect fit.

The anonymity of the survey design allows respondents to answer with more candid and valid answers because they know the information they provided could not be traced back to them. To get the most accurate data, there is need for respondents to be as open and honest as possible with their answers even due this aspect of honesty cannot be proven from the results. Surveys conducted anonymously provide an avenue for more honest and unambiguous responses than other types of research methodologies, especially because it was clearly stated that survey answers will remain completely confidential.

Area of the study
This research was carried out in the South West Region of cameroon, specifically in the Buea and Kumba sud-Division. Buea was founded by Eya'a Njie Lifanje, who was believed to have come from Bomboko, the town is situated at the foot of Mt. Cameroon (mount fako). Buea is made up of Buea station, Great soppo, Small soppo and Bokwango (Ebune, 1992). According to Matute (1988), some of members of Buea (Gbea) expanded to Ewonda, Wonya mokomba and Wonduma known today as Bunduma. Ebune 1970 states that each of these conclaves had a population of less than 50 in the early 1950s.

The Buea central prison constructed around 1933, according to official sources, was meant to accommodate just 200 inmates, but today, some 83 years after, the situation of the prison in-terms of infrastructure and general living conditions of inmates remains deplorable. Today, the facility is over-congested with some 900 inmates, out of which about 350 of them are still awaiting trial. Some of them have been awaiting trial well above the maximum period required and have never been brought to court. It is understood they are unable to afford for the services of lawyers. The majority of the inmates are between 25-30 years.

The Buea central prison which is located within the Buea lower farms neighborhood is bounded in the west by presbook shop and formal Texaco, in the north by court and the south by the national school for penitentiary administration (ENAP) and in the east by the mount Mary maternity.

Kumba is a city in South West Regionof Cameroon also known as K town. Kumba has an estimated population of about 400.000 inhabitants with about ¾ of this population falling within the youthful age group. The increase in population is as a result of increase in birth rate and a fall in infant mortality rate as a result of improvement in Infant health care and migrations (Rural – Urban). The N8 and N16 highways meet at Kumba.

Kumba is a local road junction which means individuals from all the environs meet there either or business reasons or social. This makes it one of the main commercial towns in the Anglophone region of the country. Commercial activities in town have attracted the interest of foreigners (Nigerians-the igbos), who are controlling a greater percentage of the town main markets. The main activities of the people of this town are farming and trading

Although it is the largest city in the southwest region of Cameroon, it is not the regional capital; which is located in Buea, the former German colonial capital. Because of its size, most major roads to the provincial interior radiate from Kumba, running to the Nigerian border at Mamfe, the Korup National Park at Mundemba, and Mount Koupe to the east. The premier geographical attraction in Kumba is Barombi Mbo, the largest volcanic lake in Cameroon's volcanic chain Most people in Kumba speak English and Pidgin, and at least one of a variety of indigenous languages, most dominantly Bafaw, Bakossi and Mbonge. The indigenes of Kumba are the Bafaw, an ethnic group who speak the Bafaw language, a language similar to Duala, Mboh and Bakossi, and certainly Southern Bantoid. Due to its cosmopolitan nature, the Bafaw now form just a percentage of the general population of the city, and have lost many aspects of their culture, except for their language which is spoken mostly by the elderly and some of the younger generation.

Because of its commercial nature and access roads to the borders, Kumba is known to be one of the most dangerous towns in the south west region with its prison made up of individuals from home and neighboring countries like Nigeria. The prison is located at up station around the Kumba mountain club in the Kumba 1 district.

Population of the Study
The study was centered on child prisoners in Cameroon. The Buea central prison and the Kumba central prison were chosen for the study because of ease of access and proximity. Since it is not possible scientifically to reach out to all these children, the study concentrated on the children presently in prisons in Buea and Kumba with an estimated population of 60 children.

Table 1: Population and sample

Prison	Total population	Accessible population	sample
Buea Central Prison	36	32	32
Kumba Provincial Prison	22	18	18
Bavenga Secondary Prison	00	00	00
Total	**58**	**50**	**50**

Sample and sampling technique
The sample for this study was made up of 58 children in prison that is, children ranging from ages 10-18. They included 32 from the Buea central prison of which 10 of them were used for the pilot study and the remaining 22 was used for the actual study and 18 from the Kumba principal prison.

Table 2: sample population

Prison	Total population	sample
Buea Central Prison	36	32
Kumba Provincial Prison	22	18
Bavenga Secondary Prison	00	00
Total	**58**	**50**

The sampling technique used in this research was the purposive sampling technique. It was adopted because the problem under investigation was subjective and required particular set of individuals who were considered rich in knowledge to provide responses to the issues raised in the study. As such, all child prisoners suit the purpose of the study. In purposive sampling, the goal is to select cases that are likely to be "information rich" with respect to purposes of the study. The primary objective of this type of non-probability sample is to produce a sample that is representative of a particular population. This is done by using the researcher's expert knowledge of the population and selecting a sample of elements in a non-random manner.
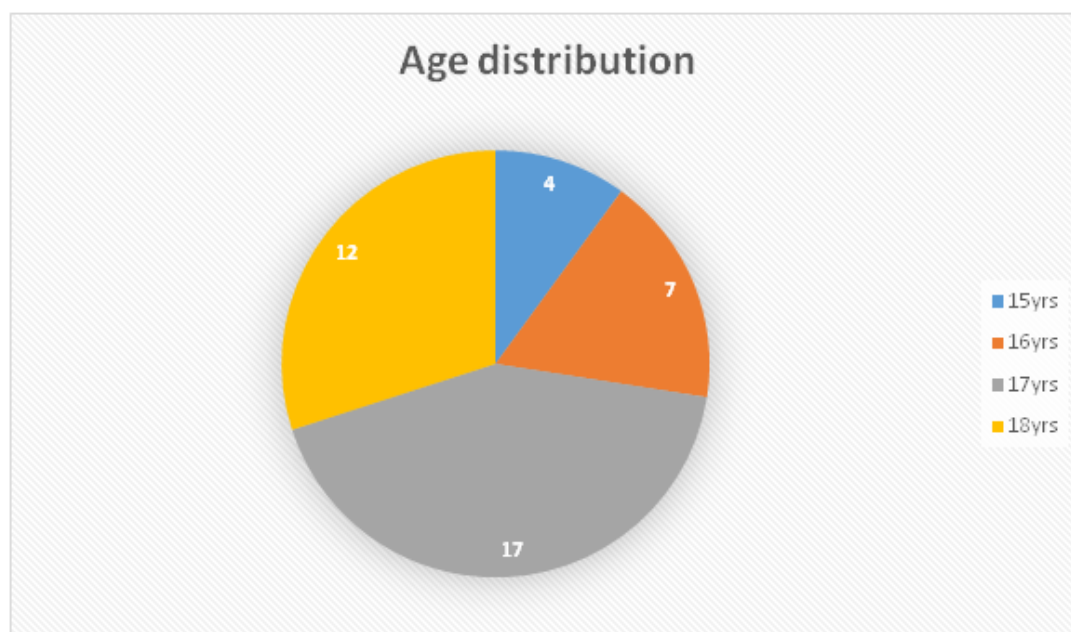
Figure 1: Age distribution of Sample

The age range of the sample ranged from 10-18 years, there were 4 children of age 15, 7 children of age 16, 17 children of age 17 and 12 of age 18 making a total of 40 children. Majority of them were between the ages 17-18.
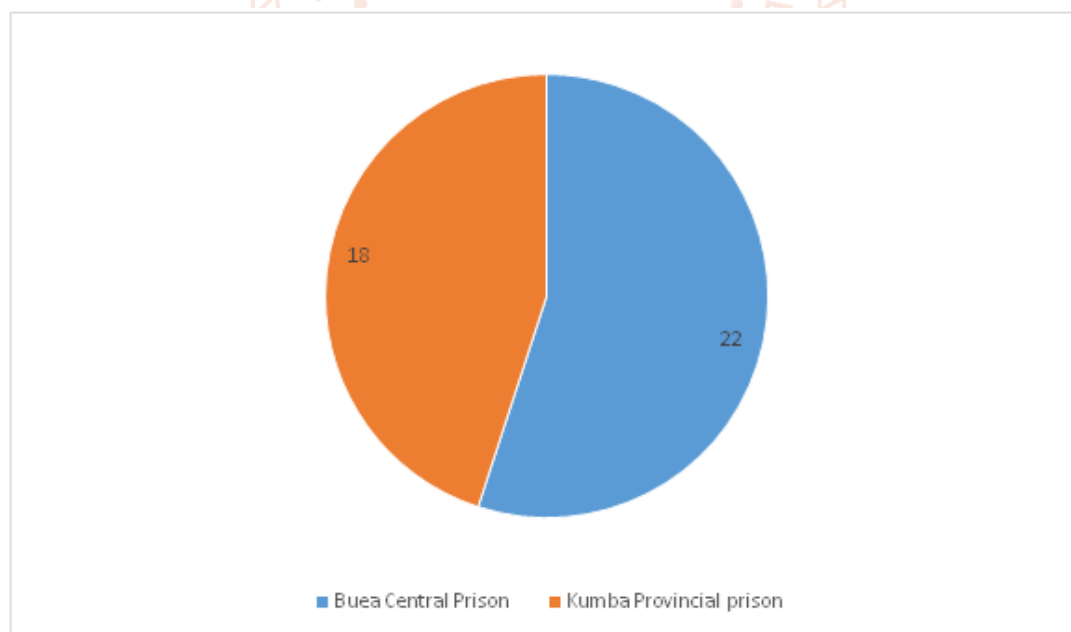

Figure 2: Table of distribution of respondent

The respondeds for the study were drawn from two prisons in the south west region, 22 of the 40 came from the buea central prison while 18 came from the kumba provincial prison.

Instrument for data collection
The instrument used for data collection was a questionnaire. The questionnaire was adapted from some standardized tests for the purpose of the study. They included the WHO inventory for quality of life (WHOQL), Coopersmith self-esteem inventory and the State Trait Anxiety Inventory (Y-A). The items were selected because they were closely related to the variables of the study. After carefully selected, they were transformed into statements and adapted to suit the likert scale so that the range of response could be easily converted to quantitative data to ease analyses.

The WHOQOL-100 assesses individuals' perceptions of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns. It was developed collaboratively in some 15 cultural settings over several years and has now been field tested in 37 field centres. 30 Item were selected and adapted from this test were used to measure aspects of:
➢ Overcrowded prison conditions
➢ Health conditions
➢ Physical and or sexual
➢ Social support

The WHOQOL uses a five scale measurement platform which includes; Very dissatisfied 1, Dissatisfied 2, neither satisfied nor dissatisfied 3, Satisfied 4, Very satisfied 5. And the statement sought to find out how satisfied the responded was with the aspects being tested. The questions for example; 'How satisfied are you with the conditions of your living place?' was changed to a statement 'I am satisfied with my leaving conditions'. This was done to suit the likert scale format.

The self-esteem inventory was originally designed to measure children's self-esteem. However, it was modified by Ryden (1978) for use on adults. For each item, participants answer whether the statement provided is "like me" or "not like me". The 'modus operanda' of this test specifies which items could determine if an individual had low or high self-esteem, the 11 items that showed aspects of low self-esteem were selected and not changed because they were already in statement form. The items that indicate traits of low self-esteem were selected and used for the study

The State Trait Anxiety Inventory (STAI Y-A) is a validated 20 item self-report assessment device which includes separate measures of state and trait anxiety. The original STAI form was constructed by Spielberger C, D., Gorsuch R. L., and Lushene R. E. in 1964. The STAI has been adapted in more than 30 languages for cross-cultural research and clinical practice (Sesti, 2000). Various reliability and validity tests have been conducted on the STAI and have provided sufficient evidence that the STAI is an appropriate and adequate measure for studying anxiety in research and clinical settings (Sesti, 2000). McIntrye, McIntyre, and Silverio (in press) validated the STAI for Portuguese communities. Aspects from the above two tests were used to measure aspects of personality.

The STAI uses also a four measurement standard and also contains statement, this scale included the following; Not at all, A little, Somewhat, Very Much So. This indicated the level to which the statement related to the individual. Again it used overall score to determine for selected items to determine if that individual showed traits of anxiety. The adaptation involved selecting these 9 items and including them to the instrument to help test for aspects of the dependent variable.

Secondly, because the items were limited in nature some other items were included from the researcher s self-created item list. Some items were left open ended so as to be able to get personal and indebt response to certain items which required more than single words. The questionnaire comprises of two formats, the first section was a purely like scale adapted from the above mentioned ted the second section was comprised of opened ended questions to get indebt knowledge of certain aspects of interest. These were creased to measure:
➢ Solitary conferment
➢ Availability of rehabilitation programs and recreation activities

Measures

Measure of overcrowded prison conditions; Firstly, overcrowded prison conditions had seven (7) items which were as follow, I am satisfied with the conditions of my living place, I have difficulties with sleeping spaces, I am satisfied with my sleep, I have three meals a day, I fought because food or water wasn't enough, My resources don't permit me to have all I need, I am not satisfied with my inability to perform my daily living activities, with a likert scale of four, strongly agree, agree, disagree and strongly disagree.

Measure of Health conditions; health conditions had six (6) items which were as follow, There is always a doctor and nurse at the health unit, When am sick they always provide medications and health care, I am comfortable with my bodily appearance, I am satisfied with my access to health services, It is easily for me to get good medical care, I am satisfied with my health, with a likert scale of four, strongly agree, agree, disagree and strongly disagree.

Measure of Solitary confinement; solitary confinement had five (5) items which included aspects such as;I am satisfied with my ability to move around, I will feel bad if that freedom was taken away by putting me in salting cell, I can visit someone in the salting cells, someone wounded himself or died in the salting cell, I am sometimes put in chains in chains, with a likert scale of four, strongly agree, agree, disagree and strongly disagree.

Measure of Physical and or sexual; for physical and or sexual abuse there were nine (9) items as follow, I am living in a safe and secure environment, I worry about my safety and security, I am satisfied with my physical safety and security, The fear of punishment prevents me from doing what i want to do, People form Gangs to protect each other, There are cases of sexual abuse reported ,I have been made to do things you don't want to, I am presently worrying over possible misfortunes, I feel frightened, with a likert scale of four, strongly agree, agree, disagree and strongly disagree.

Measures of social support; for social support, there were twelve (12) item which included, I get the kind of support from others that I need, I am satisfied with the support I get from my family, I can count on my friends when I need them, I am satisfied with my personal relationships, I are satisfied with my ability to provide for or support others, I feel happy and loved when they visit, I am satisfied with the social care services, I am satisfied with my opportunities for acquiring new skills, I have opportunities for acquiring the information that I feel I need, I have the opportunity for leisure activities, I am able to relax and enjoy myself, I am comfortable with the way I spend my spare time, with a likert scale of four, strongly agree, agree, disagree and strongly disagree.

Measure of personality; personality was the dependent variable and had nineteen items they included;I often wish I were someone else, No one pays much attention to me at home, I get upset easily at home, My parents and I have a lot

of fun together, Most people are better liked that I am, I do not like to be with other people, Children usually follow my ideas, There are a lot of things about myself I would change if I could ,I am popular with children my own age, Things are difficult in my life, It is pretty difficult to be me ,I am pretty happy, I am worried ,I feel confused ,I feel content ,I feel content, I feel self-confident, I feel nervous, I feel uncomfortable, I feel satisfied with a likert scale of four, strongly agree, agree, disagree and strongly disagree.

Validation of instruments
Face validity
The main instrument the questionnaires were adapted reviewed by the researcher. Some typing errors were discovered and corrected. The instruments were again reviewed with peers, after realizing a few inconsistencies; they were re-adjusted, modified and handed to some faculty staff for appraisal. After taking a look at the items, they were adjusted, reprinted and formatted to meet the required specifications in terms of quantity, size, style and visibility. The supervisor also looked at the instruments and some visible errors were corrected to give the instruments a proper and clear outlook.

Content validity
After constructing the instruments, they were corrected and again reviewed with peers, after realizing a few inconsistencies; they were readjusted, modified and handed to some faculty staff for appraisal. After taking a look at the items, it was discovered that some issues raised in the items will not actually measure what the study was out to measure. Some were deleted, others added, some adjusted so as to permit the items measure the true objective of the study. As such they were reformulated to suit the task at hand and serve the purpose of the research through acquisition of pertinent data.

Thereafter, all instruments were presented to the supervisor who did a thorough review and check of each item contained in the instruments. The supervisor equally realized some irrelevances which were less significant in the process of acquisition of true and representative data. The investigator again discarded these items and under the guidance of the supervisor truer and representative items were constructed by the researcher to fit the purpose of the study. Therefore, the instruments contents were validated before being administered.

Construct validity
The researcher simultaneously defines some construct and develop the instrumentation to measure them like overcrowded conditions of the prison, solitary confinement, health conditions, physical and or sexual abuse, social support and rehabilitation and recreation. After checking the content, the supervisor asked the researcher to take the instrument to a statistician whom the researcher took and dialogued with the statistician whom accepted that the constructs were measurable. After thorough dialogue with the statistician, the researcher was then asked to go and carry out a pilot test.

Reliability
Reliability on the other hand refers to the consistency of measurement. It equally refers to the consistency, dependability, accuracy and precision with an instrument measures the attributes it is out to measure.

Ten child prisoners were selected for a pilot study. it was carried out to check the appropriateness of the language used in the questionnaire as well as determining the difficulty of the items in the instruments. Thus, necessary modifications of the tools were made, hence improving the level of instrument validity. This is to ensure content validity, to make sure the items are good enough to test the aspects under study.

during the process some children said some statements were almost the same, such statements were dropped in the final instrument and also some words were replaced to ensure understanding since most of them could not make meaning of the words. In fact, reliability is more effectively measured when a likert scale is used (Nana, 2012). This justifies why a likert scale was selected for this study. After the collection of data, it was taken to the supervisor who asked some questions to the researcher about the pilot. The pilot test was then taken to the statistician who designed an Epi data whereby the researcher entered the data and the statistician analyzed pilot test using PASW statistical package version 18.1(SPSS).

Pilot report
Missing Values Analysis
Missing Value Analysis was computed to appraise the comprehension of the questions by the respondents.

It helps to appreciate the rate of missing responses, to identify variables without responses on question that ought to be answered.

Missing values rate is calculated using the following formula:

MV = (Number of missing responses/Total number of expected responses)*100

= (Number of missing responses/ (Number of variables *Sample size)*100

MV = (Number of missing responses/Total number of expected responses)*100

= (Number of missing responses/ (75*20)*100

= (10/70)*100

= 14.3%

The rate of Missing values was 14.3%. above 5%, the rate of missing values is not assumed critical (Nana, 2012), but it was however important to identify the variables concerned and to see if possible, how this could be prevented during the final study. But from the final result showed that some other values still appeared as missing and this was attributed to difference in prison experience

Reliability analysis

Table3: Reliability analysis for the pilot study

Conceptual components	Cronbach's Alpha	N_{cases}	N_{item}
Overcrowded prison conditions	0.654	10	8
Health conditions	0.772	10	7
Solitary confinement	0.691	10	6
Physical and sexual abuse	0.558	10	10
Social support	0.846	10	10
Rehabilitation and recreation	0.672	10	10
Personality development	0.562	10	19

Administration of instrument

Prior to the administration process, a letter of introduction was obtained from the faculty of Education to bear testimony to the fact that the investigator was a registered student of the said faculty on research, seeking data solely for the purpose of research. The letter was therefore aimed at enabling the researcher to gain easy access to different locations and participants of the research area. The researcher personally conducted and supervised the distribution and administration of the questionnaire. This was done to save time, clarify doubts, ensure a smooth response process and proper handling of the instruments. Also the researcher wanted the process to be purely scientific and void of any malpractices where others will influence the responses of some respondents. All items were retained and returned to the researcher on the spot.

At the site, the prison administration and guards help round-up the children in a hall that had desk. After proper introduction and description of expectations, the researcher read out the instructions and method of responding to the instrument. The children were separated into two categories, those who could read and write and those who could not. With the help of the guards the children were placed in separate sits in other to avoid couching or influence. The researcher later took those who could not read and write read out the items out to them one after another and explaining to them to help them facilitate responding to the instrument. After the items were responded to, the researcher collected the questionnaires, counted on the support to make sure all had been return. The same procedure was followed in both prisons.

Method of data analysis

The data was extracted using excel 2010, descriptive statistics through the use of frequency tables and percentages were used to analyze the data collected in line with the research questions. The tables and figures were used to show the number and percentage of respondents to the different items contained in the instruments, also means, statistical sum and standard deviations was used in order to establish a significant relationship between the independent and the dependent variables that is prison conditions and formation of a stable personality. Analysis and interpretation of data was done in accordance with the research questions. Data range and validation checks performed using the Statistical Package for Social Science version 21.0 (IBM Inc., 2012) to identify invalid codes.

Data were made essentially of categorical variables and they were analyzed using frequency, percentages and mean estimation. Reliability test was performed to assess the internal consistency of responses using Cronbach Alpha reliability analysis. Open-ended questions were analyzed using the process of thematic analysis whereby concepts or ideas were grouped under umbrella terms or key words. Secondly the 'modus operanda' that is method of interpretations of the above standardized were taken into consideration as a point of reference to deduce the meaning and application of some of the responses given to the items used so as to have a generative and reflective information for the discussion of the findings.

Ethical considerations

Aspects related to the prison can be considered as sensitive information so there for certain measures were taken to ensure that the information be used for the intentions for which they were collected and nothing else. Firstly, the instrument of data collection did not require names of the children so that there will be a certain level of anonymity in the data collected. Also data was not used against respondents or given out to second parties except to the supervisor and or examination panel. Also, no one was forced or obliged to participate in the research as a respondent.

Secondly, because the study involved children a letter of consensus was drafted and issued to the guardian of these children whom in this case is the superintendent in charge of the prison to as to as for permission to work with the children promising and taking measure not to violate the rights of these children in Anyway, be it by exposing their identity or use the information provided against them in the prison court or otherwise.

Thirdly, those who constituted the sample were required to do so willfully and conveniently on the basis that were adding value to an investigation that was useful to the education family, the community and nation at large. Finally, no names or individual identities were attached to the data given by the respondents. Finally, all works used in this study shall also be properly referenced in other to acknowledge the contributions of other researchers to the success of the study to avoid aspects of plagiarism.

FINDINGS

Introduction

Data collected from the field were subjected to both descriptive and inferential statistics. For the descriptive data frequency distribution tables were used to describe and evaluate the responses obtained.

Table 4: Socio-demographic characteristics of the sample

Indicators	Categories	n	%
Prison location	Buea	18	45
	Kumba	22	55
Age of participants	15	3	7.5
	16	7	17.5
	17	17	42.5
	18	12	30.0
Missing value	1	1	2.5
Total		40	100
Trial decision	Sentenced	11	27.5
	Awaiting trail	29	72.5
Total		40	100

The table above shows demographic information of the following aspects:

The study was carried out in two locations, the Buea central prison and the Kumba principal prison. 18respondents with a percentage of 45% came from the Buea central prison while 22 with a 55% came from the Kumba principal prison.
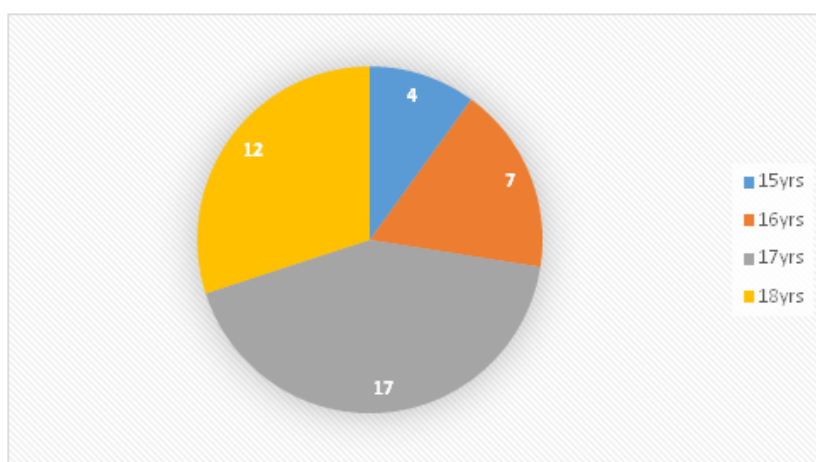
Figure 3: Age distribution of respondents

Age distribution
The expected age range was between the ages of 10-18 years and the distribution was as follows 15 years with a proportion of 7.5% (3) respondents, 16 years 17.5 (7) respondents, 17 years with a percentage of 42.5% (17) and 18 years 30% (12).
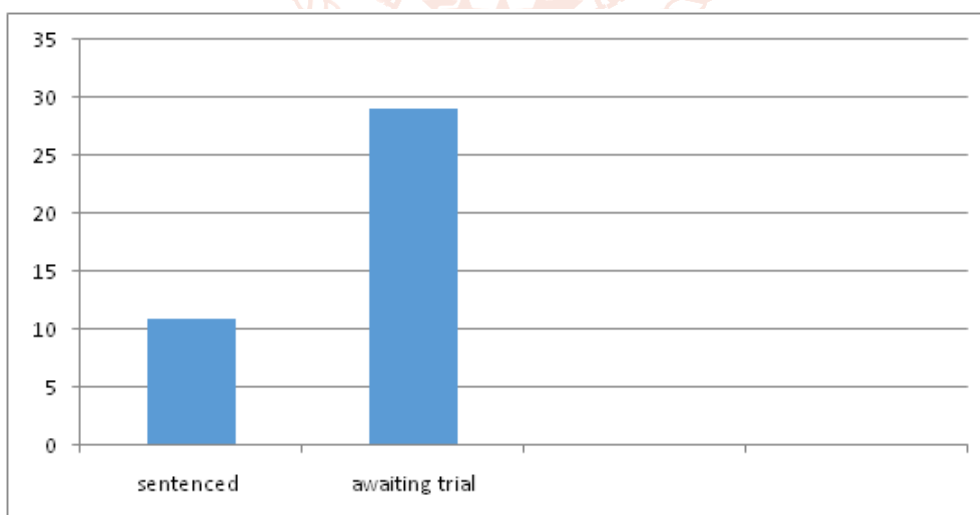
Figure 4: Bar Chart for Trial Decision

The trial decision indicates which of these children are serving jail term or still awaiting trial. From the data collected and analysed, 11 of the 40 responded with a 27.5% are serving jail terms while 29 of them with a percentage of 72.5 are still awaiting trial.

From the response recorded from item responsible to find out the amount of time already spent in prison, it could be seen that 14 out of the 40 inmate with a percentage of 35% had spent a period with 0-6 months, 12(30) had spent a period of 7-12 months 10(25%) had spent a period of between 1-3 years while 4(10%) had spent a period between 4-7 years with the highest period of 6years 7 months of jail term served.

Research question one: What are the anti-social behaviours that carry children to prison?

Table 5: anti-social behaviours

Indicator	Frequency	Percentage %
Theft	25	62.5
Drugs	4	10.0
Murder	4	10.0
Rape	3	7.5
Aggression	2	5.0
Counterfeit	1	2.5
Kidnapping	1	2.5
Total	40	100.0
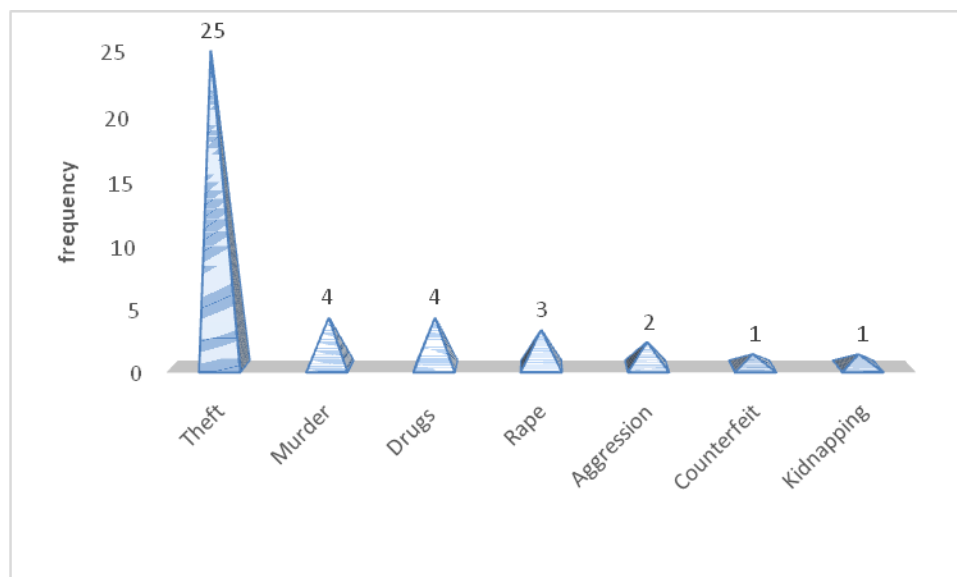
Figure 5: antisocial activities that take children to prison

This section goes a long way to answer research question one, the various reason for imprisonment of children is describe here beginning from the less president. kidnapping and counterfeiting both had 2.5% (1), followed by aggression 5.0% (2), rape with a 7.5% (3), drugs 10% (4) respondents, murder, 10% with four (4) respondents and finally theft with the most representation of 25 cases and a percentage of 62.5%. from the above it can be seen that most of the children are in prison for the crime of theft, be it aggravated or simple theft. The pyramidal bar chart shows the number of children incarcerated for different reasons and on the table we can see the vast difference in the rate of these crimes.

The findings from the tables above show that there is the presence of anti-social behaviour amongst children and they interact with peers and other siblings to commit some of this crimes which is a call for concern.

Research questions two: In what ways does overcrowded prison conditions affect the formation of the stable personality of child prisoners?

Table 6: overcrowded prison conditions

Opinion	Agree		Disagree				
Concept	N	%	N	%	Statistical sum	mean	StD
Living space	8	20	32	80	65	1.63	.979
Sleeping	18	45	22	55	90	2.25	1.235
Sleeping space	15	37.5	25	62.5	84	2.10	1.081
Three meals per day	6	15	33	80.5	61	1.56	.882
Fight for Food and water	18	45	21	53.5	90	2.31	1.217
Available resources	30	75	10	25	120	3.16	.945
Ability to perform daily activities	34	85	6	15	67	1.67	.917
Total	129	48.5	139	51.5	557	Av mean =2.1	7.256

From table 9 above that records findings for the overcrowded nature of the prison the following records were obtained.8 with a percentage of 20% agreed upon the fact that they were comfortable with their leaving space while 32 with a percentage of 80 disagree, 18 with a percentage of 45% were comfortable with their sleep while 22 with a percentage of 55% disagree of being comfortable with their sleep, again 15(37.5%) agreed to being comfortable with their sleeping space while 25(62.5%) disagreed to this aspect, 6(12%) agreed to having three square meals while 33(80%) disagreed to this aspect and 1(2.5) did not answer to this item. 18(45%) agree to have fought because of food or what while 21(53.5%) disagreed to this and 1(2.5) did

not respond to this item, 30(75%) to the fact that limited resource prevent them from carrying out their daily activities while 10(25%) disagreed to the fact, 34(85%) agreed to the aspects of not being satisfied with the inability to carry out their daily activities while 6(15%) disagreed to these aspects. The overall analyses were as follows, 129(48.5) agreed to the aspects and items of overcrowding while 139(55.7%) disagreed to this aspects giving a statistical sum of 557. The responses had a total average mean of 2.1, a 2.1 means is below the expected average mean of 2.5. this indicates that more of them disagreed rather than agree.

From the responses presented above, most of the responded disagree to being comfortable with their leaving conditions and are facing the negative effects of overcrowded prison which implies that this conditions affects the development of a stable personality.

The thematic table above provided response to the question, 23 of them said that the will change the condition of feeding in prison either by increasing the quantity or the quality, 21 of them said they will change the sleeping condition and provide comfortable sleeping spaces for the inmate and top the aspect of having about four persons per sleeping space. Again about 13 said they will change the punishment nature of the prison and stop the use of restrains and isolation, 16 said they will stop abuse, both its physical or sexual abuse wish is either committed by guards and or older prisoners, 12 of them said they will close down the salting cell and stop the use of solitary confinement in the prison while 4 said they will try to decongest the prison and finally 1 of them said they will provide recreational activities for the prisoners.

From the above findings, we can see that there is a high level of dissatisfactions amongst these children in respect to their leaving conditions, sleeping conditions and provision of food in prison.

Research question three: How does the health care service conditions of the prison affect the development of the stable personality development?

Table 7: health care service conditions

OPINION	AGREE		DISAGREE				
CONCEPT	N	%	N	%	STATISTICAL SUM	MEAN	STD
Presence of health personnel	31	77.5	9	22.5	124	3.10	1.033
Provision of medical attention	27	67.5	13	32.5	112	2.80	1.159
Bodily appearance	10	25	30	75	71	1.77	1.097
Satisfaction to health care	12	30	28	70	79	1.98	1.025
Access to health care	10	25	30	75	78	1.95	.986
Satisfied with heath	10	25	30	75	73	1.82	.984
Total	100	41.7	140	58.3	537	Av mean = 2.24	Av STD =0.9

From table 11 above, 31 respondents with a percentage of 77.5% agreed upon the fact that there are always health personnel's while 9 with a percentage of 22.5% disagree, 27 with a percentage of 67.5% were comfortable with provision of medical care while 13 with a percentage of 32.5% disagree over being comfortable provision of medical care , again 10(25%) agreed to being comfortable with their bodily appearance while 30(75%) agreed to this aspect, 12(30%) agreed to being satisfied with health care while 28(70%) disagreed to this aspect. 10(25%) agree to being satisfied with their access to health care while 30(75%) disagreed. 10(25%) agree to the fact that they are satisfied with their health while 10(75%) disagreed to the fact. For the overall analyses, 100(41.7) agreed to the aspects and items of health services while 140(58.3%) disagreed to these aspects. The responses had a total average mean of 2.1. A 2.4 weighted mean is below the expected average mean of 2.5. this indicates that more of them disagreed rather than agree.

Disagreeing to the aspects of health care services conditions under investigation indicates that there are negative effects coming from this services with in-turns affects the personality development as a result of limited hearth services provisions.

Research question four: How does physical and or sexual abuse in prison influence building of stable personality by child prisoners?

Table 8: physical and or sexual abuse

OPINION	AGREE		DISAGREE				
CONCEPT	N	%	N	%	STATISTICAL SUM	MEAN	STD
Safety and security	20	50	19	47.5	97	2.49	1.073
Satisfaction with safety and security	26	65	13	32.5	114	2.92	1.109
Fear of punishment	23	57.5	17	42.5	99	2.49	.987
Presence of gangs for protection	30	75	10	25	122	3.05	1.085
Presence of sexual abuse	24	60	16	40	109	2.73	1.132
Physical abuse	25	62.5	15	27.5	112	2.80	1.203
Forced to do things	27	67.5	13	22.5	113	2.83	1.083
Presence of constant fear	26	65	14	35	107	2.68	1.095
Total	201	65.3	107	34.7	873	Av mean=2.4	Av STD =1.1

Table above shows results for research question four, 20 (50%) Responded Agree to item one while 19(47.5%) disagree. The second item records 26(65%) agree while 13(32.5) disagree. The third item registered 23(57.5%) for agree, while 17(42.5%) disagree. For the fourth item, 30 with a percentage of 75% answered agree, while 10(25%) disagreed. for the fifth, 24(60%) agreed, and 16 with a percentage of 30% disagreed, the sixth item records agree 25(62.5%) while 15(27.5%) Disagree, for the seventh item, agree 27(67.5%) while 13(22.5%) Disagree, the eighth item records agree 26(65%) while 14(35%) Disagree.To this effect, 201 (65.3 %) respondents were of the opinion that there is the presence of physical and sexual abuse and this threaten their safetyas appose to a total of 107 (37.4%) respondents who disagreed. It could be seen that the presence of physical and sexual has an effect on personality development of these children. The responses had a total average mean of 2.4. which is below the expected average mean of 2.5. This indicates that more of them disagreed rather than agree.

From the findings above, the unavailability of heath service is a major problem for these children, most of them are not satisfied with their health and cannot have easy access to health care service even due there is a health unit and health personnel's available at the units.

Research question five: What are the effects of solitary confinement on the development of a stable personality by child prisoners?

Table 9: solitary confinement

Opinion	Agree		Disagree				
Concept	N	%	N	%	Statistical sum	Mean	Std
Freedom of movement	6	15	33	82.5	66	1.69	.745
Isolation	27	67.5	12	30	121	3.10	1.568
Visitation in isolation	13	32.5	25	62.5	86	2.26	1.226
Death or self-harm in isolation	21	52.5	19	47.5	104	2.60	1.528
Use of restrains	24	60	12	30	106	2.94	1.311
Total	91	47.4	101	52.6	483	Av mean= 2.5	Av STD = 1.06

Table above shows results for research question four, 6 (15%) Responded Agree to item one while 33(82.5%) disagree and 1 with 2.5% did not respond to the item. The second item records 27(67.5%) agree while 12(30%) disagree and 1 with 2.5% did not respond to the item. The third item registered 13(32.5%) for agree, while 25(62.5%) disagree and 2 with 5% did not respond to the item. For the fourth item, 21 with a percentage of 52.5% answered agree, while 19(47.5%) disagreed. for the fifth, 24(60%) agreed, and 12 with a percentage of 30% disagreed, and 4 with 10% did not respond to the item

To this effect, 91 (47.4 %) responses were of the opinion that there is the presence of solitary confinement and this threaten their safety, as appose to a total of 101 responses (52.6%) respondents who disagreed with a total of 8 missing response and a percentage of 20. It could be seen that the presence of solitary has a lower effect on personality development of these children. The responses had a total average mean of 2.5. A 2.5 means equal to the expected average mean of 2.5.

The findings above show that the use of solitary confinement and restrain is present and there was a 2.5 mean indicating it is been used as a means of punishment and to that extend people have died and others have mutilated them self as a result of being placed in isolation away from the rest of the other prisoners.

Table 10: Thematic-analyses depicting or describing reasons why people are placed in isolation

Code	Code description	Grounding (Numbering)	Quotation
Stealing	People are placed in isolations when they steal the belonging of others	16	'Here in prison if you fight, or abuse a warden or attempt to run you can be locked up in salting cell' 'Theft in prison, debt, fighting, sexual harassment or activities, possession of illegals, phones etc.'
homosexuality	When caught practising homosexuality	14	'Homosexual abuse of one another, trafficking of foreign drugs, and masturbation'
Fighting	Fighting amongst inmates	18	'fighting can put someone in the salting cell (BLOCK C)'
Having a cell phone	When you have cell phone	3	'When someone has a phone and it is seen during cell search they seize the phone and lock him in the salting cell' 'such as smoking, fighting and even those who have telephones to communicate'
attempt to run	Trying to escape from prison	7	
Caught in the female ward door	Looking at the female prisoners	4	'Looking at the female prisoners'
Smoking	Smoking	12	'Here if your caught smoking cigarette or marijuana' 'such as smoking, fighting and even those who have telephones to communicate'

The tables for reasons why people get put into solitary confinement was derived from the open ended questions, this was done in other to determine the kin of crimes that can cause a person to be placed in the isolation unit also known as the salting cell by the prisoners in Buea and block C in Kumba. From the information gotten, 16 respondents said stealing from another inmate could be punished by solitary confinement, while 14 indicated tht homosexuality also could earn you a place in the solitary unit, 18 of the said fighting, 3 of the indicated that possession of a cell phone was crime punishable by isolation, again it was also observed that if an inmate tried to escape from prison and was caught he would be placed in solitary confinement and this was supported by 7 respondents, again another aspects indicated is if caught in the female ward and was supported by 4 respondents and finally smoking in the prison is prohibited be it cigarettes or marijuana, if an inmate was caught smoking he was placed in isolation and this was supported by 12 inmate.

Research question six: What are the effects of social support on the development of a stable personality of child prisoners?

Table 11: social support

OPINION	AGREE		DISAGREE				
CONCEPT	N	%	N	%	STATISTICAL SUM	MEAN	STD
Family support	11	27.5	28	70	73	1.83	1.056
Friends support	28	70	12	30	119	2.98	1.143
Personal relationship	19	47.5	31	52.5	99	2.48	1.086
Provide support	15	37.5	25	62.5	89	2.23	1.143
Effects of family Visits	12	30	26	65	78	2.05	1.012
Inter inmate counselling	16	40	24	60	90	2.25	1.056
Social welfare	21	52.5	19	47.5	79	2.45	1.083
Recreational facilities	27	67.5	13	32.5	111	2.78	1.050
Comfort	30	75	10	25	110	2.98	.947
Development of self	32	80	7	17.5	119	3.05	.972
Rehabilitation	11	27.5	29	72.5	87	2.17	.984
Provision of information	28	70	12	30	116	2.90	1.105
Leisure activities	17	42.5	23	57.5	94	2.35	1.189
Relaxation and recreation	24	60	14	35	105	2.76	1.149
Spending free time	13	32.5	27	67.5	88	2.20	1.018
Total	293	49.4	300	50.6	1457	Av mean=2.5	Av STD= 1.07

Table above shows results for research question four, 11(27.5%) Responded Agree to item one while 28(70%) disagree and 1 with 2.5% did not respond to the item. The second item records 28(70%) agree while 12(30%). The third item registered 19(47.5%) for agree, while 31(52.5%) disagree. For the fourth item, 15 with a percentage of 37.5% answered agree, while 25(62.5%) disagreed. for the fifth, 24(60%) agreed, and 12 with a percentage of 30% disagreed, and 4 with 10% did not respond to the item.

The sixth item records 12(30%) agree while 26(65%) disagreed, 2 responses were missing with a percentage of 5%. The seventh item registered 16(40%) for agree, while 24(60%) disagree. For the eighth item, 21 with a percentage of 52.5% answered agree, while 19(47.5%) disagreed. for the ninth, 27(67.5%) agreed, and 13 with a percentage of 32.5% disagreed. The tenth item records 30(75%) agree while 10(25%), the eleventh item registered 32(80%) for agree, while 7(17.5%) disagree, 1 respondent did not respond with a percentage of 2.5. For the twelfth item, 11 with a percentage of 27.5% answered agree, while 27(72.5%) disagreed. for the sixteenth, 28(70%) agreed, and 12 with a percentage of 30% disagreed

To this effect, 293 (49.4%) responses were of the opinion that there is the presence of social support has an effect, as appose to a total of 300 responses 50.6% respondents who disagreed with a total of 10 missing response and a percentage of 25. It could be seen that the presence of solitary has a lower effect on personality development of these children. The responses had a total average mean of 2.5. A 2.5 means is below the expected average mean of 2.5.

From the above findings, it can be seen that there is a limitation in the provision of social welfare aids to the children, a limitation in the provision of rehabilitative and recreational platforms and as a result the prison is not providing to these children the reasons for which they were sent to prison.

Table 12: Aspects of personality

Opinion	Agree		Disagree				
Concept	N	%	N	%	Statistical sum	Mean	Std
Satisfied with self	17	42.5	23	57.5	92	1.80	1.137
Attention at home	9	22.5	31	77.5	72	2.55	.911
Happiness at home	21	52.5	17	42.5	97	2.85	1.058
Relationship with parents	28	70	12	30	114	2.45	1.027
Comparing self to other	20	50	20	50	98	2.42	1.085
Self-isolations	18	45	22	55	97	2.03	1.107

Influence over peers	14	35	26	65	81	2.65	1.050
Confident of self	27	67.5	13	32.5	106	2.18	1.001
Popularity amongst peers	29	72.5	10	25	87	3.00	1010
Life difficulties	14	35	26	75	117	2.05	.973
Concept of self	31	77.5	9	22.5	82	3.08	1.037
Happy with self	34	85	6	15	123	3.38	.797
Worries	30	65	10	35	135	2.97	.807
Confused	18	45	21	52.5	119	2.26	1.019
Contented with self	29	72.5	11	27.5	88	3.00	1.038
feel satisfied	34	85	6	15	120	3.13	.911
feel uncomfortable	25	62.5	15	37.5	125	2.80	1.018
feel self-confident	22	55	16	40	112	2.71	1.063
Total	420	58.8	294	41.2	1865	Av mean=2.8	Av STD= 0.95

Table above shows results for research question four, 17(42.5%) Responded Agree to item one while 23(57.5%) disagree to the item. The second item records 9(22.5%) agree while 31(77.5%). The third item registered 21(52.5%) for agree, while 17(42.5%) disagree, with 3 missing items giving a percentage of 7.5. For the fourth item, 28(70%) answered agree, while 12(30%) disagreed. for the fifth, 20(50%) agreed, and 20 with a percentage of 50% disagreed,

The sixth item records 18(45%) agree while 22(55%) disagreed. The seventh item registered 14(35%) for agree, while 26(65%) disagree. For the eighth item, 27 with a percentage of 67.5% answered agree, while 13(32.5%) disagreed. for the ninth, 29(72.5%) agreed, and 10 with a percentage of 25% disagreed one response was considered a missing value with a percentage of 2.5.

The tenth item records 14(35%) agree while 26(75%) the eleventh item registered 31(77.5%)for agree, while 9(22.5%). For the twelfth item, 34 with a percentage of 85% answered agree, while 6(15%) disagreed. for the sixteenth, 30(65%) agreed, and 10 with a percentage of 35% disagreed. The next item records 18(45%) agree while 21(52.5%) disagreed with 1 missing value with a percentage of 2.5, the next item registered 29(72.5%) for agree, while 11(27.5%) disagree, For the next item, 34 with a percentage of 85% answered agree, while 6 (15%) disagreed. The next item records 25(62.5%) agree while 15(37.5%) disagreed. The next item registered 22(55%) while 16(40%) disagreed 2 response was considered as missing value with a percentage of 5%.

To this effect, 420 (58.8%) responses agreed to the items showing deficit in self-esteem and presence of anxiety, as appose to a total of 294 responses with a percentage of 41.2% respondents who disagreed, with a total of 7 missing response and a percentage of 17.5

Table 13: Thematic-analyses depicting or describing feelings and thought in prison

Code	Code description	Grounding (Numbering)	Quotation
Angry	When he is alone and feel bad he gets angry	3	'I feel terribly angry and avoid everyone here and if they come near me I can get aggressive' 'I feel sad and agree, I feel like the whole wide world is against me and I think God has forgotten me'
Introspect	Think about himself	1	' I think about my family and education'
Self-harm	He feels bad and wants to hurt him self	2	'well I feel very bad and sometimes want to kill myself' 'I just think of dying or killing myself' ' I think about how I could run away from the prison'
Pray	Pray hoping for a day they return home	6	'I pray, thing of being released and going back home'
Feel sad	Feel sad and very bad about themselves	5	'I feel very bad and at times I feel like to run away from this prison or doing something stupid' 'when i face difficulties I always thing about home because when I was home I was a free boy and had my freedom'
Regret	Feel terrible about them self	4	'I feel bad and tell myself never to steal again in my life' 'regret my actions and pray never to come here again' 'I think about my mother's condition
Wishing parents were alive	He wishes parents were alive because if they were life would have been far better	1	'I think about my parents were alive, wishing she was alive things would have been better'

The table above tried to understand what the children did when they had difficulties, to try to understand if they had tendencies of self-harm or some other unacceptable thoughts that could lead to harm to them self or those around them and

from the results, 3 of them said the get angry and will be violent if they were disturbed by someone else, 1 of them said he sits and think about his family and his future, 2 of them mentioned that they feel terrible and mentioned this ' I feel very bad and at times I feel like to take a run or doing something stupid' this indicated aspects of self-harm and suicidal thoughts, 6 of them said they sit and prey, 5 indicated that they just see sad and want to run away from the prison which also indicated risky behaviour, 4 of them sit and regret committing the crime while 1 said he start wishing his parents were alive and I quote 'I think about my parents were alive, wishing she was alive things would have been better'

Summary of findings

The children who responded to the questionnaires were drawn from two prison, that is Buea central prison and the Kumba provincial prison they were a total of 40 and thy ranged from the ages of 15-18 all male. Out of the 40 children, 11 of them had been sentenced serving jail terms of between 6 months and 7 years.

From all the antisocial behaviours recorded as reasons for incarceration, theft recorded the highest with about 25, drugs recorded 4, murder 4, rape 3, aggression 2, counterfeit 1 and kidnapping 1. From that it could deduced that theft is the crime that is most common amongst this kids. In respect to the question seeking to understand if the crime was committed individually or with others there were four categories which include; 17 for alone, 6 for denial, 11 with friends and 1 with brother.

From research question two we observed that 51.5 disagreed to the being satisfied with their leaving conditions while 48.5 agreed. Disagreeing to this items which were structured in a positive sense show that they are not comfortable nor satisfied with their sleeping space, food, sleeping or ability to perform their daily activities and this indicates that this affects the building of a stable personality.

The findings of research question three indicated that 58.3 percent of them disagreed to the statements while 41.7 agreed to the items. Disagreeing to the aspects of health care services conditions under investigation indicates that there are negative effects coming from this services with in-turns affects the personality development as a result of limited hearth services provisions.

According to the responses gotten from research question four, there is the existence of physical and sexual abuse in prison and this affects the safety feeling of these children and cause them to leave in fear of punishment and assault from others, and those this fear and lack of a feeling of security can greatly influence the development of a stable personality.

The responses for aspects of solitary confinement indicated that its being use as a means of punishments for crimes committed in prison. Such crimes include theft, homosexual activities, fighting, attempting to escape amongst others. And from the findings it can be seen that some individuals have hurt them-selves in isolation and some have even died in isolation.

The findings relating to the dependent variable indicated more of agree than disagree and this means that most of them are having personality issues caused by aspects of prison conditions. The items were designed to find the presence of certain aspects of the prison and the children agreeing to them indicated a presence of personality problems.

DISCUSSIONS
Introduction

This chapter discusses and critically examines the findings of this study in relation to existing literature. The aim is to situate the findings of the study in the mainstream literature of prison conditions and development of a stable identity by child prisoners. The findings are organized and discussed by research questions. The chapter ends with contributions to research, conclusions, recommendations, suggestions for further research and limitation of study.

Anti-social behaviours that carry children to prison

The findings from this study indicated that there were six major anti-social behaviours that take children to prison. These anti-social behaviours included; theft, drugs, rape, murder, aggression, counterfeiting and kidnapping. And from the findings we observed that theft was the most prominent. Secondly it was observed that these children committed their crime either alone, with friends and or with a sibling and also a group of them said they were not guilty. The findings go in line with Reid, John, et al, (2002) who said that Companions and peers are influential in the development of antisocial behaviours. Some studies of boys with antisocial behaviours have found that companions are mutually reinforcing with their talk of rule breaking in ways that predict later delinquency and substance abuse (Reid, John, et al, 2002).

Bostock (1987) links shoplifting and binge-eating to the anti-social tendency and stresses that it is compulsive and can occur at all ages. It is linked to deprivation and characterized by stealing or destructiveness. Within the random sample, 310 girls were surveyed with 58 (18 percent) of them admitting to have engaged in theft from shops. Of 287 boys surveyed, 120 (41 per cent) of them admitted to having engaged in theft from shops It is possible that the social role in which girls continue to be cast, added to temperamental differences, inclines them to tolerate hardship far better than boys. They may make internal psychological adjustments to make life tolerable rather than to select and alter their external environment. Parental attitudes appear to subject boys to more authoritarian treatment than the girls and much less to firm discipline. This leads boys to reject parental control and participate in antisocial behaviour. The parental view that girls are more likely to come to harm when allowed out alone allows them less opportunity to commit crimes.

According to the williamgladden foundation Statistics in 2005, people under age 20 commit the majority of reported thefts. The highest overall crime rates are among those people between the ages of 17 and 21. Juveniles under age 18 are responsible for about 35% of all larcenies, including theft, purse snatching and pocket picking. Juveniles also commit over 25% of all robberies. Juvenile theft is a common form of delinquent behaviour that most children participate in at least once. For the majority of juveniles, theft is merely an isolated incident. For a smaller population of juveniles,

theft is a part of "fitting in" with a peer group, and will be "outgrown" by young adulthood. For a very small percentage of these delinquent youth, theft is a central part of a developing criminal lifestyle, and they may continue to steal or commit other illegal activities as adults.

According to a study by Sharma & Marimuthu (2014) society has seen an increase in the incidents of aggression/violence among youth. It includes behaviours such as slapping, hitting, rape, recklessness, driving and shooting in school, truancy, road rage and other high-risk behaviours. Nearly 18.6% of females aged 12-17 got into a serious fight at school or work. 14.1% participated in a group-against-group fight and 5.7% attacked another person with an intent to seriously harm him/her.

On the other hand, The National Household Survey on Drug Abuse (Gfroerer, 1996) shows an overall decline in the average age of first use of alcohol, from 17.2 years in 1975 to 15.9 years in 1993; daily cigarette use, from 18.6 years in 1975 to 16.8 years in 1994; and, especially, marijuana use, from 18.9 years in 1975 to 16.3 years in 1994. Substance abuse and delinquency often share the common factors of school and family problems, negative peer groups, lack of neighbourhood social controls, and a history of physical or sexual abuse (Hawkins et al., 1987; Wilson and Howell, 1993). Substance abuse is also associated with violent and income-generating crime by youth, which increases community residents' level of fear and the demand for juvenile and criminal justice services, thereby further increasing the burden on these resources. Gangs, drug trafficking, prostitution, and youth homicides are other related social and criminal justice problems often linked to adolescent substance abuse. Substance abuse and delinquency often share the common factors of school and family problems, negative peer groups, lack of neighbourhood social controls, and a history of physical or sexual abuse (Hawkins et al., 1987; Wilson and Howell, 1993). Substance abuse is also associated with violent and income-generating crime by youth, which increases community residents' level of fear and the demand for juvenile and criminal justice services, thereby further increasing the burden on these resources. Gangs, drug trafficking, prostitution, and youth homicides are other related social and criminal justice problems often linked to adolescent substance abuse.

The findings correspond with the views of Bronfenbrenner (1979) who said the micro system's setting is the direct environment we have in our lives. Family, friends, classmates, teachers, neighbours and other people who have a direct contact with us are included in our micro system. The micro system is the setting in which we have direct social interactions with these social agents. Again he said The family is the first school of every child life. As stated by Bronfenbrenner (1979) your family experience may be related to your life experience.

Finally, the findings also reflect the theoretical position **of** Vygotsky, (1978), who said children potentially develop through problem solving under adult's guidance or collaboration with more knowledgeable peers. As such a child moves from a lower level of reasoning, to a higher one through clues, modelling, explanations, discussions, joint participation etc. for this to occur, there must be a socio

cultural milieu within which the learner or individual child operates or interact.

Overcrowded prisons and the formation of stable identity

In order to determine whether overcrowded conditions of the prison affect the identity development of child prisoners, the findings show a strong relationship between the two aspects and the presence of all the indicators tested. The findings indicated that there is limited sleeping space, the children were not satisfied with their sleep, limited food supplies, most of them had fought for food or water, they had limited resources which limited them in their daily activities and needs. And by implication there are social effects which may include; a strain on social relations within the individual, home and community, leads to serious health and social ramifications for children, affects access to social and economic resources and psychological effects which may include; lack of privacy is linked to depression, leads to psychological frustrations which, in turn, has a bearing on behavioural responses and residents' ability to cope with the leaving conditions. (Fuller,1993; 1996). Various studies have considered whether violence is produced by the cognitive confusion and tension induced by density factors and crowded conditions in prisons. The latest research, comprehensively reviewed in Gaes (1994), highlights the inconsistency of existing data on crowding and therefore the difficulty of generalisation (see also Tartaro, 2002). The most likely conclusion is that over-crowding is not a causal factor in violence, but may possibly be considered a contributing factor, when correlated with other institutional variables, such as the managerial methods used to control or limit violence (Gaes, 1994; Ruback&Carr, 1993; Wortley, 2002).

The relationship between overcrowded prison conditions and identity development are related to the findings of PRI in 2014, the findings indicated that Prison overcrowding is one of the key contributing factors to poor prison conditions around the world. It is also arguably the biggest single problem facing prison systems and its consequences can at worst be life-threatening at best prevent prisons from fulfilling their proper function of rehabilitating and re-educating prisoners. Again it supports the reports in the stipulation about competition among prisoners for limited resources which also results in violence, aggression and frustration. The next negative effect caused by overcrowding on prisoners is behavioural problems. That's why we had high rate of prisoners indicating that they had fought for food or water. Crowded prison setting can increase stress, fear and tensions in prisoners. Prisoners find it difficult to cope with stress. This makes them depressed and aggressive. Overcrowding will negatively influence the interaction and social relations of the prisoners. Crowded environment results in social withdrawal, competition of resources and less cooperation among the prisoners leading to strains in social relationship, (PRI 2014)

These findings also support those of Calhoun (1962) who described 'behavioural sink', as a pathological response to overcrowding in rats. Co et al. (1984) studied prison populations and compared their findings to Calhoun (1996) and found out that as density increased so did disciplinary problems and death rates amongst prisoners. Baron and Ransberger (1978) found out that when prison cells becomes very hot, people become lethargic (deficient in

alertness or activities). Glass et al. (1969) found that unpredictable noise has a 'psychic' cost because it required attention, whereas constant noise can be 'tuned out'. Noise led to frustration, Prolonged exposure to noise can cause many health problems and lead to behavioural issues, ranging from single-episode or minimal occurrence to serious health risks leading to death. Health concerns include: Annoyance, Sleep disturbance, Fatigue, Hearing impairment and loss Immune deficiency, Hypertension, Heart disease, High blood pressure, Elevated cortisol and adrenaline, Headaches and Vertigo. The same can be applied there for it is evident that overcrowded prisons have constant noise at almost all time and this can have negative effects on these children.

The hierarchy of needs proposed by Maslow (1943), contributes to this study in that, the availability of food, water and safety are the higher needs of this children in prison. Therefore, safety needs and physiological needs like food, water, friendship, family should be provided for these children in other to give them a chance of normal development both physically, mentally and in respect to building a stable identity. In other to reduce stress, Peers, families and guards should thus, have love for this children so that they can feel their physiological needs and achieve a sense of balance and reduce the level of stress but the findings show that there is are limitations in the provisions of the above needs which in turns poses a problem for the children's development.

Theoretically the availability of basic provisions can be linked to Bronfenbrenner in1979who stipulates that the micro system's setting is the direct environment we have in our lives. The theory states that we are not mere recipients of the experiences we have when socializing with these people in the micro system environment, but we are contributing to the construction of such environment. This means that through these interactions, child prisoners are being given some sort of support by their close ones since they can share ideas and be guide on what to do in cases of worries. If this support is not provided in the micro system, they interfere with the functioning in and with the other systems. Therefore, a weak support system might influence the relation of child prisons and the other prisoners and even the guards in such a way that the child will always want to keep to him or herself.

Empirically, this study of Gove & Hughes in 1983, analysed the determinants and effects of overcrowding, conclude that the number of rooms available per person plays a critical role in determining the nature of interactions with each other, and that can also lead to poor mental and physical health. Therefore, the presence of limited spacefor these children in prison limit interaction and can lead to poor mental and physical health which may in-turn affect their identity formation

Other empirical evidence was found in studies carried out by Baum &Koman in 1976 on psychological effects of social and spatial density on peoples, and the study revealed that people living in high social dense environments were more likely to become socially withdrawn, while responses to spatial density would be include aggressive behaviour (Baum & Koman,1976). In respect to this it can be said that

the reason for prison violence and also physical abuse can be as a result of the overcrowded nature of the prison. Like one of the participant in my study indicated "I feel terribly angry and avoid everyone here and if they come near me I can get aggressive" this indicates that there is the aspect of social withdrawal and which leads to aggressive behaviour as a result of overcrowding.

Avshalom in 1994 indicated that adolescents who are prone to violence typically respond to frustrating events or situations with strong negative emotions. They often feel stressed, anxious and irritable in the face of adverse social conditions. Psychological testing also suggests that anti-social behaviours-prone youth are also impulsive, paranoid, aggressive, hostile, and quick to take action against perceived threats. In respect to this if these children show tendencies of violence, aggressive behaviour, hostile and feel paranoid as a result of their adverse conditions it affects their personality in that it can lead to personality disorder such as Paranoid personality disorder (PPD).

Health service conditions of the prison and the formation of stable identity

In order to determine how the provision of health care in prison affects the identity development of child prisoners, the findings confirmed a strong relationship between the two aspects and the aspects tested revealed dissatisfaction in most of the indicators tested which included Presence of health personnel, Provision of medical attention, Bodily appearance, Satisfaction to health care, Access to health care, Satisfied with health. This implied that there is the presence of health personnel, possible provision of medical attention, not satisfied bodily appearance, no satisfaction with health care, limited access to health care and not satisfied with their health. By implication there are health personnel's and a health care unit but there is a limited level of health services provided either because of lack of resources to cover the multitude of them or constant risk of reinfections within the cell.

The increase in physical contact, the lack of ventilation and light, as well as a shortage of time spent outdoors favours disease propagation, essentially infectious and parasitic diseases. For example, it has been observed that the prevalence of respiratory symptoms that long over three weeks as well as pulmonary tuberculosis symptoms are 39 and 35 times more frequent, respectively, in overcrowded prisons than in the general population (Vieira, Ribeiro, Siqueira, Galesi , dos Santos , Golub, 2010). Hussein, Akthar Nanan (2003) also found that the risk to develop a latent tuberculosis infection was almost three times higher among inmates who were housed in barracks of under 60m 2 of area.

Maslow (1943) stipulated that within every individual, there exists a hierarchy of five needs and that each level of need must be satisfied before an individual pursues the next higher level of need. There for if an individual does not have adequate health provision when required he cannot pursue his other needs. The same can be applied to this study because the non-availability of health care services when required can lead to death, other even more complex and permanent situation. And distortion of identity can also be linked to health issues.

Again Maslow's hierarchy, refers to the need. When we have our physiological needs for food and water met, our safety needs dominate our behaviour. These needs have to do with our natural desire for a predictable, orderly world that is somewhat within our control. Safety needs in today's world can manifest themselves as job security, savings accounts, insurance policies, financial security, and health and well-being (Maslow,1967).

The importance of health care service in this study can be backed by the findings in the report provided by PRI in 2014indicated that prisons can be a breeding ground for HIV/AIDS, tuberculosis (TB) and other infectious diseases. The incidence of TB, which thrives in cramped, overcrowded conditions, can be 10-100 times higher in prisons than among the general population. Studies have shown that in most countries in Europe and in Central Asia, rates of HIV infection are much higher in prisons than outside, because of, for example, high rates of drug dependency and dangerous practices such as needle sharing. The report by the human is right Buea in 2013 also indicate that there was close to 109 cases of HIV, 29 cases of hydro cells and about 249 cases of extensive skin rash. This indicate that these children are exposed to possibilities of contaminations which is of negative effects to them. Though the findings of this study cannot show how this relates or affects the identity development of these children but it goes a long way too indicate that prison is not a safe place for them to grow up in.

Again the basic essentials for public health are proper housing, adequate nutrition, and a clean, sufficient water supply. Because these factors are the primary determinants of a population's health status, they have priority over all others, including adequate medical care (Bellisari,1994). Even due it contradicts the empirical consensus on the most negative effects of incarceration is that most people who have done time in the best-run prisons return to the free world with little or no permanent, clinically-diagnosable psychological disorders as a result (Haney, 1997).

To add, the findings of this study acts as proof on empirical evidence that supports the existence of a variety of health problems, injuries, and selected symptoms of psychological distress are higher for certain classes of prisoners than probationers, parolees, and data existed for the general population"; that studies show long-term incarceration to result in "increases in hostility and social introversion and decreases in self-evaluation and evaluations of work (Bonta, & Gendreau,1990).

Prior to rise of HIV and other life threatening infectious diseases like hepatitis C, physical deterioration in prisons was not definitively established in the social-scientific literature. Bonta & Gendreau (1990) argue that this is in part due to the widespread availability of medical services within correctional institutions. In general, prison food is adequate and prisoners often eat a healthier variety of foods than they would on the "outside."

Poudat et al have documented a lower prevalence of scabies and other parasitoses in penitentiary modules in which inmates were housed alone (Poudat&Nasirian, 2007). As to skin diseases, both infectious and non-infectious, were too more frequent in overcrwded barracks (Kuruvila, Shaikh, &

Kumar,2002). Although it is a more controversial aspect, it has been suggested that overpopulation could be an indicator in reference to sexually transmitted diseases, such as syphilis and HIV or B hepatitis, since it favours risk-taking behaviours among inmates (Todrys, Amon, Malembeka , Clayton,2011).The findings go a long way to support literature and empirical findings from different countries and depict their disadvantages to the prison population even though the findings cannot be related to identity development of this children.

Physical and sexual abuse and the formation of stable identities
The findings from these research question indicated that there is the presence of physical and sexual abuse practices in the prisons. And the presence of these aspects affect the children in so many ways, this was confirmed through the use of indicators such as the presence of safety and security, satisfaction with safety and security, fear of punishment, presence of gangs for protection, presence of sexual abuse, physical abuse, forced to do things and presence of constant fear of the gangs created by others or they themselves wanting to join such gangs for protection. At the same time indicating that they may leave in constant fear of the bigger prisoners, they can be exploited and threatened and forced to bend over backwards to do things they do not want because of fear.As one experienced prison administrator once wrote: "Prison is a barely controlled jungle where the aggressive and the strong will exploit the weak, and the weak are dreadfully aware of it (Keve,1974).

The findings of this study goes to support empirical findings presents by Wolff& Shi (2010) who said an approximately 2,200 physical and 200 sexual victimizations are reported by a random sample of 6,964 male inmates. Physical injury occurred in 40% of physical assaults and 70% of sexual assaults between inmates and in 50% of assaults perpetrated by staff. Emotional reactions to assaults were experienced by virtually all victims. Wolff and Shi (2008) explored the types of sexual victimization experienced by approximately 500 male inmates over a 6-month period. In this study, although sexual victimization rarely occurred, when it did, it was more likely to involve abusive sexual contacts (i.e., intentional touching of sexually specific areas of the body) than non-consensual sex acts (i.e., sexual assault or rape). However, incidents of inappropriate touching were reported less frequently (28%) to authorities than incidents involving non-consensual sex acts (37% to 50%).

According to Skinner (1954) Punishment is a situation where an unpleasant or an adverse event or painful stimulus is added to the environment after a certain behaviour occurs, decreasing the likelihood that the behaviour will occur again. With punishment, target behaviour is weakened by presenting an aversive or unpleasant stimulus after the behaviour occurs. Punishment involves decreasing or suppressing or eliminating behaviour. When behaviour is accompanied by punishment, it is less likely to occur. The use of such punishment is criticized as mentioned by Hockenbury &Hockenbury in 2010 Who say the type of punishment most people are familiar with is positive punishment, Positive punishment is easier for people to identify because it is common in society. It is usually called "punishment" or "punishment by application". To further

this assertion, Survivors of abuse often experience conflictual relationships and chaotic lifestyles, frequently report difficulties forming adult intimate attachments and display behaviours that threaten and disrupt close relationships (Henderson, 2006).

In addition, McCorkle (1992) found out that because many prisons are clearly dangerous places from which there is no exit or escape, prisoners learn quickly to become hyper vigilant and ever-alert for signs of threat or personal risk. Because the stakes are high, and because there are people in their immediate environment poised to take advantage of weakness or exploit carelessness or inattention, interpersonal distrust and suspicion often result. Some prisoners learn to project a tough convict veneer that keeps all others at a distance. Indeed, as one prison researcher put it, many prisoners "believe that unless a prisoner can convincingly project an image that conveys the potential for violence, he is likely to be dominated and exploited throughout the duration of his sentence (McCorkle, 1992). This definitely shows that the findings of this study cannot be denied because they show the presence of violence against the weak, exploitation and fear of their safety. If we make use of this aspects found and compare them to previous literatures and findings like those of McCorkle, (1992) we can safely say that these children are liable to suffer from identity disorders such as; Anxious (avoidant)personality disorder characterised by feelings of tension and apprehension, insecurity and inferiority, Dissocial personality disorder (DPP) which maybe portrayed by those carrying out the violent act which in its self is characterised by tendency to act outside social norms, a disregard for the feelings of others and an inability to modify behaviour in response to adverse events and Paranoid personality disorder (PPD) the victims of exploitation may display pervasive distrust and suspicion

Empirically, the findings of this study go a long way to fortell the consequences that wait these children as stated by Draper, Henderson&Walker in 2007 who found out that children who suffer from physical and sexual abuse suffer from relationships problems in later life. These is as a result of mistrust and paranoid tendencies, isolation or social disconnection causing fear and withdrawal and fear of interaction as a result of precious negative experiences and they can also be prone to behavioural health effects which is associated with suicidal behaviour, increased likelihood of smoking, substance abuse, and physical inactivity.

Over two decades of research have demonstrated potential negative impact of child abuse and neglect on mental health including: depression, anxiety disorders, poor self-esteem, aggressive behaviour, suicide attempts, eating disorders, use of illicit drugs, alcohol abuse, post-traumatic stress, dissociation, sexual difficulties and self-harming behaviours (Draper et al, 2007). Again Sykes in (1966), Said that this loss of security arouses acute anxiety, not just because violent acts of aggression and exploitation can take place, but also because such behaviour constantly calls into question the individual's ability to cope in prison and hinder their abilities to live normally in the outside world.

Physical victimization is categorized as personal (e.g., assault) or property (e.g., theft; (Wooldredge, 1994,1998). Compared to personal victimization, rates of property

victimization are higher (Wooldredge, 1998). More recently, Wolff and Shi (2009) delineated 7 specific types of physical victimization. The most common types experienced by male inmates in this study were theft (24.3%), being threatened or harmed with knife or shank (12.4%), and being slapped, hit, kicked, or bit (10.2%). Physical victimization was infrequently reported by inmates to the authorities, although reports increased if the perpetrator was a staff person or if the incident involved being beat up. The majority of these victims reported experiencing 1 or 2 types of physical victimization perpetrated by other inmates over a 6-month period, most commonly theft, harmed with shank, and slapped, kicked, or hit

Physical and sexual victimization have psychological consequences as first reported by Carroll (1974) and Toch (1977). More contemporary research amplifies these earlier findings. The multidimensional impact of prison-based sexual assault on physical, emotional, and psychological well-being is summarized by Knowles (1999). This was also explored by Struckman-Johnson and colleagues (Struckman-Johnson et al. 1996;Struckman-Johnson &Struckman-Johnson, 2006), whose study confirmed the negative effects of rape identified by Knowles. Particularly, immediately following a severe incident, victims were highly distressed and most experienced negative feelings, specifically distrust of others, social nervousness, and depression. Wolff and Shi (2008) report that inmates experiencing sexual victimization also were more likely to report feeling mostly or very unsafe across a variety of potentially harmful situations and prison areas. The percentage of male inmates reporting feeling unsafe increased if they were sexually victimized by staff and/or experienced concurrent physical victimization (by other inmates or staff). Similarly, inmates who experienced physical victimization also reported feeling less safe from various types of harm and in assorted areas of the prison during the 6 months, compared to their counterparts who did not report victimization. Those feeling the least safe in prison were male inmates who reported being physically victimized by other inmates and staff (Wolff & Shi, 2008).

From the above it can be seen that the presence of physical and sexual abuse will greatly affect the formation of a stable personality by these children because they may exhibit and wittiness the effects of this acts which are prone to lead to personality disorders such as;

Anxious (avoidant) personality disorder characterised by feelings of tension and apprehension, insecurity and inferiority, Dissocial personality disorder (DPP) characterised by the tendency to act outside social norms, a disregard for the feelings of others and an inability to modify behaviour in response to adverse events (eg, punishment). A low threshold for violence and a tendency to blame others may be features, emotionally unstable personality disorder, characterised by impulsiveness and unpredictability. They may act without appreciating the consequences. Outbursts of emotion and quarrelsome behaviour may be exhibited. Relationships tend to be unstable and there may be suicidal gestures and attempts.

In 1985, Masten & Garmezy noted that the presence of abusive and neglectful mistreatment, and other forms of victimization in childhood increases the probability that one will encounter a whole range of problems later in life,

including delinquency and criminality (Masten, & Garmezy, 1985, Lahey& A Kazdin 1985).

Solitary confinement and the formation of stable identities.
The findings of this study from the research question tested indicated that there is the use of isolation and restrains as a means of punishment and this has negative consequences. The indicators used to test this aspect were related to the children having freedom of movement, use of isolation as means of punishment, restricted visitation in isolation, people dying or harming themselves in isolation and use of restrains. And all of the above had positive feed backs depicting negative effects on them. As they are afraid to go out of their comfort zones or stay in line because of fear of isolation or being kept in chains for days. The effects of solitary confinement have been mentioned by many researchers and none of them have mentioned any positive declaration to such acts.

Studies Confirmed that inmates often experience various physiological symptoms, even after a short amount of time in confinement. Isolated inmates often report symptoms similar to those of hypertension, such as chronic headaches, trembling, sweaty palms, extreme dizziness and heart palpitations. (Smith, 2006; Haney, 2003; Shalev, 2008). Inmates also experience trouble with their eating and digestion, especially within the first three months of solitary confinement (Smith, 2006). A lack of appetite and drastic weight loss is often accompanied with irregular digestion, particularly diarrhea. Inmates in isolation may also have difficulty sleeping, and some may experience insomnia (Smith, 2006; Haney, 2003). Consequently,, inmates report feelings of chronic lethargy (Shalev, 2008).

Many of the issues that confined prisoners have during isolation are also prevalent post-isolation. Those who are isolated also exhibit maladjustment disorders and problems with aggression, both during confinement and afterwards (Briggs et al., 2003). Furthermore, inmates often have difficulty adjusting to social contact post-isolation, and may engage in increased prison misconduct and express hostility towards correctional officers. (Weir, 2012; Dingfelder, 2012; Constanzo, Martinez, Klebe, Torrence&Livengood, 2012). While cases in which inmates have exhibited positive behavioral change after isolation have been documented, such a result is rare (Smith, 2006).

The effects of solitary confinement are mentioned by Bonta & Gendreau (1990), Who stipulate that increases in psychopathological symptoms occur after 72 hours of confinement; and that death row prisoners have been found to have "symptoms ranging from paranoia to insomnia," "increased feelings of depression and hopelessness," and feeling "powerlessness, fearful of their surroundings, and emotionally drained. Which can lead to personality disorders such a Paranoid personality disorder (PPD) and dissocial personality disorder (DPP)

Again the findings of his study confirms the findings of Bonta&Gendreau(1990),who found out that there is restriction of visits for people in solitary confinement or what is refereed by the prisoners as the 'salting cell'. Contact with family or visitors is often restricted or denied altogether, despite the fact that contact with family in

particular, has been shown to be an important factor in successful rehabilitation.

Similarly, Schill and Marcus (1998), showed that prisoners exhibit a learned helplessness that is consistent with those who undergo long term institutionalization. According to Seligman in 1967, learned helplessness is a behaviour typical of an individual who has endured repeated painful or otherwise aversive stimuli which he or she was unable to avoid or escape. After such experience they often fail to learn escape or avoidance. They loss control and give up trying. And it is known that clinical depression and related mental illnesses may result from such real or perceived absence of control over the outcome of a situation. According to Abramson, Divine and Hollon (2012) learned helplessness is a key factor in depression that is caused by inescapable prejudice. Similarly, prisoners have no way too escape the punishment of isolation and they know the inescapable shock that comes with it and have no way of avoiding it when it comes so they naturally give up the hope of fighting or avoidance so they become helpless and go in knowing what the outcomes will be. In contrast, Herman (1997) refutes learned helplessness theory when exploring the topics of violence and captivity. She asserts that individuals do not learn to be helpless but rather choose to place their independent self in temporary hibernation for reasons of survival (Herman, 1997).

In addition to having disruptions in their emotional processes, inmates' cognitive processes tend to deteriorate while they are in isolation. Some confined inmates report memory loss, and a significant portion of isolated inmates report impaired concentration (Smith, 2006; Shalev, 2008). Many are unable to read or watch television since these activities are their few sources of entertainment. Confined inmates also report feeling extremely confused and disoriented in time and space (Haney, 2003; Shalev, 2008). Another confinement related psychological symptom that inmates may experience is disrupted thinking, defined as an inability to maintain a coherent flow of thoughts. This disrupted thinking can result in symptoms of psychosis (Haney, 2003; Shalev, 2008). Inmates who exhibit these symptoms of psychosis often report experiencing hallucinations, illusions, and intense paranoia, such as a persistent belief that they are being persecuted (Shalev, 2008). In extreme cases, inmates have become paranoid to the point that they exhibit full-blown psychosis that requires hospitalization (Smith, 2006).

Furthermore, and this is a critical point, punishment only trains a person what not to do. so if one punishes a behaviour in other to eliminate it, what is left to replace it? In the case of high-risk offenders, simply other antisocial skills. This is why punishment scholars state that the most effective way to produce behavioural change is not to suppress "bad" behaviour, but to shape "good" behaviour (Blackman, 1995).

Despite the frequent use of solitary confinement in prisons, there has been a continuous debate over the effectiveness of this experience on rehabilitating prisoners' behaviour (Briggs, Sundt, & Castellano, 2003). While some research defends solitary confinement as a humane practice, the majority of research suggests a wide range of psychological and physiological effects associated with solitary confinement (Haney, 2003; Shalev, 2008; Smith, 2006).

Given that approximately twenty-two percent of prisoners are already experiencing psychological symptoms upon incarceration, it is imperative to identify the effects of solitary confinement on inmates (Smith, 2006). Understanding the psychological and physical effects of solitary confinement can help policymakers determine whether solitary confinement should continue to be used in prisons (Smith, 2006). Therefore, this review of the existing literature will examine the psychological and physiological effects of solitary confinement on their wellbeing.

Social support and the formation of stable identities
Findings from this study reveals that social support has a positive effect on the child prisoners development, whereby Family support is something the children need a lot because it gives them hope and a sense of love and belonging, Personal relationship which in these case involves his relationship with other inmate means he has security and a few he can call friends, effects of family visits, inter inmate counselling, social welfare, recreational facilities, comfort, development of self, rehabilitation, provision of information, leisure activities, relaxation and recreation and spending free time are all aspects of the support he can get from family friends, and the social welfare not leaving out the recreational and rehabilitation facilitations that are to be provided the by the state. From the findings of this study these aspects are limited and dues have an adverse effect on the development of a stable personality by these children.

These goes a long way to support the stipulations of Wooldgredge (1999), who said The absence of social support shows some disadvantage among the impacted individuals. In most cases, it can predict the deterioration of physical and mental health among the victims. The initial social support given is also a determining factor in successfully overcoming life stress. The presence of social support significantly predicts the individual's ability to cope with stress. Knowing that they are valued by others is an important psychological factor in helping them to forget the negative aspects of their lives, and thinking more positively about their environment. Social support not only helps improve a person's well-being, it affects the immune system as well. Thus, it also a major factor in preventing negative symptoms such as depression and anxiety from developing.

Again, Research shows that incarcerated adults who have strong relationships with loved one's fare better in prison and pose less of a risk to public safety when they return to the community Phone calls, letter writing, and visitation with family members, and other so-called "pro-social supports," help sustain these relationships. They also help adults adjust to imprisonment and limit what has been called the "pains of incarceration" all of which has been associated with reduced behavioural infractions. (Wooldgredge, 1999).It seems likely that such findings also hold true for incarcerated youth. However, there is very limited research on whether family visitation affects incarcerated juveniles' behaviour (Wooldgredge, 1999).

Again as stated by Stice, Ragan, & Randall, (2004), For adolescents, family support is the most important element in their lives. As part of their growth experience, adolescents usually expect a lot of things from their parents. Inadequate support from the parents will likely increase the chance of getting depression among adolescents who get into

unfortunate situation with their parents. This occurs because adolescent usually become confused when they expect to get plenty of help and positive reinforcement from their parents, but it does not happen and if this happens to these children in prison there is a very high chance of personality disorders.

To support the findings in respect of social support being an influential aspect of development of a stable personality by child prisoners, we draw inspiration from the works of Stice et al, (2004), They stated that children can expect a lot from their friends, peer support can be considered as an alternate method of getting social support if the adolescents receive inadequate attention from their parents. Getting social support is very essential for adolescents to become successful and achieve a satisfactory level. Strong social support is necessary to help succeed in achieving traits of overall physical well-being (Salovey, Detweiler, Steward, & Rothman, 2000).

Empirically, many studies indicate that anyone who has high social support tends to have less chance of getting depression and anxiety disorders. In contrast, only a handful of studies show that there is no relationship between social support and lowering the blood pressure. The level of social support also has been found to be related to a lower rate of disease and early death. The familial support is a psychological enhancement to help the individual reduce their stress. These findings are somewhat weak and further studies need to be done to gather more specific information about the influence of social support on physical health (Uchino et al., 1996).

Psychological implications of the study
The findings of this study goes a long way to bring out some of the negative implication of putting young children in prison and showing that these negative implications can have lifelong effects on the children.

Firstly, the process of imprisoning children is an aspect that is inevitable in country because the laws of the country permit. To this extend its only important for psychologist and researchers to take an interest in this and carry out more research to help support this countries laws and or bring out the negative implications so as to be an eye-opener to the law makes about the ills of imprisoning children giving them evidence on the psychological, physical and emotional effects to these children.

Secondly, because it's been proven that prison can be a breeding ground for anti-social behaviours and can act as anti-social behaviours school, it is essential for school counsellors and re-education program in the schools to be taken serious and made more effective so as to be able to handle the issues of antisocial behaviours amongst children in the school and home levels before they escalade to the point of imprisonment. These can be done by using social skills training program to help modify the behaviours of children exhibiting antisocial tendencies.

Again the aspects of overcrowding in prison is as a result of increase in anti-social behaviours rate and also limited means to provide space and resources to handle all the prisoners, as a result of this it will be to the best interest if psychologists could provide their services in the rehabilitation centre, so as to use their expertise in the

rehabilitation and re-educational process of this children identified to be showing signs off antisocial behaviour. Overcrowding poses serious direct and indirect health risks to all segments of the population, particularly the elderly, young children, overcrowding results in insufficient ventilation, causing or exacerbating respiratory illness; it places a strain on social relations within the home and community; lack of privacy is linked to depression and other negative psychological outcomes.

Furthermore, it will be of the best interest of every one if psychologies could institute different testing programs to help identify these problems at the tender stage so as to help prevent them. Psychological testing will help determine the possibilities of problem behaviour, possibility personality traits and problems, help identify children going through stress, trauma from maybe physical and or sexual abuse. If this is identified at the school levels it can go a long way to prevent anti-social behaviours.

Again the rehabilitation process for these children in prison is limited and most of them leave prison with no knowledge of what they will be facing out of prison, and not fully prepared for integration as a result they are under prepared and there is a likelihood of them not fitting in the society. This can be as a result of dependence on the institution or inprisonalisation, which sometimes leads to recivism. The first step towards preventing this is giving these children visit privileges to their families in other to help them cope and remain connected with love ones

Again I strongly recommend that psychologies pay attentions to research on the prison and borstal institute, this is as a result of the fact that most of the material used in this study draw inspiration from western findings and personal reports and findings, there for some psychological aspects relating to the prison and the rehabilitation centre should be looked upon and made available so that we can also have founder mental and confident information of our prison system and psychological outcome of the prisoners and not always depend of the findings of different findings

Furthermore this study brings to light the fact that children are not fundamentally responsible for their indiscipline but that other parties could be blamed for this behavioural problems including the various government agencies like legislature, judiciary, some ministries, local authorities, entrepreneurs, parents, peers, political leaders, teachers and the community at large, who have all failed in carrying out their shared responsibilities towards the success of these children.

As result therefore, research in psychology particularly in Cameroon must fine tune its strategies and revise its methodology to invade antisocial behaviours in the society specifically in schools, neighbourhoods and particularly in children because if not addressed in time it can lead to an increase in anti-social behaviours rate in our country

Conclusions

This study concludes based on the findings from the field already presented above and as supported by literature that prison condition has mostly a negative effect on the personality development of child prisoners in Cameroon. As a result of that the investigator concluded that prison conditions have an effect on the development of a stable personality by child prisoners. Specifically, the study concludes that:

The findings of this study indicates that there are a lot of issues that need addressing when it comes to antisocial social behaviour amongst children, and such problems are causing our children to be placed in prison and thus facing the adverse effects of the prison conditions leading to more problems as a results of their staying in prison with other criminal adults or other children who are prone to antisocial behaviour. The earliest writings on anti-social behaviours by scholars such as Bentham, De Beaumont and de Tocqueville, Lombroso and Shaw, suggested that prisons were breeding grounds for anti-social behaviours (see Lilly, Cullen, & Ball, 1995). Jaman, Dickover, and Bennett (1972) put the matter succinctly by stating that "the prisoners who has served a longer amount of time, becoming more prisonised in the process, has had his tendencies toward criminality strengthened and is therefore more likely to recidivist than the prisoners who has served a lesser amount of time" as to effect children need to be separated from the adult prisoners and special care be placed on them for rehabilitation.

Secondly, as a result of findings, there is an effect of overcrowded prisons on the development of stable personality of child prisoner in Cameroon. There for overcrowded prison conditions influence the development of a stable personality of child prisoners in Cameroon. The findings show that our Cameroon prisons are overcrowded and this has a negative effect on the children, there for we should pay attentions on methods to use to prevent our children from going to prison rather than focus on how to make the prison comfortable by decongesting them. Schools, churches and other agencies should be reinforced and equipped with the necessary equipment's for dealing with antisocial behaviours so ass to handle the, at the primary stages before they escalade.

Again the findings show that the use of harsh punishment can lead sometimes to repetition of the unwanted behaviour and at the same time have an adverse repercussion on the child therefore we should look for better ways to handle unwanted behaviours rather than add fuel to flame. there has been a tremendous amount of research on which punishing events are the most effective in suppressing behaviour (Matson &DiLorenzo, 1984). Prison life events are not included among them. In addition, there are several absolutely crucial criteria that must always apply in order for punishment to be maximally effective (Schwartz & Robbins, 1995). Some of these are that the punishing stimuli must be immediate, as intense as possible, predictable, and the delivery of punishment serves as a signal that reinforcement is not available for the punished response. Given the nature of these strictures, it has been noted that "it is virtually impossible to meet these criteria in the real world in which offenders live unless some unbelievably efficient Orwellian environment" (Gendreau, 1996, p. 129) exists akin to a giant Skinner box. Others who have examined this issue have come to a similar conclusion (Clark, 1995; J. McGuire, 1995; Moffitt, 1983).

Thirdly the thee interactions of a child his family and friends is a very vital aspect of development, a lack of t which, does not only affect the child who is in prison but also the one at

home, we should encourage the family and friends of those who find themselves in prison to continue caring and being there for them because that alone could make the children better and give them reasons to change. Also the rehabilitation process of children in prison is a very important aspect which has been neglected by all. Studies has proven that almost all prisons in Cameroon lack a prison counsellor and psychologies to help them get through their period of incarceration and prepare them for reinsertion into the society.

The process of institutionalization is facilitated in cases in which prisoners enter institutional settings at an early age, before they have formed the ability and expectation to control their own life choices. Because there is less tension between the demands of the institution and the autonomy of a mature adult, institutionalization proceeds more quickly and less problematically with at least some younger prisoners. Moreover, younger prisoners have little in the way of already developed independent judgment, so they have little if anything to revert to or rely upon if and when the institutional structure is removed. And the longer someone remains in an institution, the greater the likelihood that the process will transform them (Haney,2001). In this sense I think it's very wrong to place children in prison because if the process of institutionalisation occurs at this tender age there is a higher chance of recivism.

Recommendations
Based on the findings of the study as already presented, the researcher recommends the following;

In order to reduce this antisocial behaviour amongst children, family, churches school and all other agencies involved in the training, and education of children should pay a lot of attention on the peers, and environment of this children so as to be able to identify and handle these behaviours before they escalade. These children either, steal, lie cheat, gamble just to get money for different activities or are influenced and exploited by others, there for it is very important close attention be payed to them.

To add, government agencies and other social agencies within the society like churches, civil society organizations and law enforcement as well as nongovernmental organizations should mount programs and forums that will make available education on the risks associated with antisocial behaviours. This should include mechanisms to overcome them within the neighbourhoods.

Secondly the presence of the Borstal institute provide an environment away from home but at the same time with other children of the same age which is far better for this children to be re-educated in. therefore policy makers and educationist should strive for these children to be placed in a rehabilitational facility were all of them can be accounted for and dealt with rather than in prison with hundreds of other prisoners who can exploit or couch these children into getting worst.

Also, this study suggests that parents should develop a strong bond with their children in prison to enable them have confidence and see them as friends to share and exchange their experiences, weaknesses and problems. the support from parent's friends and family is very important for this children, therefore platform on which parents of children in prison should be created and given chances to see these children talk with them, advised and always find time to visit their wards/children on regular basis and seek out ways to better the environment an conditions of these children. This will enable the children to maintain that normal social link with their family rather than keep them in isolation away from family and friends.

Furthermore, most prisoners especially children are kept in prison without proper trail or sentence and some of them spend years in prison without conviction or a sentence, there for it is the duty of the judicial system to expedite these process and render a judgement for these children rather than send them to prison under the term "awaiting trail" these causes prolonged periods in prison sometimes even longer than the time to be served for the said anti-social behaviours.

Again, even due prison is considered as a means of punishment in its self, the use of restrain and solitary confinement in prison should be avoided because it has been seen to have the most negative effect on these children ranging from self-harm to death.

The rehabilitation and recreational programs of the prison have been found lacking both for the children and the other prisoners, as a result these children are not given other options than the ones they already know. Therefore, it can be said that the prison does not prepare these children for reintegration and survival in the society. These in itself recommended the presence of prison counsellors and psychologies and vocational training programs for this children in prison.

Finally, it is strongly recommended government officials, magistrates, lawyers and other justice associations as a whole be educated on the ills of putting young children in prison, bringing to light the psychological, social, financial and economic disadvantages to these children, their families and the country as a whole

Suggestions for further research
Based on the findings of the study as already presented and considering that prison conditions have an effect on the development of a stable personality of child prisoners in Cameroon, the researcher recommends the following;
➢ Effects of overcrowding in the behaviour and the psychological health of prisoners a case study of the Buea central prison
➢ Correlational studies to compare level of recivism between children in prison and those in the Borstal institute.
➢ Effects of long term imprisonment of child prison on the socio-economic status of the family members
➢ Effects of prolong solitary confinement on the psychological and mental health of child prisoners a case study of the Kumba provincial prison.

Limitations of the study
➢ Prison is a self-contained environment in which everyone's activity is tightly regulated and monitored. Simply getting access to a prison was also difficult for researchers.

➤ Again as a result of time and finances our sample population was limited to the Buea central and Kumba provincial prison.

➤ Due to the scope of the studies, we could not collect data from all the prisoners and so we can't establish a perfect line on the influence of prison conditions on the formation of a sable personality of child prisoners.

➤ Secondly, because of lack of adequate prison information resources, we could not get enough data on some of the children who have been released to test if this conditions actually influence or affects them positively or negatively after they left prison

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Appendix 1
My name is Lyonga Marlvin a Master student of the University of Buea carrying out a study on **Anti social behaviours, prison conditions and the formation of stable personality ofchild prisoners**.

This questionnaire aims at getting your opinion in relation to the above topic. The information you give will remain confidential and shall be used only for its intended purpose. Kindly fill the questionnaire with honesty and individuality. Your personality will remain confidential and you need not write your name.

Instructions
Please place a tick on the response that most suit and if necessary give the reason and brief explanations. The response include **Strongly Agree (SA), Agree (A), Disagree (D) and Strongly Disagree (SD)**

Demographic information
Name of institution: _____
Number of inmate in your block _____
Age _____
Town of origin _____
Date of arrest _____
Place of arrest _____

Anti social activity
Reason for imprisonment..
How long have you been in prison....................................

NO	Statements	SA	A	D	SD
1.	I am satisfied with the conditions of my living place	☐	☐	☐	☐
2.	I have difficulties with sleeping spaces	☐	☐	☐	☐
3.	I am satisfied with my sleep	☐	☐	☐	☐
4.	I have three meals a day	☐	☐	☐	☐
5.	I fought because food or water wasn't enough	☐	☐	☐	☐
6.	My resources don't permit me to have all I need	☐	☐	☐	☐
7.	I am not satisfied with my inability to perform my daily living activities	☐	☐	☐	☐
8.	There is always a doctor and nurse at the health unit	☐	☐	☐	☐
9.	When am sick they always provide medications and health care	☐	☐	☐	☐
10.	I am comfortable with my bodily appearance	☐	☐	☐	☐
11.	I am satisfied with my access to health services	☐	☐	☐	☐

NO	Statements	SA	A	D	SD
12.	It is easily for me to get good medical care	☐	☐	☐	☐
13.	I am satisfied with my health	☐	☐	☐	☐
14.	I am satisfied with my ability to move around	☐	☐	☐	☐
15.	I will feel bad if that freedom was taken away by putting me in salting cell	☐	☐	☐	☐
16.	I can visit someone in the salting cells	☐	☐	☐	☐
17.	Someone wounded himself or died in the salting cell	☐	☐	☐	☐
18.	I am sometimes put in chains in chains	☐	☐	☐	☐
19.	I am living in a safe and secure environment	☐	☐	☐	☐
20.	I worry about my safety and security	☐	☐	☐	☐
21.	I am satisfied with my physical safety and security	☐	☐	☐	☐
22.	The fear of punishment prevents me from doing what i want to do	☐	☐	☐	☐
23.	People form Gangs to protect each other	☐	☐	☐	☐
24.	There are cases of sexual abuse reported	☐	☐	☐	☐
25.	I have been made to do things you don't want to	☐	☐	☐	☐
26.	I am presently worrying over possible misfortunes	☐	☐	☐	☐
27.	I feel satisfied	☐	☐	☐	☐
28.	I feel frightened	☐	☐	☐	☐
29.	I get the kind of support from others that I need	☐	☐	☐	☐
30.	I am satisfied with the support I get from my family	☐	☐	☐	☐
31.	I can count on my friends when I need them	☐	☐	☐	☐
32.	I am satisfied with my personal relationships	☐	☐	☐	☐
33.	I are satisfied with my ability to provide for or support others	☐	☐	☐	☐
34.	I feel happy and loved when they visit	☐	☐	☐	☐
35.	Other inmate advised me on what to do in prison	☐	☐	☐	☐
36.	I feel uncomfortable	☐	☐	☐	☐
37.	I feel self confident	☐	☐	☐	☐
38.	I feel nervous	☐	☐	☐	☐
39.	I am satisfied with the social care services	☐	☐	☐	☐
40.	I am satisfied with my opportunities for acquiring new skills	☐	☐	☐	☐
41.	I have opportunities for acquiring the information that I feel I need	☐	☐	☐	☐
42.	I have the opportunity for leisure activities	☐	☐	☐	☐
43.	I am able to relax and enjoy myself	☐	☐	☐	☐
44.	I am comfortable with the way I spend my spare time	☐	☐	☐	☐
45.	I often wish I were someone else	☐	☐	☐	☐
46.	No one pays much attention to me at home	☐	☐	☐	☐
47.	I get upset easily at home	☐	☐	☐	☐
48.	My parents and I have a lot of fun together	☐	☐	☐	☐
49.	Most people are better liked that I am	☐	☐	☐	☐
50.	I do not like to be with other people	☐	☐	☐	☐
51.	Children usually follow my ideas	☐	☐	☐	☐
52.	There are a lot of things about myself I would change if I could	☐	☐	☐	☐
53.	I am popular with children my own age	☐	☐	☐	☐
54.	Things are difficult in my life	☐	☐	☐	☐
55.	It is pretty difficult to be me	☐	☐	☐	☐
56.	I am pretty happy	☐	☐	☐	☐
57.	I am worried	☐	☐	☐	☐
58.	I feel confused	☐	☐	☐	☐
59.	I feel content	☐	☐	☐	☐
60.	I feel content	☐	☐	☐	☐

Did you do the things you did with friends or alone

……

what are some of the activity that can cause someone to be put in the salting cell?

……

How long do people stay in the salting cells?

……

What did you do when you were in the salting cell?

....
....

When you face difficulties or hardships how do you feel and what do you think about?

....
....

If you had a chance to change some things in the prisons what will it be?

....
....

Appendix 2

INFORMED CONSENT FORM FOR SUPERIMTENDENT BUEA CENTRAL PRISON

ON BEHALF OF PARENT OF MINORS LOCKED IN THE BUEA CENTRAL PRISON

LYONGA MARLVIN N

UNIVERSITY OF BUEA

ANTISOCIAL BEHAVIOUR, PRISON CONDITIONS AND THE FORMATION OF STABLE PESONALITY OF CHILD PRISONERS

Introduction

I am Lyonga Marlvin, and I Am a final year masters student at the university of Buea. I am doing some research which involves the formation of personality by children in prison. Trying to study how prison and its conditions can hinder the formation or aid the formation of personality. In this research we will talk to boys, and ask them a number of questions. Whenever researchers study children, we talk to the parents and ask them for their permission you as the head of the prison will have t agree to the participation of these children. After you have heard more about the study, and if you agree, then the next thing I will do is ask your son for their agreement as well. Both of you have to agree independently before I can begin.

You do not have to decide today whether or not you agree to have your child participate in this research. Before you decide, you can talk to anyone you feel comfortable with.

There may be some words that you do not understand. Please ask me to stop as we go through the information and I will take time to explain. If you have questions later, you can ask them of me or of another researcher.) This research seeks to look at aspects such as overcrowded nature of the prison, solitary confinement, physical and sexual abuse and health issue which may hinder or promote the formation of a stable personality

In this study, a questionnaire will be administered to these children to respond to independently and a few of them will be asked some few question.

Voluntary Participation

You do not have to agree that your son can talk to us. You can choose to say no and any services that you and your family receive at this centre will not change. We know that the decision can be difficult when it involves your children. And it can be especially hard when the research includes sensitive topics like prison activities. You can ask as many questions as you like and we take the time to answer them. You don't have to decide today.

Procedure
1. Your son will participate in an interview with me.
2. Your son will fill out a questionnaire which will be provided by me and collected by me. The questionnaire can be read aloud and he can give me the answer which he wants me to write.

Duration

We are asking your child to participate in this process which will take about 2 hour of his time. We can do this outside of work hours. There is also an interview that we will do together with him. This also takes about 30 minutes. Altogether, we are asking for about 2 hours and thirty of your child's time.

Reimbursements

Your son will not be provided with any payment to take part in the research. However, he will be given with [500frs] for his time,

Confidentiality:

Explain how the research team will maintain the confidentiality of data, especially with respect to the information about the participant. Outline any limits there are to confidentiality. Note that with focus groups confidentiality cannot be guaranteed

because what is said within the group becomes common knowledge. Participants can be asked not to share outside of the group but this does not guarantee confidentiality.

Because something out of the ordinary is being done through research in your community, it will draw attention. If your son participates, he and you may be asked questions by other people in the community.

We will not be sharing information about your son outside of the research team. The information that we collect from this research project will be kept confidential. Information about your child that will be collected from the research will be put away and no-one but the researchers will be able to see it. Any information about your child will have a number on it instead of his/her name. Only the researchers will know what his number is and we will lock that information up with a lock and key. It will not be shared with or given to anyone except my supervisor and the panel for my presentation of my research.

At the end of the study, we will be sharing what we have learnt with the university. We will do this by doing a defense at the end of the study Nothing that your child will tell us today will be shared with anybody outside the research team, and nothing will be attributed to him by name.

You may choose not to have your child participate in this study and your child does not have to take part in this research if she/he does not wish to do so.

Certificate of Consent

I have been asked to give consent for my son to participate in this research study which will involve his completing one interview and one questionnaire I have read the foregoing information, or it has been read to me. I have had the opportunity to ask questions about it and any questions that I have asked have been answered to my satisfaction. I consent voluntarily for my child to participate as a participant in this study.

Name of Parent or Guardian _____
Signature of Parent of Guardian_____
Date _____
        Day/month/year

Statement by the researcher/person taking consent

I have accurately read out the information sheet to the parent of the potential participant, and to the best of my ability made sure that the person understands that the following will be done:
1. Administer questionnaire
2. Ask question from an interview guide

I confirm that the parent was given an opportunity to ask questions about the study, and all the questions asked by him/her have been answered correctly and to the best of my ability. I confirm that the individual has not been coerced into giving consent, and the consent has been given freely and voluntarily.

A copy of this Informed Consent Form has been provided to the parent or guardian of the participant.

Name of Researcher/person taking the consent_____