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COLLEGE OF EDUCATION AND BEHAVIORAL STUDIES

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DEPRESSION AMONG WOMEN OFFENDERS IN KALITY CORRECTIONAL CENTER ADDIS  
ABABA: PREVALENCE AND CONTRIBUTING FACTORS

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Depression among women offenders in Kality Correctional

Center:Prevalence and Contributing factors

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ACRONYMS

APA	American Psychological Association
DSM- V	Diagnostic Statistical Manual 5 <sup>th</sup> edition
EHRC	Ethiopian Human Right Commission
EPRDF	Ethiopian People Republic Democratic Federation
WHO	World Health Organization
BDI	Becks Depression Inventory
SPSS	Statistical Package for the Social Science

*Abstract*

*The objective of the study was to determine the prevalence and contributing factors for depression among women inmates in Kality Correctional Center based on the existing difference by their age, having children and the length of incarceration. In the current study, mixed methods research design was employed. 84 women offenders who are above 18 years and those women offenders incarcerated for more than 6 months were selected by using systematic random sampling method. To collect qualitative data, interview was conducted with those higher officials of the Kality Correctional Centers, with the counselors as well as with those women offenders themselves.*

*The result from the qualitative data showed that the existing age difference, having children and length of incarceration are the main factors for relatively high prevalence of depression among women inmates. The data collected through questionnaire showed that 51.6% of women inmates experience severe level of depression. The data also showed that there exist no significant statistical difference among women inmates who have difference by their age, having children and the length of incarceration. From the participants half of women inmate experience severe level of depression. Therefore the Federal as well as the Kality Correction Administrators should have to solve the problem of those depressed women inmates found in Kality Correction Center.*

*Key words: Depression, Women Inmates, Prevalence and Prison*

## **CHAPTER ONE**

### **1. INTRODUCTION**

#### **1.1 Background of the study**

Many peoples in the world are exposed to different psychological problems because of different reasons. Even though there exist different psychological problems that have an impact on both men and women, depression is the more prevalent among women than men(Steadman, Osher,Robbins, Case,& Samuels, 2009).

The definition given for depression by the World Federation for Mental Health report (2012) indicates that "depression is a common mental disorder that presents with depressed mood, loss of interest or pleasure, decreased energy, feelings of guilt or low self-worth, disturbed sleep or appetite, and poor concentration"(p. 6). In addition to this, depression has symptoms of; depressed mood, diminished interest or pleasure in all activities, significant weight loss or weight gain, insomnia or hypersomnia, psychomotor agitation or retardation, fatigue or loss of energy, feelings of worthlessness or excessive or inappropriate guilt, diminished ability to think or concentrate, recurrent thoughts of death (APA, 2013).

The report of the National Institute of Mental Health(2007) shows that "Depression is more common in women than in men, but men do get depression too" (p.4). Depression became a common problem of the world in general but it is more prevalent on those people who are in the Correction Center. Since those peoples in the correction center are exposed to depression because of different factors, they are more vulnerable to depression. From those peoples found in the Correction Center women inmates are more vulnerable than men inmates (John, Hillary, Beatrice &Veronica,2015).

In the Correction Center more than half of those incarcerated women have children under the age of 18. Since those women inmates are not living with their children they feel enormous guilt because of this they became depressed (Covington, 1998). In addition to this since imprisoned mothers worried about their children's wellbeing, they are more vulnerable for depression than other women inmates who have no children (Bastick & Townhead, 2008).

The existing age difference also has an impact for the prevalence of depression. Those younger women inmates are more vulnerable for depression than adult women inmates. So the prevalence of depression is high among those younger women inmates than adults (James & Glaze, 2006).

The length of incarceration also has an impact for the prevalence of depression on women inmate. Those women who are incarcerated for a long time are more vulnerable for depression than women who are incarcerated for a few time. This vulnerability of women long term inmate related with the reduced capacity of women inmates to cope those problems they may face in the correction center as well as outside the Correction environment by their families or relatives (Howard, 1999).

When we come to the experience of our country the Ethiopian Human Right Commission (EHRC, 2008) reported there were 80,974 incarcerated peoples, of whom 2,123 were women. This report shows that women in correctional centers have mental health problems to a higher degree than both the general population and male inmates. There is a close link between a

woman's criminal pathway and her mental and physical illness. Women in correctional centers are more likely to be depressed than both the general population and male inmates.

Currently, in Ethiopia there exist 120 regional and six federal prisons, where 112,361 men and 3,895 women are incarcerated. Women inmates account for 3.5 percent of the total prison population, without including those incarcerated women who have been detained at police stations, military camps, administration units, and rural areas (Weldeyohannes, 2017).

Generally this study focus on the prevalence of depression on women inmates in Kality Correctional Center. This study focus on the existence and nonexistence of depression as well as the seriousness of the problem on women offenders in Kality Correctional Center. After research the problem the study conclude that half of the participants have problem of severe level of depression. Then the research point out the possible recommendation that help for those persons in correctional centers as well as for those concerned bodies who have an interest to solve this problem.

## **1.2 Statement of the Problem**

In this patriarch world the place given for women in the political, social and economic affair is discriminatory. The discrimination increases on those women who are in the Correction Centers than others because of different factors. Those women found in the Correction Center are the mostneglected, misunderstood and unseen women in our society. These make women to develop feeling of neglected or isolated then finally those women became depressed (Bloom &Covington, 1998). Not only those incarcerated women but also the Correction Centers themselves are neglected by those government bodies. Because of this there exist problem of food, education as well as lack of health center facility in the Correction Center which exposed

women to be vulnerable for depression (Ashdown & James, 2010). In addition to the existing poor facility Correction Centers are not established in a way that comply with the international standard which require those Correction Centers to be designed in a way that consider women special need(Ashdown& James, 2010).

The prevalence of depression in the correction center is high among those women inmates (John et al., 2015). There are different factors for the high prevalence of depression among those women inmates from those factor having children, the duration of stay in the correctional center and age of the incarcerated women was studied. Even though women who have children and women who have no children face similar problem, those women inmate who have children have an additional problem which is different from other inmates who have no children. That problem is the distressing about their children which make women inmate who have children to be more vulnerable for depression than other women inmates who have nochildren(Bastick & Townhead, 2008).

The other factor which contribute for the prevalence of depression on those women who are in Correctional Center is the existing age difference between them.Even though the situation differ depending on different situation found in different countries. Those young inmates are more vulnerable for depression than adult inmates (James & Glaze, 2006).

Since the correction environment have problem of facility, those inmate found in the correction environment forced to face the existing problem they face in the correction center. Not only women inmate face the problem that exist in the correction center they also face their own problem because of this women develop strong psychological coping mechanism(Ashdown & James, 2010). But those women inmate have no the strength to cope the existing problem. Since

most of those women inmates are poorly educated, unemployed and many of women have been victims of sexual and physical abuse, they are not capable to cope the existing problem they face in the correction center. So their coping capacity became reduced then they became vulnerable for depression through time because of this those women inmates who are incarcerated for a long time became more vulnerable for depression than others inmates (Howard, 1999).

Similar to other countries experience, in Africa there exist different problems in the Correction Centers. Those problems do not give due attention by the government bodies because of this those women inmates face all kinds of unbearable hardships in the Correction Center (John et al., 2015). From those problem depression is the most prevalent problem among those women inmate. In addition to the problem that exist in the Correction Center the existing social, economic, family affairs and illiteracy make women inmates to be vulnerable for depression (John et al., 2015).

In our country Ethiopia there are some studies conducted on the issue. Most of those research works focus on the human right as well as health related problem of those inmates. For instance, a study conducted by Tefera (2014) a critical assessment of prisoners' right in the Oromia National Regional State: the case of Burayu Prison administration, the study conducted by Gulilat (2012) The Human Rights of detained persons in Ethiopia case study in Addis Ababa and a study conducted by Girma (2016) Assessment of Hepatitis B Seroprevalence and associated factor in Kality Prison Addis Ababa.

This study differ from those research works mentioned above those researches done in Ethiopia related with human right and health related problem of inmates, but this study will focus on the prevalence of depression on those women inmates in Kality Correctional Center. Since there exist few research works which focus on the prevalence of depression on those women inmates, I

am interested to study on this issue. As we understand from those researches works listed in the above paragraph there is high prevalence of depression in correctional centers in the world whether in developed as well as in developing countries. Unlike those research works listed above which focuses on both women and men inmates, this study focus on those women inmates only. Because of this the study differ from those research works done in the correction center. This study find out the existence, non- existence and the prevalence of depression as well as the contributing factors for the prevalence of depression among women inmates in the Kality Correction Center.

### **1.2 Research questions**

This study sought to answer the following research questions;

1. What is the prevalence of depression among women in Kality Correctional Centers?
2. Is there age difference in experiencing symptom of depression between those early adult and middle adult women in kality Correctional Center?
3. Is there group difference in experiencing depression between those women offenders who have children and those womenwho have no children?
4. Does duration of stay in the Correctional Center relate with depression?

### **1.3 Objectives of the Study**

1. To estimate the prevalence of depression among women offenders in Kality Correction Center.
2. To examine the existing age difference in experiencing depression.
3. To examine the existing difference in duration of stay in experiencing depression.
4. To identify group difference in experiencing depression

#### **1.4 Significance of the Study**

The study conducted to estimate the prevalence and contributing factors of depression among women inmates in Kality Correctional Center. After studying the prevalence and contributing factors of depression, the researcher provides possible recommendation for the problem. So the study has a significance to show possible solution for those depressed women themselves, for future researchers as well as for those concerned governmental and nongovernmental bodies to understand the seriousness of problem, For further study on this issue and to give solution for the problem.

#### **1.5 Delimitation of the Study**

This study was conducted on those women who are in Kality Correctional Center. The participants in this study were those women who have age above 18 years, women who have children under 18 years as well as women who have no children and those women who stay in the correctional center for more than six months were the participants in this study. Those women inmates below 18 years, those inmates who have children above 18 years and those women inmates who are incarcerated below six months were not participated in the study.

#### **1.6 Operational Definition of Terms**

\* Correctional Center – is a place where people's mind will be changed through punishment, deterrence and rehabilitation.

\* Depression - depicts itself in form of depressed mood, loss of interest, enjoyment, reduced energy, leading to increased fatigue and diminished activity as it is indicated in APA (2013)

\* Offenders – a person who is suspected for committing a certain crime and kept in correction center whether convicted or awaiting trial

## **CHAPTER TWO**

### **2. REVIEW OF RELATED LITRATURE**

In this chapter the researcher review those research works done by different researchers in relation to the prevalence and contributing factors of depression. The chapter starts by reviewing those research works done on the correction center in general. Then it review the researches done on women offenders by different researcher. Finally the prevalence and contributing factor for depression also reviewed in this chapter.

#### **2.1Correction Centers Overview**

The Correction Center is a place where those person who commit a crime kept while awaiting trial or those who are convicted. Even though the Correction Centers has difference in their structure and organization among different countries, they have relatively similar objective. The objective of Correction Centers are to enforce societal rules, maintain the safety of the general population, provide punitive sentences to offenders, and rehabilitate prisoners (Mukiza, 2014).

Since the Correction Centers serve as a place that kept those inmates with the purpose listed before, they have the responsibility to provide service for those inmate in order to realize their purpose. This responsibility starts from the day they admit new inmates to the correction center. The Correction environment is new for those women inmates, they need special treatment in order to adapt it. Even though it is not the only reason, the existing poor facility of the Correction Center contributes for the vulnerability of women inmates for depression. In addition to the existing poor service facility which contribute for the vulnerability of women offender for depression, trauma of separation from children, families and communities, past victimization and fears for their safety, the particular stigma associated with their imprisonment, minimal

experience of contact with state authorities, or low educational and economic status, are also reason for their feeling of depression(Fraser, 2011).

In the Correction Center the number of women inmates are very few, because of this the correction system and regimes are almost invariably designed for the majority male inmate population – from the architecture of the Correction Center, to security procedures, to facilities for health care, family contact, work and training (Bastic & Townhead, 2008). For instance in Sweden three of the four Correction Centers now used for women were originally built for men.

In addition to this not only their structure, but also the existing provision also designed to administer men offenders only. Surprisingly, the experience of most countries shows that in those later years most countries tries to consider the need of women offenders not by designed a new provision which consider the need of women offenders rather through adding on to the existing provision which is designed for men offenders (Fair, 2009). The correction centers have not kept pace with the growth of the number of women in prison; nor has the criminal justice system been redesigned to meet women's needs, which are often quite different from the needs of men. Because of this women are more vulnerable for depression than men (Bloom & Covington, 1998).

In Ethiopia even though they have relative similarity by their purpose with other countries, the structure and the organization of the correction centers differ from other countries. In Ethiopia most of those places serve as correction centers are not established for the purpose of correction center initially, rather they were established as warehouses for military and administrative units. When those places converted to the correction center with the aim of incarcerating men than women. In those previous years in Ethiopia there were never exist separate place for women

offenders until the adoption of the 1957 Penal Code which begins the incarceration of women offenders in different place (Weldeyohannes,2017).

## **2.2 Women Offenders Overview**

The history of women offenders in the whole world shows that since women did not participate in the criminal activity most of the time, in those past years the number of women offenders were very few. Because of this in most countries, women constitute a minority of the prison population: usually between 2% and 8% (Bastic & Townhead, 2008). In addition to this there exist a research which support the above finding which explores that the number of women represent a small proportion of the total prison population (Fawcett society, 2004).

Even though the number of women offenders are very few in those past years currently, their number represent a significant proportion of all women offenders under the criminal justice system. In addition to this the study also shows that now a day's more than half a million women offenders which amounts to 4-5% of the total prison population are serving sentence in the whole world (Zavradashvili, 2015). The number of women offenders are not only increasing rather their proportion is also rising, more so than the rise in the rate of male prisoners (Fawcett society, 2004). Women are the fastest growing group in the prison system. They are growing at a consistently faster rate than men and the number of women in prison has increased by 55% over the last decade (Trotter & Flynn, 2016).

In the last two decades, there has been a significant increase in the number of women entering correctional facilities in Australia and around the world (Fraser, 2014). However, not only are their numbers increasing in tandem with the rise in the overall prison population in many countries, but studies in some countries have shown that the number of female prisoners is

increasing at a faster rate than that of male prisoners. The number of women offenders are not only increased dramatically rather their number tripling in those last decades (Bloom & Covington, 1994).

The existence of few number of women offenders as well as the design of the Correction Centers creates an impact on those women offenders which became increasing in those latter years. Even though women need special treatment than men in the Correction Center, the Correction Center is not designed in a way that satisfy the special need of women offenders. Because of this women offender's to become more vulnerable for depression than men (Fair, 2009). Studies also shows even though those women inmate havethe most challenging time in prison, despite those challenges they face, little attention has been given to solve the problem. For instance a study conducted in Kenya shows that even though those women inmate face challenge situation all the time, the prison authorities doesn't provide solution for those problems. Because of this those women inmates became vulnerable for depression(Kamoyoet al., 2015).

### **2.3 Theoretical framework**

#### **\*Relational Theoryof Women Psychological Development**

The current study is based on Relational Theory of Women's Psychological Development; Implications for the Criminal Justice System developed by Covington in 1998. The basic assumption of the theory is "connection" which is a basic human need, and that this need is especially strong in women. All people need both connection with others and differentiation from others, but females are more attuned to connection while males are more attuned to differentiation. Connection, not separation, is the guiding principle of growth for women.

Women's psychological growth and development occur through adding to rather than separating from relationships.

This theory challenge the traditional theories of psychology which described development as a climb from childlike dependence to mature independence. A person's goal, according to these traditional theory, was to become a self-sufficient, clearly differentiated, autonomous self. A person would spend his or her life separating and individuating until he or she reached maturity, at which point the person was equipped for intimacy. The relational theory of women's psychological development helps us to understand what women need from our criminal justice system. In short, the females flooding our criminal justice system are mostly young, poor, undereducated, women and girls of color with complex histories of trauma and addiction.

According to this theory the environment of most correctional facilities does not facilitate growth and development in women's lives. Most current programs have been designed by men for men. In order to develop effective services for women, we need to create programs for women based on the reality of their lives and on what we know about women's growth and development. It is time for those correction centers to move beyond the culture of punishment and retribution that characterizes our criminal justice system and create a culture of community and healing. It is time for transformation.

This study is based on the above theory because relational theory advocate that since women have needs that is different from men, those correctional centers should be designed by taking in to consideration the needs of women inmate. Even though women need connection with other peoples than men, the correction environment forced women inmates to be isolated from the society because of this women inmate loss their connection with the society which forced them to be depressed. If those correctional centers does not take in to consideration women's need,

those women who are in the correctional centers are exposed to depression so this study is designed based on the above assumptions of the relational theory.

## **2.4 Nature of depression**

Depression is a common mental disorder that presents with depressed mood, loss of interest or pleasure, feelings of guilt or low self-worth, disturbed sleep or appetite, low energy, and poor concentration. These problems can become chronic or recurrent and lead to substantial impairments in an individual's ability to take care of his or her everyday responsibilities. Depression usually starts between the ages of 15 and 30, and is much more common in women. (Khairaet al, 2012)

A research done by (Ahmad &Mazlan, 2014) give meaning for depression that “depression, which is one of most common psychiatric disorders in prison, can be defined as persistent depressed mood, loss of interest and enjoyment, and reduced energy, which lead to increased fatigability and diminished activity”. (p.153)

## **2.5 Types of depression**

There are eight categories of depressive disorders listed in the APA (2013)listed below:

- Disruptive mood dysregulation disorder

This diagnosis is new. It was created to reduce the risk of over diagnosis and treatment of bipolar disorder in children. The diagnosis is available for children from six to eighteen years of age.

The core feature of disruptive mood dysregulation disorder is chronic, severe, persistent irritability (APA).

- Major depressive disorder

Major depressive disorder is characterized by a period of at least two weeks during which the youth experiences sadness, hopelessness, guilt, loss of interest in activities that are usually enjoyable, and/or irritability most of the time.

- Persistent depressive disorder (dysthymia)

Persistent depressive disorder (dysthymia) is a depressive disorder in which the symptoms are chronic and persistent but less severe than major depressive disorder. The disorder occurs when youth experience a sustained depressed mood for most of the day, for more days than not, for at least one year (compared to two years for adults). Symptom-free intervals last no longer than two consecutive months. The youth must experience a depressed mood and have at least two of the following symptoms those are altered appetite, sleep disturbance, fatigue or loss of energy, low self-esteem, difficult thinking or concentrating and Sense of hopelessness.

- Premenstrual dysphoric disorder

Premenstrual dysphoric disorder was previously included in the appendices of the *DSM-IV-TR*. However, this disorder is now officially a part of the depressive disorders section in *DSM-5*. The decision to move premenstrual dysphoric disorder to the main body of *DSM-5* was based on evidence that two to five percent of menstruating women experience a unique depressive disorder that begins following ovulation, remits within several days of menses, and leads to significant interference in daily life.

A diagnosis of premenstrual dysphoric disorder requires that at least five clinically significant symptoms occur repeatedly during the premenstrual phase of the cycle, and that these symptoms remit at or shortly after the onset of menses. At least one symptom must reflect disturbance in general mood: mood ability, irritability, dysphoria, or anxiety. In addition, individuals must endorse at least one of the following physical/behavioral symptoms those are difficulty

concentrating, lethargy, appetite changes, sleep changes, overwhelmed feelings and physical symptoms.

- Substance/medication-induced depressive disorder

The diagnostic features of substance/medication-induced depressive disorder include the symptoms of a depressive disorder, such as major depressive disorder; however, the depressive symptoms are associated with the ingestion, injection, or inhalation of a substance (e.g., drug of abuse, toxin, psychotropic medication, other medication), and the depressive symptoms persist beyond the expected length of physiological effects, intoxication, or withdrawal period.

- Depressive disorder due to another medical condition

Depressed disorder due to another medical condition occurs when there is evidence from history, physical examination, or laboratory findings that the disturbance is the direct pathophysiological consequence of another medical condition. It must be established that the depressive symptoms can be etiologically related to the medical condition through a physiological mechanism before making a judgment that this is the best explanation for the symptoms of a specific individual

- Other specified depressive disorder

This category applies to presentations in which symptoms characteristic of a depressive disorder that cause clinically significant distress or impairment in social, occupational, or other important areas of functioning predominate but do not meet the full criteria for any of the disorders in the depressive disorders diagnostic class. The other specified depressive disorder category is used in situations in which the clinician chooses to communicate the specific reason that the presentation does not meet the criteria for any specific depressive disorder.

- Unspecified depressive disorder

This category applies to presentations in which symptoms characteristic of a depressive disorder that cause clinically significant distress or impairment in social, occupational, or other important areas of functioning predominate but do not meet the full criteria for any of the disorders in the depressive disorders diagnostic class. The unspecified depressive disorder category is used in situations in which the clinician chooses not to specify the reason that the criteria are not met for a specific depressive disorder. It includes presentations for which there is insufficient information to make a more specific diagnosis (e.g., in emergency room settings).

## **2.6 Symptoms of depression**

According to APA (2013) the symptoms of depression are;

1. Depressed mood most of the day, nearly every day, as indicated by either subjective report (e.g., feels sad, empty, and hopeless) or observation made by others (e.g., appears tearful). (Note: In children and adolescents, can be irritable mood.)
2. Markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day (as indicated by either subjective account or observation.)
3. Significant weight loss when not dieting or weight gain (e.g., a change of more than 5% of body weight in a month), or decrease or increase in appetite nearly every day. (Note: In children, consider failure to make expected weight gain.)
4. Insomnia or hypersomnia nearly every day.
5. Psychomotor agitation or retardation nearly every day (observable by others, not merely subjective feelings of restlessness or being slowed down).

6. Fatigue or loss of energy nearly every day.
7. Feelings of worthlessness or excessive or inappropriate guilt (which may be delusional) nearly every day (not merely self-reproach or guilt about being sick).
8. Diminished ability to think or concentrate, or indecisiveness, nearly every day (either by subjective account or as observed by others).
9. Recurrent thoughts of death (not just fear of dying), recurrent suicidal ideation without a specific plan, or a suicide attempt or a specific plan for committing suicide.

According to the National Institute of Mental Health report (2007) "Even though those symptoms are symptoms of depression, not everyone diagnosed with depression will have all of these symptoms because signs and symptoms may be divergent in men, women, younger children and older adults" (p.3).

### **2.7 Prevalence of Depression on women offenders in the world**

The world mental health (2012) reported that "one out of ten people suffer from depression and almost one out of five persons has suffered from this disorder during his or her life time (one-year prevalence is 10% and lifetime prevalence 17%)"(p.14). The prevalence of depression in the correctional centers are not surprising rather it is highly prevalent. 45% of those offenders found in the correction center experience depression (Armour, 2012).

As it is stated in the above paragraph depression is the most common problem in the correction center. Depression is not equally prevalent among all offender in the correction center rather its prevalence increase on those women offender than men offender. Its prevalence is high among those women offenders than the general population (Light et al., 2013). Two thirds of women in

prison are suffering from a depression(Steadman et al., 2009).So it is far more prevalent among female offenders than male offenders(Barlow, 2014).

Depression is not only a problem by its self, rather it is also a cause for different problems. The report made by Fraser(2014)shows that “depression is a significant contributor to the global burden of disease and affects people in all communities across the world. Today, depression is estimated to affect 350 million people”(p. 6).In addition to this depression is a major contributor to the global burden of disease and affects people in all communities across the world and 450 million people suffer from some type of mental or behavioral disorder (Fekad et al., 2017).The prevalence of depression is known to be higher amongst those women inmates in Correctional Centers than in the general population (Light et al., 2013).

### **2.8 Prevalence of depression in Ethiopian women**

Even though there exist little research work that show the prevalence of depression in Ethiopia, the prevalence of depression is relatively high when we compare it with other countries(Bitew, 2014). Similar to other countries experience in Ethiopia the prevalence of depressive episodes was higher among females than males. The existence of economic problem, illiteracy and others are the cause for the prevalence of depression, in Ethiopia in addition to the above causes the existing social norm (gender issue) which make families to restrict their daughter than son. This makes females vulnerable for depression by reducing senses of self-control and self-esteem(Bitew, 2014).The study conducted on the prevalence and associated factors of postpartum depression among mothers in Nifas Silk Lafto Sub City, Woreda 1 and 2 health centers shows that the prevalence of depression is 27.8% (moderate) when we compared well with other studies (Teshome, 2016).

A research done on the prevalence, gender difference and associated factors of depression on those students in Addis Ababa University Students Sidist Kilo Campus shows that the prevalence of depression is around 31.7%. There are high association between gender and depression. Female students were more likely to be depressed than male students(Gashaw, 2015).

In addition to this a research done on the assessment of Prevalence and Risk Factors of depression among adults in Gilgel Gibe field research center, South West Ethiopia shows that females were 1.62 times more likely to have depression compared to males so the prevalence of depression is high among those women than men (Hussien et al., 2017).

Ministry of Justice (2009) reported that in Ethiopia women in custody are five times more likely to have mental health problems than women in the general population. The report shows that the prevalence of depression on women inmates in Ethiopia is 47%.

Depression is not only have an impact by itself but also it is one of the major cause for disability in Ethiopia. Depression was estimated to be the leading cause of life lived with disability and the fourth leading cause of the total global disease burden in addition to this in Ethiopia depression contribute about 6.5% of the burden of diseases. This is the highest burden of disease compares to other forms of mental disorder (Bitew, 2014).

A research done in Ethiopia about the prevalence of depression on those pregnant women was 23% (Ayele et al.,2016).

Even though the above studies shows the prevalence of depression in Ethiopia, there exist a gap to know the prevalence of depression on those women inmates in the Kality Correction Center. So this study will fill the existing gap on the prevalence of depression in Kality Correctional Center.

## **2.9. Risk factors for the prevalence of depression**

The Publication of the APA (2010) reported that the causes of depression is a combination of genetic, chemical, biological, psychological, social and environmental factors likely contributes to the disorder. Depression is often a signal that certain mental, emotional and physical aspects of a person's life are out of balance. Chronic and serious illness such as heart disease or cancer may be accompanied by depression. Significant transitions and major life stressors such as the death of a loved one or the loss of a job can help bring about depression.

Women often have more sources of stress and depression such as social, economic problems, family affairs and less educational opportunities. These circumstances are even more significant among inmates who are being incarcerated and restricted from freedom to achieve something like those outside the prison wall(Kamoyo et al., 2015).

Since those women found in those Correctional Centers are not given due attention by the government as well as other bodies, those women inmates became depressed (Bloom et al., 1994). On the other hand since the Correctional Centers is not a pleasant place to live no matter how well disciplined and managed it is, it estranged prisoners from their families, friends, outer world and society. So the existing inmate's alienation from the family and society as well as the existing delay in legal proceedings also have an impact on those inmates to be vulnerable for depression (Sharma et al., 2015).

Even though there exist different risk factor for the prevalence of depression,from those risk factors the study focus on those three factors that make women inmates to be depressed. Those are existing age difference, length of incarceration and having children among those women inmates in the Kality Correctional Center.

### **2.9.1 Age**

There are different factors for the prevalence of depression in the Correctional Centers. From those factors the age of the incarcerated persons are one of the factor for the prevalence of depression in Correctional Centers. So the seriousness of the psychological problem among incarcerated women varied by their age difference. The prevalence of depression is high among those younger incarcerated women than adult inmates. So the increase the age of the incarcerated women mean the less in the vulnerability for depression as well as the decrease in the age of the incarcerated women mean the high the vulnerability of the depression (James & Glaze, 2006).

The vulnerability inmate for depression differ by their age difference for instance those inmates age 24 or younger had the highest rate of vulnerability than those inmates above age of 55 (James & Glaze, 2006).

### **2.9.2 Length of incarceration**

The second factor for the vulnerability of women inmates for depression is the length of incarceration. Research shows that those women who are incarcerated for a long time are more vulnerable for depression than those women who are incarcerated for a short time. The study shows that those long term incarcerated women are tend to be poorly educated and unemployed. In addition to this since those women who are long term incarcerated have feelings of guilt, fear, anxiety and alienation this feeling force women to loss their self- esteem and then it reduces a woman's ability to cope finally those women became depressed (Howard, 1999).

On the other hand there are a research finding which shows that women inmate became more depressed at the time of their admission to prison. Because trauma of separation from children, families and communities, past victimization and fears for their safety, the particular stigma

associated with their imprisonment, minimal experience of contact with state authorities, or low educational and economic status, among others (Mukiza, 2014).

### **2.9.3 Having children**

In addition to the impact of the age difference and length of incarceration for the prevalence of depression have difference among those women inmate who have children and those women inmates who have no children. Many research shows that the prevalence of depression increases on those incarcerated women who have children than those incarcerated women who have no children. For instance Handbook on Women and Imprisonment prepare by the office of the United Nation on drug and crime (2014) reported that "Children outside prison are a cause of great distress to their mothers, who worry about the separation, whether the child will be taken away from them or not and how they are being cared for. If there are a number of children and they are being looked after by different persons or institutions, this will be an additional cause for concern." (p. 19)

According to the report stated above since those incarcerated women who have children are worried about the fate of their children, they are more vulnerable for depression. In addition to this there exists a research finding which is similar with the above report two- third of women inmates have children. Those women worried about their absent from their children and they worry about whether they will have custody of their children when they get out the Correction Center or nor exposed them to be vulnerable for depression (Covington, 1998). Similarly other studies also shows that imprisoned mothers are more vulnerable for depression as a consequence of concern for their children (Bastick & Townhead, 2008).

In our country Ethiopia the situation is similar with the experience of other countries because the study shows that prevalence of depression is high among those mothers of young children than the general population (Tesfawet al., 2016).

Generally we can conclude from the above topic that the prevalence depression on those women inmates have difference based on three factors which will be studied. Those are age of the incarcerated women, the length of incarceration as well as the existing difference for the prevalence of depression among those women who have children or those inmates who have no children. Those studies conducted in different countries shows that the prevalence of depression is high among those young inmates than those adult inmates because of different factors. In addition to this those studies listed above shows those inmates who are incarcerated for a long time are more vulnerable for depression because of different factor than those inmates who are incarcerated for a few time. So the prevalence of depression is high among those inmates who are incarcerated for a long time. Finally those studies listed above shows the existing prevalence of depression among those women inmates who have children than those inmates who have no children.

## **2.10 Summary of the review**

The literature review part has five sub parts. The first part of the review is a general overview of women offenders this part of the review explain about the history of women offenders, their involvement in the criminal activities and the numbers of those women involving in the criminal activities in those different years and other issues about women offenders are explained by denoting those researches done in relation to women offenders in different countries. This topic first tries to explain about the meaning, structure and the purpose of the correctional centers by reviewing different literatures. Then it explain that since the number of women offender in those

past years are very limited, correctional centers are designed to meet the needs of men. But on those latter years since the number of women offenders became increasing, those correctional centers are designed depending on the needs of men create problem on those women who are in correctional centers. From those problems that face incarcerated women are the psychological problem including depression. In addition to this topic also included those researches that explain about the vulnerability of women offenders for depression.

The second part of the review explains about the theories of depression. This part explain that there are different theories done by different theorists about the prevalence of psychological problem on the correctional centers. From those different theories this study depends on the relational theory. This theory explains that those correctional centers are designed based on the needs of men. Those women who are in the correctional centers are forced to live on those correctional centers designed to satisfy the needs of men. This makethem to be vulnerable to different psychological problem. So to solve this problem those correctional centers should have to design by considering women's need which is different from men. Women wants to create relationship with those societies found in those correctional centers otherwise they are exposed to different psychological problem. So this study is based on relational theory because this study is about the prevalence of one of the psychological problem which is depression in those correctional centers.

The third part of the review explain about the nature, type and cause of depression. This part of the review starts by defining depression. Then it explain different types of depression then finally this part explain about the causes of depression.

The forth part explains about the prevalence of depression this topic include the prevalence of depression in those correctional centers found in different countries. This topic explains that

depression is a common mental health problem in those correctional centers than the outside world. Depression is more prevalent on those women in correctional centers than men. In addition to this those women who are in the correctional centers are more vulnerable for depression than men. So those different literatures included in this topic explains that women are more vulnerable for depression than those men found in the correctional center and the general population. Even though there exist a few research done on the prevalence of depression on those women in the Kality correctional centers. Those research done in different countries shows that those women in the correctional centers are more vulnerable for depression than men.

In the last topic of the review those factor contribute for the prevalence of depression in the correctional center are explained. The topic classified by three sub topics those are age, having children and the length of incarceration are included in this topic. Those the three variables contribute for the prevalence of depression are explain by referring different researches. Different research find out that the age of the incarceration have an impact on their vulnerability for depression. Those women who are young age during their incarceration are more vulnerable for depression than those adult inmates. So from those different literatures the age and depression are inversely related. Those younger women in correctional centers are more vulnerable for depression than those older incarcerated women. The other factor included in this topic is having children. Those incarcerated women who have children are more vulnerable for depression than those women who have no children. So the prevalence of depression on those incarcerated women who have children are higher than those incarcerated women who have no children. The other factor included in this topic is impact of the long term incarceration for the prevalence of depression. Different literatures indicates that those women who are in the correctional center for a long time are more vulnerable for depression than the others. According

to the literature included in this topic those women who are long term incarcerated are more vulnerable for depression than others.

Generally the review part of the study explains about those different research works done by different researchers about the prevalence of depression on those women who are in the correctional centers. The review explains the experience of different countries by referring those research works done by different researchers on the prevalence of depression on those incarcerated women.

## **CHAPTER THREE**

### **3. DESIGN AND METHODOLOGY**

#### **3.1 Design of the study**

In order to achieve the objective of the study the researcher used mixed methods research design. The quantitative approach used to know the prevalence of depression among women inmates in Kality Correction Center. The study used questionnaire to know the prevalence of depression among those women inmates who have difference by their age, having children and length of incarceration in Kality Correction Center.

Qualitative approach was used because it helps the researcher to know the contributing factors for the prevalence of depression among those women inmates who have difference by their age, having children and length of incarceration. Detailed interviews were conducted with different levels of the Kality Correction Center Administrators, with those women inmates themselves and with those counselors in the Kality Correction Center.

#### **3.2 Study Area**

The study was conducted in Kality Correctional Center which is one of the largest Federal Correction Centers found in Addis Ababa, in Akaki Kality sub city, which is one of the 10 sub cities of Addis Ababa. The Sub city is located in the southernmost part of the City, bordered with the sub cities of Nifas Silk- Lafto and Bole. It is about 15km far from the center of the city. In this Correction Center there were 600 women inmate.

### **3.3 Population, sample and sampling**

#### **3.3.1 Population of the study**

Target population is the population that was studied and the population to which the outcome of the study were applicable. The study was conducted on those women inmates who are found in the Kality Correctional Center. The number of women offenders in Kality Correctional Center are 600. Those women who are incarcerated for more than six month was the target population for the study whether they are convicted or awaiting trial were the target population for the study.

#### **3.3.2 Sample size**

The sample size for this study were those women inmates who are incarcerated in Kality Correctional Center for more than six month were taken as participants. From those women inmates found in correctional center there are around 280 women who are incarcerated in the Correctional Center for more than six month. With regard to sample size determination, Neuman (1997) pointed out some guiding principles that are followed by conventional social science researchers for selecting representative samples for quantitative studies. As stated by Neuman, if the study population is 1000 or under, the sample ratio would need to be 300 (about 30%) individuals, Therefore 84 women inmates participated in this study.

#### **3.3.3 Sampling technique**

Those 84 women were selected from the list of incarcerated women in the Correctional Center by using systematic random sampling method. The first participant was selected by using lottery method then the other participant selected using interval which were calculated by the formula the total number of women in Correction Center those who included in the scope of the study divided by the number of participant then the result was the interval that we select the

participants. By using the formula  $\frac{600}{84} = 7$  then the first participant was selected by using lottery method then other participants were selected by using the interval.

### 3.4 Tools of data collection

Both questionnaire and interview guide were used to collect the data from the study participant. The instruments were prepared both in English and Amharic. The questionnaire contains two parts; the first part contain information about socio demographic characteristics of women inmates in Kality Correctional Center and the second part contains Standardized Scale Questionnaire from Beck Depression Inventory-II (BDI-II)(Beck, Steer, & Brown, 1996)

The first part of the questionnaire which is the socio demographic questionnaire was prepared both in English and Amharic. It had two sections the first section of the *socio* demographic questionnaire contain eight (8) questions which help to know the history of inmates and their family and the second section contain five (5) questions which help to know about their incarceration.

#### Beck Depression Inventory-II (BDI-II)

In order to measure depression level of women inmates in the Kaliy Correctional Center, the latest version- Beck Depression Inventory was used. The BDI-II is self-report analysis of depressive symptoms or an instrument for measuring the severity of depression in adolescent 13 years of age and up, as well as adults. The test contains 21 item designed in the form of a multiple- choice questionnaire where each question is accompanied by four answer to choose from, most of which assess depressive symptom on a Likert scale of 0-3. All answer are given a rating start from zero to progressing to three depending up on the nature and intensity of the depressive symptoms.

Beck's Depression Inventory were used in this study to estimate the prevalence of depression in those women offenders in the Kality Correctional Center. The BDI test includes a 21 item self-report using a four-point scale ranging which ranges from 0 ( symptom not present) to 3 (symptom very intense). Beck et al, (1996)

The highest possible total for the whole test would be 63.

- a) 0-9 \_\_\_\_\_ Minimal depressive symptom
- b) 10-16 \_\_\_\_\_ Mild depression
- c) 17-29 \_\_\_\_\_ Moderate depression
- d) 30-63 \_\_\_\_\_ Severe depression

The Beck Depression Scale help to evaluate levels of depression such as lack of hunger or appetite, crying, unexpected fatigue and tiredness, lack of interest in working or socialization with friends or families, loss of weight, lack of interest in sex.

Since Beck Depression Scale or BDI-II cover both emotional and psychological aspect of depression, it has been found to be extremely efficient in assessing and evaluating the severity of depression in people. It have importance to this study to know the prevalence of depression on those women inmates in the Kality Correctional Center.

The Beck Depression Inventory –II was developed by Aaron Beck in 1996, an expert initiator of cognitive therapy who had designed the scale. This scale also goes by the names Beck Scale of Depression or Beck Depression Inventory (BDI –II). It serve as an indicator of the occurrence and severity of the symptom of depression in adolescent and adult in either a clinical or non-clinical environment.

Reliability

Standardized questionnaire were used. The tool was protested to see its ability to answer the question in study prior to the data collection period and a necessary amendment was done accordingly. In this study found a Cranach alpha for BDI is .886.

#### Validity

Concurrent validity - BDI –II total score have been correlated with score on other psychological test. (Beck et al, 1996) found the BDI- II is positively related to the scale for suicidal ideation( $r=.37$ ,  $n= 158$ ) as well as the Beck Hopelessness scale ( $r= .68$ ,  $n=158$ ).

Discriminate validity - Beck et al, 1996 studied the diagnostic efficiency of the BDI – II as a tool. They found a diagnostic efficiency study using a clinical collage sample of 127 student yielded a 93% true positive rate and 18% false positive rate. Therefore the BDI-II could be considered useful as a diagnostic tool and for screening individuals who may be in need to counseling.

Construct validity - Psychometrically, study of BDI indicate excellent internal consistency and one- week test- retest reliability on clinical sample, as well as substantial diagnostic efficiency and correlation with other tests purporting to measure the construct of depression (Beck et al, 1996).

#### Scoring procedure

People taking BDI-II have to select one answer from four possible options given and, based on the option selected, score was assigned. “0” score was assigned to the option that describe least severity of symptom and “3” assigned for the option that describe maximum severity. So the total score are directly proportional to the intensity and degree of depression experienced by the person taking the test.

Interview guide - Different interview was conducted with those women inmates in Correction Center, with those counselors as well as higher officials of Kality Correction Center to acquire detail information about the reason for the prevalence of depression among those women inmates who have difference in their age, having children and length of incarceration. They had been selected purposively since at the time they are the one with required knowledge on the issue. Semi structured interview conducted to get additional information for the study.

Since the overall problem of the correction administration is directly or indirectly related with the psychological wellbeing of women inmates exhaustive interviews conducted with the top administrators of the Kality Correction Centers. In this study the data collected thorough interview conducted with two higher officials and two counselors of the Kality Correction Center as well as with nine women inmates. They are selected purposively since at the time they were the one with required knowledge on the issue. From those women inmates three of them have children, three of them are incarcerated for more than three years and adults and three of them are those young women inmates and those women inmates incarcerate for less than three years.

Further, worded questions were prepared and response was conducted face to face with those women inmates in the Kality Correctional Center. In doing so, the interviews conducted with selected women offenders in the Correctional Center regarding the cause for the prevalence of depression among those women inmates who have difference in their age, having children and length of incarceration. As such, intentionally nine women offenders who were at least stay more than six month in the correction center was selected to conduct interviews. Because they know well every good and bad things of life in the correction center and also they have more

experiences concerning the prevalence of depression in the correctional center. From those nine women offender those three was those women offender who are incarcerated for more than three years and those who have children and their age more than 30 years and three was from those women offenders who are incarcerated in the correction center for less than three years and those who have no children and their age was less than 30 years and other three was those women who have children and their age was less than 30 year and incarcerated for less than three years.

### **3.5 Procedure of Data Collection**

To collect the data I obtained letter from the University that will give for Federal Correction Administration. After obtaining the letter I went to the Federal Correction Administration and then I gave the permission letter that I got from the University. After getting the permission, I hadselect the participants from the Kality Correctional Center then after I asked their permission and I inform them the purpose of the study. Finally after I got permission from those participants I give them the questionnaire and I had an interview with those selected participants for the interview.

#### **Pilot-testing**

Even though different efforts done to amend the instrument used in the data collection process, an error may exist in the data collecting instrument. So to identify the possible errors that may exist in the instrument, pilot test is help to solve the possible error that may exist in the actual data collection process. In this study before the actual data collected the data collection instrument pre-tested on 30 women inmates which is 25% of the required sample size at Kality Correctional Center to check the reliability and ability of the instrument to test the question in the study. Then necessary amendment was conducted.

### 3.6 Methods of Data Analysis

In order to analyze data mixed methods of data analysis was used. To analyze the quantitative data the data entry template developed and tested on the data from the data collected through questionnaire. Then the data collected was checked for its completeness. Incomplete data was cleaned and the data entered in to computer using a Statistical Package for the Social Science (SPSS) version 20 and analyzed.

- Descriptive statistics including mean, standard deviation, frequency and proportion was utilized to describe participant's characteristics.
- Independent sample T-test were used for measuring the existing group difference among those women inmates who have children as well as those women inmates who have no children for the prevalence of depression.
- One way ANOVA were used to know the prevalence of depression on the existing age difference and duration of stay of those women inmates in Kality Correctional Center.

To analyze qualitative data narrative discussion was used. Since narrative discussion involves story-telling or recounting to understand the persons experience or their life, it have importance for this study. The researcher was collect data by interviewing those participants then the information collected was categorize in groups by collecting those similar ideas in to one group then the connection between those categories was made. Then the researcher were write down the interpretation in light of those similar studies done before and the theories of depression. The data collected through questionnaire was associated with the data collected through interview. Finally the result was discussed.

### **3.7 Ethical considerations**

This research was focused on the prevalence and contributing factors of depression on women offenders in Kality Correctional Center. In order to collect data the researcher went to the Federal Correction Administration office. Then written permission were obtained from the Federal Correction Administration. After gaining written permission from the office, the participants were selected from those women inmates in Kality Correctional Center. The researcher had told for those selected participants the purpose of the study then written informed consent were obtained from those participants. It was explain for all participants that they have the right to agree or disagree to participate in the study. In addition to this the participant was informed to change their mind not to be participant of the data collection process if they are not comfortable with those questions.

The researcher took utmost care to insure privacy, confidentiality and anonymity of participants. They had told not to write their names on any part of the questionnaire and not to put any information that make them to be easily identified by others. The Information gained from participants were kept confidential. Hence, anonymity was guarantee for the participant by not using any information that might identify participants and expose their information to a third party, especially for prison administration staffs and the family members of participants without their permission. The data encoded in the computer was also protected using passwords.

## **CHAPTER FOUR**

### **4.RESULTS OF THE STUDY**

Data was entered and analyzed using SPSS version 20. This chapter is a highlight of the results from the study. The data has been represented in tables. This chapter elaborate quantitative data analysis, percentage and mean. The data analysis performed to those research questions stated in the study. The objective of the study is to know the prevalence of depression in the Kality Correctional Center. To meet the objective of the study, the collected data were presented based on the specific research questions raised in this study.

**4.1 Socio-Demographic Information of the participants**

Variable items	Frequency N = 84	Percentage (%)
<b>Age</b>		
18-24 years	44	52.4
25-34 years	19	22.6
35-44 years	14	16.7
>45 years	7	8.3
<b>Educational level</b>		
Illiterate	7	8.3
Read and write	16	19
Elementary completed	9	10.7
Secondary completed	23	27.5
Collage/ University	29	34.5
<b>Marital status</b>		
Single	38	45.2
Married	34	40.5
Divorced	11	13.1
Widowed	1	1.2
<b>Monthly income before incarceration</b>		
<2,500	13	15.5
2,500- 5,000	31	37
5,000- 10,000	27	32
>10,000	12	14
<b>Having children</b>		
Yes	39	46.4
No	45	53.6
<b>Previous detention history</b>		
Yes	5	6
No	79	94
<b>Type of offence</b>		
Murder	5	6
Theft	30	35.7
Transfusion of drug	4	4.8
Corruption	13	15.5
Other	32	38.1
<b>Are you convicted</b>		
Yes	69	82.1
No	15	17.9
<b>Punishment</b>		
6 month -3 years	41	48.8
3 years – 5 years	20	23.8
5 years – 10 years	16	19
>10 years	7	8.3
<b>Duration of stay in Kality</b>		
6 month -2 years	55	65.5
2 years – 5 years	14	16.7
5 years – 10 years	8	9.5
>10 years	7	8.3

From those participants 63(75%) women inmates are below 34 years. 38(45.2%) participants never married, 34(40.5%) are married. Most of the participants 45(53.6%) women inmates have no children. In relation to educational background from those participants 52(62%) were above secondary school completed. From those participants majority of women inmates 49 (58.3%) was private employed before their incarceration. From those participants 79(94%) does not incarcerate before. Majority of women inmate 69(82.1%) are convicted. Most of those participants 38(45.2%) are sentenced 6 month-5 years. 55(65.5%) women inmates stay in Kality Correction Center from 6 month -2 years.

#### **4.2 Prevalence of depression among women inmates in the Kality Correctional Center**

The first research question was “what is the prevalence of depression among women inmates in the Kality Correctional Center” to give an answer to this question frequency distribution and one sample t-test to the whole scale was performed. The BDI was calculate at  $\alpha = 0.05$  and test value of 31.5. The result from the BDI shows that from those participants 43(51.6%) of women inmate in the Kality Correctional Center experience severe depression.

**Table 3: One sample t-test and descriptive statement of BDI scale**

Measure	No. of item	N	Mean	SD	T valu e	T	P- value	
BDISCAE	21	84	34.0476	13.98442	31.5	1.67	.099	

The above table shows that there is no significant statistical difference. Since the sample mean is greater than the population mean and the p- value is .099 which is greater than 0.05 there is no significant mean difference on the prevalence of depression. Therefore the population mean for the BDI scale was greater than 31.5.

**Table 4: One way ANOVA summary on the effect of age on the prevalence of depression**

Dependent variable	Independent variable	df	Mean Square	F	Sig.
BDISCALE	Age	3	49.024 201.059	.244	.865

The analysis of variable used to show the prevalence of depression among those women inmates on the existing age difference. No statistically significant difference was found by the age difference of those women inmates.[F (3, 80) = .244, P= .865] This result means that those women inmate found in any age does not have significant difference on the prevalence of depression in the Kality Correction Center. The data collected through interview shows that; Most of the data collected through interview also shows that the prevalence of depression is high among those young inmates than adults. The participant of the interview explains that the reason for the high prevalence of depression on those young women inmates is;

- a. The participants shows that in their younger age peoples do what they want to do, they can educate, work, form a family and other things that will change a women life done at the younger age. Those participants said that “it is a time for me to form a family but I lost my life because of my incarceration so I am

worried about my future this make me more depressed.” Therefore when those younger women incarcerate they became worried about their future life because of this those younger inmates became more vulnerable for depression than adults.

- b. Since some of those younger inmates use different substances before their incarceration, when they became incarcerated it is not permitted to use the substance in the Correction center then those younger inmates became depressed. So the prevalence of depression is high among those young inmate than adults.
- c. Those younger inmates enjoy with their family as well as friends before their incarceration but the situation is different in the correction center. The participant said that “there is no enough place to enjoy and those enjoyment places are not designed by taking in to consideration our need so this make me to be depressed.”

**Table 5: Analysis of independent sample t-test among those women inmates who have children and those inmates who have no children for depression scale.**

Dependent variable	Having children	N	Mean	Std. Deviation	T	S
BDISCALE	yes	38	35.6579	13.83352	.894	.374
	no	44	32.8636	14.35852	.896	.373

An independent sample t- test computed to compare the prevalence of depression among those women inmates in Kality Correctional Center. The result shows that there is no statistical

significant difference on both women inmate who have children  $t = .894$   $s = .374$  and on those women inmate who have no children  $t = .896$   $s = .373$  on the prevalence of depression. Since the scoring is relatively higher on those women inmate who have children ( $M = 35.658$ ) than those who have no children ( $M = 32.864$ ), the prevalence of depression is high on those women inmate who have children than those women inmate who have no children.

The data collected through interview shows that;

From those participants of the interview majority of them respond that the prevalence of depression is high among those women inmates who have children than those inmates who have no children. As the participants indicates the reason for the high prevalence of depression on those women inmate are the following;

- a. Those women inmate who have children worried about their children.

Those women who live in the correction center with their children worried because the correction center is not suitable for their children. The participant said that;

“The correction center budget 450 birr per month for one children, it is not sufficient to fulfill the need of our children.” So those women inmate became worried about their children because of their incapability to fulfill the need of the children.

The participant also said that “the services provided by the correction center doesn’t consider the need of our children for instance there exists school in the correction center but the school doesn’t provide education for our children who are living with us in the correction center because of this I am worried about my children this make me to be depressed.”

In addition to this one of the participants also said that “ even though there exist very limited recreational places in the Correction Center, those recreational places doesn’t design in a way that consider the needs of children rather from the beginning they are designed for women inmate not for children this make to be depressed.” Because of this those mother inmates worried about their children then they became vulnerable for depression than other inmates who have no children.

- b. There are inmates who have children outside the Correction Center. Those participants in the interview indicates that women who have children outside the Correction Center worried about their children. One of the participant said that “since I am the primary take care of my children when I am incarcerated, I have no a family who take care of my children so I am worried about my children because of this I am depressed.” Especially those women inmates who have no family may not have a person who take care of their children so those women inmate who have children outside the Correction Center worried about the fate of their children because of this they became depressed.

Generally the participant of the interview indicates that those women inmate who have children in the correction center as well as outside the Correction Center are more depressed than those women inmate who have no children.

**Table 6:One way ANOVA summery on the effect duration of stay on the prevalence of depression.**

Dependent variable	Independent variable	df	Mean Square	F	Sig.
BDISCALE	Duration of stay	3	427.121 186.881	2.286	.085

The analysis of variance used to show the prevalence of depression among those women inmates on the existing difference on their duration of stay in the Kality Correction Center. No statistically significant difference was found for the duration of stay on the prevalence of depression in Kality Correctional Center, [F (3, 80)= 2.286, P= .085] This result means that whether those women inmates stay in the correction center for short time or for a long period of time does not have difference on the prevalence of depression in the Kality Correction Center.

Most of the collected data through interview also shows that those women who are incarcerated for a long term is more depressed than those women inmate who are incarcerated for less than three years. The participants explains that those long term incarcerated women are more vulnerable for depression because of;

- a. Since those long term incarcerated women spent their time in the correction center for many years or life imprisonment, they became hopeless about their future. So when those inmates think that they become separated with their family for a long time in the correction center or throughout their life, they became depressed.

- b. The second reason explained by the participants for the high prevalence of depression on those long term incarcerated women said that “I lost my hope on the life I will have outside the correction environment this make me to be depressed.”The participant also indicates that because the fear that they may not get their property, they may fear that they may lose their status and they may not get guaranty for the existence of all what they have outside the Correction Center is the reasons for high prevalence of depression.

Generally from the data collected through interview we can conclude that the prevalence of depression among women inmate in the Kality Correction Center is high among those women inmates who have children than those women who have no children, on those younger inmates than those adults and on those long term incarcerated women than those women who are incarcerated for few years because of those factors listed above.

## **CHAPTER FIVE**

### **DISCUSSION**

#### **5.1 The prevalence of depression among women inmate in the Kality Correctional Center**

One of the objectives of the study is to know the prevalence of depression among women inmates in the Kality Correctional Center. The result of this study shows that 43(51.6%) of women inmate in the Kality Correctional Center experience severe depression. So half of those women inmates who are participant in the study experience severe level of depression. This finding is similar with other literature done in different countries.

The prevalence of depression in the correctional centers are not surprising rather it is highly prevalent. 45% of those offenders found in the correction center experience depression (Armour & Cherie, 2012). In addition to this two thirds of women in prison are suffering from a depression (Steadman et al., 2009). When we see its prevalence in Ethiopia Ministry of Justice (2009) reported that the prevalence of depression on women inmates in Ethiopia is 47%.

The case in the Kality Correctional Center is not different. Because the result of the study shows that there exist high prevalence of depression in Kality Correctional Center. So half of the participants in the Kality Correctional Center experience severe level of depression.

## **5.2 Risk factors for the prevalence of depression**

### **5.2.1 Age difference**

The result from the analysis of variance shows the nonexistence of significant statistical relationship between depression and age of women inmates. On the other hand, the result of one sample t-test shows that half of those participants 43 (51.6%) experience severe depression. Since the result from the demographic factor shows that 75% of the participants are below 34 year old, those women inmate who have age below 34 year experience severe depression than those women inmates who are above 34 years old. Therefore, the result shows that age difference have an impact for the prevalence of depression. This is similar with the result from the data collected through interview which shows the reason for the high prevalence of depression among those young inmates than adults. In addition to this, the research done before also indicates that the prevalence of depression is high among young women inmates than adults. Those inmates age 24 or younger had the highest rate of vulnerability than those inmates above age of 55 (James & Glaze, 2006). On the contrary a researches done before shows that Middle-aged women prisoners (31–40 years) were mainly vulnerable for depression than other age group (Khan et al, 2012).

### **5.2.2 Having children**

The result shows that there is no significant statistical difference on both women inmate who have children and on those women inmate who have no children. Even though the finding shows that there is no significant difference on the prevalence of depression, the scoring shows the existence of high prevalence of depression on those women inmate who have children than those who have no children. This result have similarity with the result that gathered through interview

which shows reason for the existence of high prevalence of depression among those women inmates who have children than those inmates who have no children. In addition to this the finding has similarity with the research done before which indicates imprisoned mothers are more vulnerable for depression as a consequence of concern for their children (Bastick & Townhead, 2008). Similarly, other studies also show that since those women inmates worried about their absent from their children and they worry about whether they will have custody of their children when they get out the Correction Center or not exposed them to be vulnerable for depression (Covington, 1998). A research also shows that having children is a factor for the vulnerability of women inmates for depression (Khan et al., 2012). In study done in Ethiopia also shows that the prevalence of depression is high among those mothers of young children than the general population (Tesfawet al., 2016).

### **5.2.3 Length of incarceration**

The result from the analysis of variance shows the nonexistence of significant difference on the prevalence of depression because of the existing difference on their duration of stay in Kality Correctional Center. This finding is similar with the socio- demographic factor because the result of the study shows that half of those women who were participated in the study experience severe depression and the socio- demographic factor shows from those participants 65% of those women inmate stay in the correction center from 6 month to 2 years therefore the prevalence of depression is high among those women inmate who stay in the correction center for less than two years.

A research done in other countries shows that women inmates became depressed at the time of their admission to prison because of different factors (Mukiza, 2014). This finding similar with the result of this study which shows that those women inmates are more depressed in the early

age of their imprisonment than those long term imprisonment. On the contrary there exist a research which show that long term incarcerated women depressed because they have feelings of guilt, fear, anxiety and alienation (Howard, 1999).

## CHAPTER SIX

### 6. SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

#### 6.1 Summary

This study provided initial steps by defining the correction center and by discussing about women offenders by referring those research works done in different countries including, Ethiopia. Then the study define depression and tries to review different research works done on the prevalence of depression on those women who are found in the Correctional Centers in different countries. After overviewing women offenders and reviewing the prevalence of depression in the whole world as well as in Ethiopia then the study give emphasis on the prevalence of depression on those women offenders in Kality Correction Center. As we understand from the data collected like other countries Correction Center there exist high prevalence of depression experience in Kality correction center. The result of the study shows that most of those women inmates who are participant in the study experience moderate to severe depression because of different reason.

This study is conducted to know the prevalence of depression on those women inmate in Kality Correctional Center. There are 84 women inmate participate in the study through systematic random sampling method who are above 18 years old. The study use both qualitative and quantitative methods. For the quantitative method the study use BDI which is adopted to measure the level of depression in the Kality Correctional Center. After adopting the instrument (BDI) pilot study conducted and the reliability result shows .886. Then after checking the instrument the data collection process started. After the data collected through questionnaire completed the data collected through questionnaire analyzed by using SPSS version 20 software application. The result shows that half of those women inmates who are participant in the study experience severe level of depression.

In this study three factors for the prevalence of depression are assessed. From those factors age of inmates are one of the factor that have an impact for the prevalence of depression. Since the finding of the study shows the existence of severe level of depression on those participants and the demographic factor shows that 75% of the participants are below 34 year old therefore most of those women inmate below 34 years old experience severe depression. Even though the result shows that the existing age difference doesn't have significant difference on the prevalence of depression, the socio- demographic factor shows the existing age difference have an impact on the prevalence of depression.

The second factor assessed in the study is the impact of having children for the prevalence of depression. The result of the study shows that even though there is no significant difference on the prevalence of depression, the scoring shows the existence of high prevalence of depression on those women inmate who have children than those who have no children.

The third factor assessed in the study is the impact of the length of incarceration for the prevalence of depression. Even though the result from the analysis of variance shows the nonexistence of significant difference on the prevalence of depression, the socio- demographic factor shows that there exist high prevalence of depression among those women inmate who stay in the correction center for less than two years.

This finding contradict with the research done before which shows the prevalence of depression is high among those women inmate who are incarcerated for a long term because those long term incarcerate women have feelings of guilt, fear, anxiety and alienation (Howard, 1999).

For the qualitative method of data collection interview prepared to know both the cause of depression on those women inmate in the Kality Correctional Center. The interview conducted

with those higher officials of the Kality Correctional Center, with those counselors of women inmate and with those women inmate themselves. Those participants for the study selected purposefully. The interview conducted with those selected participants the result shows that the prevalence of depression is high among those women inmates who have children than those inmates who have no children. Since the correction environment is not suitable for those children mother worried about their children because of this they became depressed, on the other hand, those mother inmate who have children outside the correction environment they worried about the future of their children they blame themselves for the problem that their children face because of this they became depressed than those women inmate who have no children. This result is similar with the result gain from the data collected through questionnaire.

The finding of the interview also shows that most of the data collected through interview also shows that the prevalence of depression is high among those young inmates than adults. Because those young inmates can educate, work, form a family and other things that will change their life done at the younger age but when they incarcerate they can't do what they want then they became depressed. So when they loss this life they became depressed.

In addition to this, those young inmate may use substance before incarceration then when they incarcerate they can't use substance then they became depressed. This result of the interview contradict with the result that gain from questionnaire which shows that age difference does not create significant difference for the prevalence of depression in those women inmates. The finding of the interview also shows that women who are incarcerated for a long term is more depressed than those women inmate who are incarcerated for less than three years. Since they incarcerate for a long time they became hopeless about their and they loss of hope on the life they have outside the correction environment, they became depressed than short term inmates.

This result also contradict with the result gain from questionnaire which shows that there exists no significant association among duration of stay of women inmate and prevalence of depression.

## **6.2 Conclusions**

Generally in this study the result that gain from the data collected through qualitative and quantitative method the researcher conclude that;

1. The result shows that half of those women inmates who were participated in the study experience severe level of depression.
2. Those women inmate who have children have statistically higher mean score on BDI scale than those inmates who have no children. So there exist high prevalence of depression on those women inmate who have children than those inmates who have no children.
3. Even though the result from the analysis of variance shows the non-existence of statistical difference by the existing age difference among those women inmates, the socio demographic factor shows that the impact of the existing age difference on the prevalence of depression. Because 75% of the participants are below 34 year old and half of the participants experience severe depression. To conclude the socio demographic factor shows the existing age difference have an impact for the prevalence of depression in Kality Correctional Center.
4. The result of the analysis of variance shows the non- existence of difference on the prevalence of depression by the existing difference in the correction center. On the contrary socio- demographic factor shows from those participants 65% of those women inmate stay in the correction center from 6 month to 2 years therefore those women inmates experience severe depression.

### 6.3 Recommendations

Since there exist prevalence of depression in Kality Correctional Center, with a view to come up with solution that help those depressed women offenders to solve their problem and in order to protect other offenders and finally in order to help the correction center to solve its problem and to attain its reformative and constructive purpose of the correction center the following general recommendations forwarded by the researcher:

1. The Kality Correction Center is not constructed for the purpose of Correction Center, rather it was designed for other purpose. But after some years it starts serving as a Correction Center without modification in a way that help to give service as a Correction Center. Even today when the number of women inmates became increase additional room built in a way that doesn't meet the needs of women inmate. It should have to be designed by taking into consideration the needs of women inmates who have problem of depression. Those depressed women inmates need especial treatments because of their conditions of life regarding the accommodation, classification, provisions of food and water, and their personal hygiene which have direct or indirect contribution for the prevalence of depression on women inmates in the Kality Correctional Center.
2. Even though those women inmates who have children live in a separate room with those pregnant women, the room and the correction environment is not suitable for those women inmates and for their children. In addition to this, the correction center provide service which amounts to 450 br. per month only for one children but other services such as education, recreational places and other facilities does not consider those inmates children this make women inmate to worry about the fate of their children than those

women inmate became depressed. So, those concerned bodies especially the correction administrators need to give attention for this issue and should have to give solution.

3. Even though there exist counseling service in the Correction Center, it is not sufficient especially when they face problem which is above the counselors' capacity. It is difficult and insufficient for those women inmates who have problem of depression to get the service on those health centers found outside the correction center. So those concerned bodies especially the Federal and the Kality Correction Administration take in to consideration to solve this problem.
4. From those different reasons that make women inmates to be vulnerable for depression one of the reason is lack of sufficient place that help those women inmates to enjoy in the Correction Center. So the Kality Correction Administration need to provide sufficient place and materials by taking in to consideration the interest of those women inmates in order to reduce the prevalence of depression.

Generally, administrators of the Federal as well as Kality Correction Administration, and counselors of the Kality Correction Administration expected to play their own role to help depressed women inmates to solve their problem.

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**Appendix-A**

ADDIS ABABA UNIVERSITY  
COLLEGE OF EDUCATION AND BEHAVIORAL STUDIES  
SCHOOL OF PSYCHOLOGY

Research title:- Prevalence and contributing factors of depression among women offenders in Kality Correction Center,

Addis Ababa

Dear respondents

This study is being conducted for the partial fulfillment of the requirement for master degree in counseling psychology from Addis Ababa University. This questionnaire is prepared to estimate the prevalence of depression on women offenders in Kality Correctional Center. The purpose of this questionnaire is to obtain data regarding your perception and feeling about the prevalence of depression in Kality Correctional Center. The study will provide recommendation based on the data collected in this manner.

The questionnaire will be filled based on the interest of respondents. You are not required to indicate your identity. I will like to thank you in advance for your cooperation.

Are you volunteer to participate      1. Yes      2. No

Data collector's name-----

Researcher's name – Tsigie Tefera phone no. -----

Socio- demographic information

Instruction: The following questions are prepared to get general information. Please indicate your answer by circling the letter.

Section 1

1. What is your age?

1.1 18-24 years old

1.2. 25-34 years old

1.3. 35-44 years old

1.4. 45-54 years old

1.5. 54 years and over

2. Nationality

- 2.1 Amhara
- 2.2 Orommo
- 2.3 Tigray
- 2.4 others

3. What is your marital status?

- 3.1 Single, never married
- 3.2 Married or domestic partnership
- 3.3 Widowed
- 3.4 Divorced
- 3.5 Separated
- 3.6 Others

4. Have you children?

- 1. Yes
- 2. No

5. If you have children how many children have you?

- 5.1 One children
- 5.2 Two
- 5.3 Three
- 5.4 Four
- 5.5 Five and above

6. Age of children

- 6.1 One
- 6.2 Two
- 6.3 Three
- 6.4 Four
- 6.5 Five and above

7. Religion

7.1 Orthodox

7.2 Muslim

7.3 Protestant

7.4 Others

8. Educational status

8.1 Illiterate

8.2 I can read and write

8.3 Elementary school completed

8.4 Secondary school completed

8.5 Collage and higher education

Section 2 information about the inmate

1. Have you detained before?

1.1 yes

1.2 no

2. The type of crime you are currently in the correction center?

2.1 Killings or Murders

2.2 Theft

2.3 Transfusion of drug

2.4 Corruption

2.5 Other

3. Are you convicted?

3.1 yes

3.2 no

4. If convicted, year of punishment is?

4.1 From six month to 3 years

4.2 From 3 years to 5 years

4.3 From 5 years to 10 years

4.4 More than 10 year

5. The period of stay in the correction center?

5.1 From 6 month to 2 years

5.2 From 2 years to 5 years

5.3 From 5 years to 10 years

5.4 Above 10 years

Appendix-B

የስነ ትምህር እና ባህሪ ጥናት ኮሌጅ

የሳይኮሎጂ ትምህርት ቤት

የጥናቱ ርዕስ- በአዲስ አበባ በቃሊቲ ከፍተኛ ጥበቃ ማረጋገጫ ቤት የሚገኙ ሴት ታራሚዎች የድብርት/ድብታ/ቁዝምት ችግር መኖሩን እና የችግሩን ስፋት ለመረዳት የቀረበ ጥናት ነው።

በመጀመሪያ በመጠይቁ ለመሳተፍ ፈቃደኛ ነዎት? 1. አዎ 2. አይደለሁም

የተከበራችሁ መጠይቁን የምትሞሉ ተሳታፊዎች

ይህ ጥናት ከአ/አበባ ዩኒቨርሲቲ ለስነ- ት/ት እና ባህሪ ጥናት ኮሌጅ/የሳይኮሎጂ ትምህርት ቤት የድብርት/ድብታ ቁዝምት ችግር መኖሩን እና የችግሩን ስፋት ለማወቅ የተዘጋጀ ነው። የዚህ መጠይቅ አላማ በቃሊቲ ማረጋገጫ ቤት ውስጥ ያሉ ሴት ታራሚዎች ስለ ድብርት/ድብታ ቁዝምት ችግር የሚለማቸውን ስሜት እና እይታ ለመረዳት የተዘጋጀ ነው። ጥናቱ በዚህ መንገድ የተሰበሰቡ መረጃዎችን መሰረት በማድረግ የመፍትሄ አቅጣጫዎችን ያስቀምጣል።

መጠይቁን የሚያስሞሉት ስም -----

ጥናቱን የሚያጠኑት ስም -----

መመሪያ:- እባክዎ እያንዳንዱን ጥያቄ ትክክለኛው ነው ያሉትን መልስ በማክበብ ወይም ባዶ ቦታው ላይ በመሙላት ይመልሱ።

አጠቃላይ የተሳታፊ መረጃዎች

ክፍል 1

1. እድሜ

- 1 ከ18-24 ዓመት
- 2 25-34 ዓመት
- 3 35-44 ዓመት
- 4 45-54 ዓመት
- 5 ከ54 ዓመት በላይ

2. ብሄር

- 1. አማራ
- 2. አሮሞ
- 3. ትግሬ
- 4. ሌሎች

3. የጋብቻ ሁኔታ

- 1. ያላገባች
- 2. ያገባች
- 3. አግብታየፈታች
- 4. አግብታ የሞተባት
- 5. ሌላ

4. ልጅ አለሽ?

- 1. አዎ
- 2. የለኝም

5. ስንት ልጅ አለሽ?

- 1 አንድ ልጅ
- 2 ሁለት ልጅ
- 3 ሶስት ልጅ

- 4 አራት ልጅ
- 5 አምስት እና ከዚያ በላይ
  - 6. የልጆችሽ እድሜ
    - 1 እስከ 1አመት ከ6 ወር
    - 2 1አመት ከ6 ወር እስከ 5 አመት
    - 3 ከ5 አመት እስከ 10 አመት
    - 4 ከ18 አመት በላይ

- 7. ሀይማኖት
  - 1. ኦርቶዶክስ
  - 2. ሙስሊም
  - 3. ፕሮቴስታንት
  - 4. ሌሎች
    - 8. የትምህርት ሁኔታ
      - 1. ያልተማረች
      - 2. ማንበብእናመጻፍየምትችል
      - 3. አንደኛ ደረጃ
      - 4. ሁለተኛደረጃ
      - 5. ኮሌጅእና ከዚያ በላይ

ክፍል 2.ታራሚዋን የተመለከተ መረጃ

- 1. ከዚህ በፊት ታስረሽ ታውቂያለሽ ?
  - 1. አዎ
  - 2.አላውቅም
    - 2. አሁን ማረሚያ ቤት የገባሽበት የወንጀል አይነት
      - 1 ግድያ/ነፍስ ማጥፋት/
      - 2 ስርቆት
      - 3 እፅ ማዘዋወር
      - 4ሙስና
      - 5ሌሎች
        - 3. ተፈርዶብሻል ?
          - 1 አዎ
          - 2 ገና አልተፈረደብኝም
            - 4. የተፈረደብሽ ከሆነ ስንት አመት ተፈረደብሽ ?
              - 1 ከ6 ወር እስከ 1 ዓመት
              - 2 ከ6 ወር እስከ 3 ዓመት
              - 3 ከ3 ዓመት እስከ 5 አመት
              - 4 ከ5 ዓመት እስከ 10 ዓመት
              - 5 ከ10 ዓመት በላይ
            - 5. በማረሚያ ቤቱ ውስጥ የቆየሽበት ጊዜ
              - 1 ከ6 ወር እስከ 2 ዓመት
              - 2 ከ2 እስከ5 አመት
              - 3 ከ5 እስከ10 አመት
              - 4 ከ10 ዓመት በላይ

## Appendix-C

### The English version of Beck's Depression scale

#### Beck's Depression Scale ADDIS ABABA UNIVERSITY

Instruction: this questionnaire consists of 21 group of statements. Please read each group carefully, and then pick out the one statement in each group that best describe the way you have been feeling during the past two weeks, including today, circle the number you have picked. If several statements in the group seems to apply equally well, circle the highest number for that group. Be sure that you do not chose more than one statement for any group.

#### 1. Sadness

- 0 I do not feel sad.
- 1 I feel sad
- 2 I am sad all the time and I can't snap out of it.
- 3 I am so sad and unhappy that I can't stand it.

#### 2. Pessimism

- 0 I am not particularly discouraged about the future.
- 1 I feel discouraged about the future.
- 2 I feel I have nothing to look forward to.
- 3 I feel the future is hopeless and that things cannot improve.

#### 3. Past failure

- 0 I do not feel like a failure.
- 1 I feel I have failed more than the average person.
- 2 As I look back on my life, all I can see is a lot of failures.
- 3 I feel I am a complete failure as a person.

#### 4. Loss of Pleasure

- 0 I get as much satisfaction out of things as I used to.
- 1 I don't enjoy things the way I used to.
- 2 I don't get real satisfaction out of anything anymore.
- 3 I am dissatisfied or bored with everything.

#### 5. Guilty filling

- 0 I don't feel particularly guilty
- 1 I feel guilty a good part of the time.
- 2 I feel quite guilty most of the time.
- 3 I feel guilty all of the time.

#### 6. Punishment feeling

- 0 I don't feel I am being punished.
- 1 I feel I may be punished.
- 2 I expect to be punished.
- 3 I feel I am being punished.

7. Self- Dislike

- 0 I don't feel disappointed in myself.
- 1 I am disappointed in myself.
- 2 I am disgusted with myself.
- 3 I hate myself.

8. Self- criticism

- 0 I don't feel I am any worse than anybody else.
- 1 I am critical of myself for my weaknesses or mistakes.
- 2 I blame myself all the time for my faults.
- 3 I blame myself for everything bad that happens.

9. Suicidal thoughts or wishes

- 0 I don't have any thoughts of killing myself.
- 1 I have thoughts of killing myself, but I would not carry them out.
- 2 I would like to kill myself.
- 3 I would kill myself if I had the chance.

10. Crying

- 0 I don't cry any more than usual.
- 1 I cry more now than I used to.
- 2 I cry all the time now.
- 3 I used to be able to cry, but now I can't cry even though I want to.

11. Agitation

- 0 I am no more irritated by things than I ever was.
- 1 I am slightly more irritated now than usual.
- 2 I am quite annoyed or irritated a good deal of the time.
- 3 I feel irritated all the time.

12. Loss of interest

- 0 I have not lost interest in other people.
- 1 I am less interested in other people than I used to be.
- 2 I have lost most of my interest in other people.
- 3 I have lost all of my interest in other people.

13. Indecisiveness

- 0 I make decisions about as well as I ever could.
- 1 I put off making decisions more than I used to.
- 2 I have greater difficulty in making decisions more than I used to.
- 3 I can't make decisions at all anymore.

14. Worthlessness

- 0 I don't feel that I look any worse than I used to.
- 1 I am worried that I am looking old or unattractive.
- 2 I feel there are permanent changes in my appearance that make me look unattractive
- 3 I believe that I look ugly.

15. Loss of energy

- 0 I can work about as well as before.
- 1 It takes an extra effort to get started at doing something.
- 2 I have to push myself very hard to do anything.
- 3 I can't do any work at all.

16. Changes in a sleeping pattern

- 0 I can sleep as well as usual.
- 1 I don't sleep as well as I used to.
- 2 I wake up 1-2 hours earlier than usual and find it hard to get back to sleep.
- 3 I wake up several hours earlier than I used to and cannot get back to sleep.

17. Irritability

- 0 I don't get more tired than usual.
- 1 I get tired more easily than I used to.
- 2 I get tired from doing almost anything.
- 3 I am too tired to do anything.

18. Change in Appetite

- 0 My appetite is no worse than usual.
- 1 My appetite is not as good as it used to be.
- 2 My appetite is much worse now.
- 3 I have no appetite at all anymore.

19. Concentration Difficulty

- 0 I have no lost much weight, if any, lately.
- 1 I have lost more than five pounds.
- 2 I have lost more than ten pounds.
- 3 I have lost more than fifteen pounds.

20. Tiredness or fatigue

- 0 I am no more worried about my health than usual.
- 1 I am worried about physical problems like aches, pains, upset stomach, or constipation.
- 2 I am very worried about physical problems and it's hard to think of much else.
- 3 I am so worried about my physical problems that I cannot think of anything else.

21. Loss of interest in sex

- 0 I have not noticed any recent change in my interest in sex.
- 1 I am less interested in sex than I used to be.
- 2 I have almost no interest in sex.
- 3 I have lost interest in sex completely.

THE QUESTIONNAIRES IS COMPLETED

THANK YOU

Appendix-D

የቤክ የድብርት/የድብታ/የቁዝምት መቆጣጠሪያ

አዲስ አበባ ዩኒቨርሲቲ

የሥነ- ትምህርት እና ባህሪ ጥናት ኮሌጅ

የሳይኮሎጂ ትምህርት ቤት

መመሪያ:- ይህ መጠይቅ በ21 አይነት ጥያቄዎች የተከፈሉ አረፍተ ነገሮች አሉት። እባክዎ እያንዳንዱን ጥያቄ በጥንቃቄ በማንበብ በእያንዳንዱ ጥያቄ ውስጥ ከተዘረዘሩት ምላሾች ውስጥ ባለፉት ሁለት ሳምንታት ዛሬን ጨምሮ የሚሰማዎትን ስሜት በደንብ የሚገልጸውን መልስ ይምረጡ። ከዚያም የመረጡትን መልስ ያክብቡ። በእያንዳንዱ ጥያቄዎች ውስጥ ከተዘረዘሩት አማራጮች ውስጥ ከአንድ በላይ አማራጮች ስሜትዎን የሚገልጽ ሆኖ ካገኙት በጣም በከፍተኛ ሁኔታ ስሜትዎን የሚገልጸውን መልስ መርጠው ያክብቡ። በቀረቡት ጥያቄዎች ውስጥ 16ኛ እና 18ኛ ላይ ያሉትን ጥያቄዎች ጨምሮ ከተዘረዘሩት ምርጫዎች ውስጥ ከአንድ በላይ ምርጫ አለመምረጥዎን ያረጋግጡ።

በዚህ ጥናት ለመሳተፍ ፈቃደኛ ነዎት?      1. አዎ ፈቃደኛ ነኝ      2. ፈቃደኛ አይደለሁም

1.ሐዘን

- 0. ሀዘን አይሰማኝም።
- 1. ብዙ ጊዜ ሀዘን ይሰማኛል።
- 2. ሁል ጊዜ አዝናለሁ።
- 3. እኔልሽከመው ከምችለው በላይ ሀዘን ይሰማኛል። ደስተኛም አይደለሁም።

2.ለራሰዎት ያለዎት እይታ

- 0. በተለይስለወደፊቱ ህይወቴ ተስፋ-አልቆርጥም።
- 1. ስለወደፊቱተስፋ የመቁረጥ ስሜት ይሰማኛል።
- 2. ለመኖር እንድንጓ የሚያደርግ ምንም ነገርእንደሌለኝይሰማኛል።
- 3. የወደፊቱጊዜተስፋየሌለውእናነገሮችሊሻሻሉአንደማይችልይሰማኛል።

3. ስላለፈ ውድቀት

- 0. እንደተሰናከልኩ(እንደወደኩ) አይሰማኝም።
- 1. መውደቅ ከነበረብኝ በላይ ወድቄአለሁ።
- 2. ሕይወቴንመለስብዬስመለከት ብዙ ጊዜ እንደተሰናከልኩ (እንደወደኩ) ነው የሚታየኝ።
- 3. እንደ ሰው ሳየው በውድቀት የተሞላሁ እንደሆንኩ ይሰማኛል።

4. ደስታንማጣት

- 0. ቀድሞ ያዝናኑኝ ከነበሩ ነገሮች በበለጠ ሁኔታ የበለጠ ደስታ አሁን አግኝቶባቸዋለሁ።
- 1. ቀድሞ የምጠቀምባቸው ነገሮች አያዝናኑኝም።
- 2. ለመዝናናት ከምጠቀምባቸው ነገሮች የማገኘው ደስታ በጣም ትንሽ ነው።
- 3. ለመዝናናት ከምጠቀምባቸው ነገሮች ምንም አይነት ደስታ ማግኘት አልችልም።

5. የጥፋተኝነት-ስሜት

- 0. የጥፋተኝነት-ስሜት-የሚሰማኝ የተለየ ጊዜ የለም።
- 1. ስለሰራጋቸው እና መስራት ስላለብኝ ብዙ ነገሮች የጥፋተኝነት-ስሜት-ይሰማኛል።
- 2. አብዛኛውን ጊዜ የጥፋተኝ እንደሆንኩ ይሰማኛል።
- 3. ሁልጊዜ የጥፋተኝነት-ስሜት ይሰማኛል።

6. የመቀጣት-ስሜት

- 0. እንደተቀጣሁ አይነት ስሜት አይሰማኝም።
- 1. ልቀጣ እችል እንደ ነበር ይሰማኛል።
- 2. እንደምቀጣ እጠብቃለሁ።
- 3. እንደተቀጣሁ ይሰማኛል።

7. ራስን አለመውደድ

- 0. ስለራሴ የሚሰራኝ ስሜት እንደ ሁልጊዜው ተመሳሳይ ነው።
- 1. በራሴ ያለኝን መተማመን አጥቸዋለሁ።
- 2. በራሴ እናደዳለሁ።
- 3. ራሴን እጠላለሁ።

8. ራስን የመንቀፍ እና የመተቸት-ስሜት

- 0. ከሁልጊዜው የተለየ እራሴን አልወቅስም ወይም አልቃወምም።
- 1. ከሁልጊዜው በበለጠ ለራሴ ወሳኝ ነኝ።
- 2. ለሁሉም ለስህተቶቼ ራሴን እወቅሳለሁ።
- 3. ለሚከሰቱ መጥፎ ነገሮች ሁሉ እራሴን እወቅሳለሁ።

9. ራስን በራስ የማጥፋት ሐሳብ ወይም ሞት

- 0. እራሴን የማጥፋት ምንም ሀሳብ የለኝም።
- 1. እኔ እራሴን ለማጥፋት ሐሳብ አለኝ ነገር ግን በተግባር አልፈጸምኳቸውም።
- 2. ራሴን መግደል እፈልጋለሁ።
- 3. እድል ባገኝ ኖሮ እራሴን እገድል ነበር።

10. ማልቀስ

- 0. ከዚህ በኋላ ከሁልጊዜው የተለየ አላለቅስም።
- 1. ከሁልጊዜው የበለጠ አለቅሳለሁ።
- 2. በእያንዳንዱ ትንንሽ ነገር አለቅሳለሁ።
- 3. እያለቀስኩ እንደሆነ ይሰማኛል ግን ማልቀስ አልቻልኩም።

11. የመንፈስ መረበሽ

- 0. እንደበፊቱ አልጨነቅም።
- 1. አሁን ከተለመደው የበለጠ እጨነቃለሁ።
- 2. አሁንም በጣም እጨነቃለሁ እና መረጋጋት ከብደኛል።
- 3. ወደ ፊት መሄድ እና የሆነ ነገር ማድረግ እንዳለብኝ እያሰብኩ በጣም እጨነቃለሁ።

12. የፍላጎት ማጣት

- 0. ለሌሎች ሰዎች ወይም ለነገሮች/ለድርጊቶች/ ያለኝ ፍላጎት እንዳለ ነው።
- 1. ከበሬቱ በተለየ ለሌሎች ሰዎች ወይም ለነገሮች ያለኝ ፍላጎት ቀንሷል።
- 2. ለሌሎች ሰዎች ወይም ለነገሮች የነበረኝን ብዙ ፍላጎት አሁን አጥቸዋለሁ።
- 3. ለምንም ነገር ፍላጎት የለኝም።

13. መወሰን አለመቻል

- 0. ከበሬቱ በተሻለ ውሳኔዎችን እወስናለሁ።
- 1. እንደ ሁልጊዜው ውሳኔዎችን መወሰን ከባድ ሆኖ አግኝቸዋለሁ።
- 2. እንደ በሬቱ ውሳኔዎችን ለመወሰን በጣም ከባድ ሆኖብኛል።
- 3. ማንኛውንም ውሳኔ ለመወሰን አልችልም።

14. የዋገ ቢስነት ስሜት

- 0. አልጠቅምም ብዬ አላስብም።
- 1. እራሴን እንደሚጠቅም ሰው ወይም ዋጋ እንዳለው ሰው አድርጌ አልገምተውም።
- 2. ከሌላው ሰው ጋር ራሴን ሳወዳድረው የበለጠ ጠቃሚ እንደሆንኩ ይሰማኛል።
- 3 እኔምንም አልጠቅምም።

15. አቅምን ማጣት

- 0. ከበሬቱ የበለጠ አቅም አለኝ።
- 1. ከበሬቱ ያነሰ አቅም ነው ያለኝ።
- 2. ብዙ ስራ ለመስራት የሚያስችል በቂ አቅም የለኝም።
- 3. ማንኛውንም ነገር ለመስራት የሚያስችል በቂ አቅም የለኝም።

16. የእንቅልፍ ሁኔታ መለወጥ ስሜት

- 0. የእንቅልፍ ሰዓቴን የመቀየር ልምድ የለኝም።
- 1ሀ. ከበሬት ከምተኛው የበለጠ ሰዓት ነው የምተኛው።
- 1ለ. በሬት ከምተኛው ያነሰ ሰዓት ነው የምተኛው።
- 2ሀ. በሬት ከምተኛው እጅግ የበለጠ ሰዓት ነው የምተኛው።
- 2ለ. በሬት ከምተኛው እጅግ ያነሰ ሰዓት ነው የምተኛው።
- 3ሀ. አብዛኛውን ቀን እተኛለሁ።
- 3ለ. በሬት ከምነቃበት ሰዓት ከ1-2 ሰዓታት ቀድሜ ስለምነቃ ተመልሼ ብተኛ እንቅልፍ አይወስደኝም።

17. መነጫነጭ

- 0. ከሁልጊዜው የተለየ አልነጫነጭም።
- 1. ከቀድሞው ይበልጥ በቀላሉ እነጫነጫለሁ።
- 2. ከሁልጊዜው በበለጠ እነጫነጫለሁ።
- 3. ሁል ጊዜም እነጫነጫለሁ።

18. የምግብ ፍላጎት ለውጦች

- 0. የምግብ ፍላጎቴ ላይ ምንም አይነት ለውጥ አይቸ አላውቅም።
- 1ሀ. የምግብ ፍላጎቴ ከቀድሞው በመጠኑ ቀንሷል።

- 1ለ. የምግብፍላጎቴከቀድሞው በመጠኑ ጨምሯል።
- 2ሀ. የምግብፍላጎቴከቀድሞው በጣም ቀንሷል።
- 2ለ. የምግብፍላጎቴከቀድሞው በጣም ጨምሯል።
- 3ሀ. በጭራሽ ምንም አይነት የምግብ ፍላጎት የለኝም።
- 3ለ. ሁልጊዜም ምግብ መብላት እፈልጋለሁ

19. ሀሳብን ለመሰብሰብ መቸገር

- 0. ከምንጊዜውም በበለጠ ሀሳቤን መሰብሰብ እችላለሁ።
- 1. እንደ ሁልጊዜው ሀሳቤን መሰብሰብ አልችልም።
- 2. ማንኛውም ነገር ላይ ሀሳቤን ሰብስቤ ለረጅም ጊዜ መቆየት ይከብደኛል።
- 3. ምንም ነገር ላይ ሀሳቤን መሰብሰብ አልችልም።

20. ድካም

- 0. ከሁልጊዜው የተለየ አይደክመኝም።
- 1. ከሁልጊዜው በበለጠ በጣም በቀላሉ ይደክመኛል።
- 2. ቀድሞ እሰራቸው የነበሩ ብዙ ነገሮችን ለመስራት በጣም ይደክመኛል።
- 3. ቀድሞ እሰራቸው የነበሩ አብዛሀኞቹን ነገሮችን ለመስራት በጣም ይደክመኛል።

21. የጾታ ግንኙነትፍላጎትማጣት

- 0. በቅርቡ በጾታ ግንኙነት ፍላጎቴ ላይ የተፈጠረ ለውጥ ስለመኖሩ አላስተዋልኩም።
- 1. ከቀድሞው በተለየ ለጾታ ግንኙነት ያለኝ ፍላጎት ቀንሷል።
- 2. ለጾታ ግንኙነትምንምዓይነትፍላጎትየለኝም ማለት ይቻላል።
- 3. ለጾታግንኙነትን ምንም አይነት ፈላጎት የለኝም።

ከቃሊቲ ከፍተኛ ጠበቃ ማረሚያ ቤት ከፍተኛ ሀላፊዎች ፣ ከቃሊቲ ሴት ታራሚዎች እንዲሁም ከማረሚያ ቤቱ የስነ-ልቦና ባለሙያዎች ጋር የቃል መጠይቅ ለማድረግ የተዘጋጀ መጠይቅ

በቃል መጠይቁ ለመሳተፍ ፈቃደኛ ነዎት 1.አዎ ፈቃደኛ ነኝ 2. ፈቃደኛ አይደለሁም

ለቃልመጠይቅ የሚመሩ ንጥያቄዎች

የተከበራችሁ የቃልመጠይቁ ተሳታፊዎች

የተዘጋጁት ንጥያቄዎች በቃሊቲ ማረሚያ ቤት የድብርት/ድብታ ቁዝምት ችግር መኖሩን እና የችግሩን ስፋት ለማወቅ መረጃ ለማሰባሰብ የተዘጋጁ ንጥያቄዎች ናቸው።

ቃልመጠይቁ የተዘጋጀው በቃሊቲ ማረሚያ ቤት የድብርት/ድብታ ቁዝምት ችግር መኖሩን እና የችግሩን ስፋት ለማወቅ እና አላማውም ለትምህርት አላማ እንዲለሉ ላይ አላማ አለመሆኑን ተረድታችሁት ክክለኛውን እና የምታምኑበትን መረጃ በትሰጡን ለዚህ ህጥናት አላማ መሳካት ትልቅ አስተዋጽኦ ያለው በመሆኑ እንድትተባበሩን እንጠይቃለን።

በመሆኑም ለቃሊቲ ከፍተኛ ጥበቃ ማረሚያ ቤት ከፍተኛ ሀላፊዎች እንዲሁም ለቃሊቲ ሴት ታራሚዎች የተዘጋጀው እና የስነ-ልቦና ባለሙያዎች የተዘጋጀ ቃልመጠይቅ እንደሚከተለው ቀርቧል፡

**በቅድሚያ እና መሰጠጥ ጥያቄ**

ሀ/ የታራሚዎች ምደባ

- 1. እድሜን፣
  - ልጅ ያላቸው መሆኑን እና ማረሚያ ቤት ውስጥ የቆዩት ሁለት ንዑስ ጊዜ እርዝማኔ መሰረት ባደረገ ሁኔታ በማረሚያ ቤቱ ውስጥ ተለየቦታ ወይም ክፍል እንድትሆኑ የምትመደቡበት አሰራር አለ?

ለ/ የታራሚዎች መኖሪያ

- 2. የማረሚያ ቤቱ አሰራር የሴት ታራሚዎችን ፍላጎት መሰረት ባደረገ መልኩ ተሰራገው?
- 3. በማረሚያ ቤት ውስጥ ሴት ታራሚዎች ጊዜያቸውን የሚያሳልፉበት እና የሚዘናኑበት ቦታ አለ?
- 4. በማረሚያ ቤት ውስጥ በግልነት ወይስ በጋራ መኖሪያ ክፍሎች የተሰጧችሁ?
- 5. የመኖሪያ ክፍሎቹ የተሰጣችሁ በጋራ ከሆነ፣ የተሰጣችሁ ክፍል እና የታራሚው ቁጥር ተመጣጣኝ ነው?
- 6. ተመጣጣኝ አይደለም የሚል ከሆነ፣ የድብርት/ድብታ ቁዝምት ችግር እንዲፈጠር/እንዲባባስ አስተዋጽኦ አያደርግም?
- 7. የድብርት/ድብታ ቁዝምት ችግር ያለባቸው ሴቶች ታራሚዎች ካሉ ከሌሎች ታራሚዎች በተለየ ሁኔታ እንክብካቤ ያገኛሉ ወይስ አያገኙም?
- 8. ልጅ ያላቸው ሴት ታራሚዎች ከሌሎች በተለየ ሁኔታ እንክብካቤ ይደረግላቸዋል?

ሐ/ ሴት ታራሚዎች ህክምና የማግኘት ሁኔታ

- 9. የድብርት/ድብታ ቁዝምት ችግር ላለባቸው ሴት ታራሚዎች የስነ-ልቦና አማካሪዎች አሉ?
- 10. የስነ-ልቦና አማካሪዎች ከሌሎች አገልግሎቶች ከየት ያገኛሉ?
- 11. የድብርት/ድብታ ቁዝምት ችግር ላለባቸው ሴት ታራሚዎች በማረሚያ ቤቱ ውስጥ ሆነው ጭካላ የህክምና ተቋማት የስነ-ልቦና የማማከር አገልገሎት በነጻ ያገኛሉ ወይስ ከፍለው ነው የሚታከሙት?
- 12. ከፍለው ከሆነ ለህክምና የሚሆን የገንዘብ አቅም የሌላቸው ሴት ታራሚዎች ማረሚያ ቤቱ ምን ያደርግላቸዋል?

መ/ ታራሚዎች ከሌተሰብጋር የሚገናኙበት ሁኔታ

- 13. ሴት ታራሚዎች በነጻነት እና ያለ ቁጥጥር ከሌተሰብጋቸው ጋር እንዲገናኙ እና በነጻነት እንዲያወሩ ይደረጋል?

THE INTERVIEWS QUESTIONS CONDUCTED WITH HIGHER ADMINISTRATOR OF THE KALITY CORRECTION ADMINISTRATION, COUNSELORS AND WOMEN OFFENDERS IN THE KALITY CORRECTION CENTER

Are you volunteer to participate in this interview? 1. Yes 2. No

Interviews Guide Questions

Dear respondents

The set of questions are prepared to gather information on the prevalence of depression in Kality Correction Center.

Since the interview conducted to know the prevalence of depression in Kality Correction Center, make sure that the responses you give are for academic purpose and not for any other reasons/ objectives. Thus, your cooperation in giving genuine and reliable information will contribute highly to the achievement of the objectives of this study.

As Such, the questions of the interviews conducted with the key administrators of Kality Correction Administrators, counselors and women offenders in Kality Correction Center are provided as follow.

**Thank you in advance!**

Name of inmate----- Age----- Sex----- Nationality----- Religion----- Married/

Unmarried----- Has child/children----- Cause of imprisonment-----

A. Categorizations of inmates

1. Is there any categories of inmates kept in separate institutions or parts of institutions taking in to account their age, having children and length of incarceration?

B. Inmates Accommodations

2. Is the correction center designed differently, that take in to consideration the need of women inmate?
3. Is there any place that help inmates to spend their time or that help them for pleasure?
4. Do rooms or classes provided for you in personal or in group?
5. If it is given in group, the number of prisoners and the dorm given for them balance each other?
6. If it is imbalance, is it not contribute for the prevalence of depression among inmates?
7. If there exist depressed inmates, are they treated differently or not?
8. Those inmate mothers who have children treat differently or not?

c. Inmates access to medical services

9. If there is depressed women, is there any counselors?
10. If no, where are they get the service?
11. Are those depressed women getting free counseling service both at normal and referral level?
12. If the inmates have no money for counseling service fee, what the correction center do for those inmates?

C. Inmates' contact with their Family

13. Are inmates freely meet without supervisions and controls their families, talk to each other freely?