









ORIGINAL

## Perspectives on Mental Health Challenges and Needs: A Qualitative Study of Adolescents in Incarceration

### Perspectivas sobre los desafíos y necesidades de la salud mental: un estudio cualitativo de adolescentes encarcelados

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#### ABSTRACT

**Introduction:** the global community is increasingly recognizing the importance of mental health. However, adolescents in correctional institutions are often overlooked and do not have sufficient access to the mental health services they need. These young individuals have the same right to proper care and support. This study aims to explore the challenges and needs related to adolescent mental health while serving sentences in correctional facilities.

**Method:** this study utilized a qualitative research design with a phenomenological approach to explore experiences within the prison system. Participants were selected using purposive sampling based on specific criteria, resulting in 30 individuals: nine adolescent inmates, eight caregivers, five nurses, and eight prison officers. The characteristics of participants were analyzed using frequency distribution and measures of central tendency. Qualitative data from interviews were examined through thematic analysis to identify key themes and patterns reflecting the complex realities of those in the prison environment.

**Results:** this study identified four themes: 1) Transition experience during legal proceedings, 2) Risk factors for adolescent mental health problems, 3) Protective factors of adolescent development, and 4) The need to handle mental health problems.

**Conclusion:** incarceration creates significant psychological stress for adolescents, contributing to anxiety and mental health issues. Factors such as violence during arrest, stigma, and isolation worsen these problems. However, family support, education, and positive activities can help. Comprehensive mental health interventions, including regular check-ups, are essential for the well-being of detained adolescents.

**Keywords:** Adolescent; Incarceration; Mental Health; Protective Factors; Risk Factors; Qualitative Research.

#### RESUMEN

**Introducción:** la comunidad mundial reconoce cada vez más la importancia de la salud mental. Sin embargo, los adolescentes que se encuentran en instituciones penitenciarias suelen ser ignorados y no tienen acceso suficiente a los servicios de salud mental que necesitan. Estos jóvenes tienen el mismo derecho a recibir atención y apoyo adecuados. Este estudio tiene como objetivo explorar los desafíos y las necesidades relacionadas con la salud mental de los adolescentes que cumplen condena en centros penitenciarios.

**Método:** este estudio utilizó un diseño de investigación cualitativa con un enfoque fenomenológico para explorar las experiencias dentro del sistema penitenciario. Los participantes fueron seleccionados mediante

un muestreo intencional basado en criterios específicos, lo que resultó en 30 individuos: nueve reclusos adolescentes, ocho cuidadores, cinco enfermeras y ocho funcionarios de prisiones. Las características de los participantes se analizaron utilizando la distribución de frecuencias y medidas de tendencia central. Los datos cualitativos de las entrevistas se examinaron mediante un análisis temático para identificar temas y patrones clave que reflejaran las realidades complejas de quienes se encuentran en el entorno penitenciario.

**Resultados:** este estudio identificó cuatro temas: 1) Experiencia de transición durante los procedimientos legales, 2) Factores de riesgo para los problemas de salud mental de los adolescentes, 3) Factores protectores del desarrollo de los adolescentes y 4) La necesidad de manejar los problemas de salud mental.

**Conclusión:** el encarcelamiento genera un estrés psicológico significativo en los adolescentes, lo que contribuye a la ansiedad y a los problemas de salud mental. Factores como la violencia durante el arresto, el estigma y el aislamiento empeoran estos problemas. Sin embargo, el apoyo familiar, la educación y las actividades positivas pueden ayudar. Las intervenciones integrales de salud mental, incluidos los controles regulares, son esenciales para el bienestar de los adolescentes detenidos.

**Palabras clave:** Adolescente; Encarcelamiento; Salud Mental; Factores de Protección; Factores de Riesgo; Investigación Cualitativa.

## INTRODUCTION

Mental health problems in adolescents are a global issue that is getting more attention.<sup>(1,2)</sup> However, the same attention has not been fully paid to adolescents who are in conflict with the law and are serving a period of detention.<sup>(3,4)</sup> In fact, adolescents who are in conflict with the law have a higher risk of developing mental health problems than the general adolescent population.<sup>(5,6,7)</sup> This group of adolescents often faces social stigma<sup>(7)</sup> and limited access to mental health services, so their mental health problems are often overlooked.<sup>(8,9,10)</sup> Likewise, research that discusses psychosocial responses, coping strategies, risk factors for mental health problems, protective factors, and the need for adolescent mental health in juvenile prisons are still very limited.

Mental health issues among adolescent inmates are a serious concern.<sup>(8,11)</sup> It is estimated that 90,8 % of juvenile prisoners have at least one psychiatric disorder, with 75,1 % experiencing psychiatric comorbidities.<sup>(3,12)</sup> Common mental health problems in this population include depression, anxiety, post-traumatic stress disorder (PTSD), suicidal thoughts, behavioral disorders, and substance dependence.<sup>(3,12,13,14,15)</sup> Several factors contribute to the high prevalence of mental health issues among adolescents in prisons. These include deviant peer relationships, inadequate parental supervision, and a lack of moral involvement.<sup>(13)</sup> Additionally, factors such as childhood trauma, a family history of mental disorders, substance abuse, traumatic experiences, poor conditions of incarceration, and a lack of social support can exacerbate these mental health problems.<sup>(4,16,17,18)</sup>

Adolescents face significant mental health challenges, especially during periods of punishment. While various risk factors contribute to these issues, protective elements like rehabilitation programs, family support, and access to mental health services can help reduce risks.<sup>(19)</sup> It is essential to address the mental health needs of adolescents in prisons with comprehensive services, including screenings,<sup>(7,8,13)</sup> education,<sup>(20)</sup> and awareness about social support.<sup>(21,22)</sup> Improving detention conditions is also important.<sup>(23)</sup> Counseling, psychotherapy, and medical treatment are vital for helping adolescents address their mental health challenges.<sup>(24,25)</sup> By prioritizing their mental health, we can support their recovery and reintegration into society as healthier individuals.

In Indonesia, the Regulation of the Minister of Health No. 25 of 2014 requires correctional institutions to provide mental health services to inmates,<sup>(26)</sup> but compliance is inconsistent. Challenges include a lack of human resources, insufficient funding, and no specific screening standards for adolescent mental health in prisons.<sup>(27)</sup> To overcome these issues, it is crucial to enhance human resources, establish screening standards, train staff, and develop effective intervention programs. These measures will help ensure that all adolescents in prison have access to essential mental health support for a brighter future.

This study aims to explore the problems and needs related to adolescent mental health while serving a sentence in a juvenile prison. This qualitative research serves as a basis for understanding the mental health challenges faced by adolescent inmates in Indonesian correctional institutions. It explores their experiences, identifies risk and protective factors, and assesses their mental health service needs. The findings will help develop effective intervention programs and inform necessary policy changes.

## METHOD

### Design

This study uses a qualitative, phenomenological approach to explore social phenomena by understanding

human behavior from informants' perspectives.<sup>(28)</sup> It analyzes data from in-depth interviews that reflect the real-life experiences of adolescents in prison detention. Data triangulation involved families, nurses, and prison officers. The research was conducted in children's prisons in South and West Sulawesi, Indonesia.

### Participants

The research involved adolescent inmates, caregivers, nurses, and prison officers selected through purposive sampling. Inclusion criteria for adolescents included being 12-17 years old, having a family, being in a children's prison within the last 3 months, and speaking Indonesian. The study excluded adolescents set for release or transfer and those without family visits. Family inclusion criteria required members to be the adolescent's closest relatives, have visited them, and speak Indonesian. Nurses and prison officers needed at least one year of experience and must have been willing to provide detailed information about the mental health services needed by adolescents. A total of 30 participants were interviewed: 9 adolescents, eight caregivers, five nurses, and eight prison officers, based on a saturated sampling approach, where additional data no longer provided significant new insights.<sup>(29)</sup>

### Data collection

The research took place from March to June 2024 and involved in-depth interviews to gather information from participants. Guided by predetermined questions: 1) What was your experience serving your prison sentence? 2) What events have most significantly impacted your current psychological state? 3) How did the clerk assist you in overcoming the problems you faced? 4) What support do you need to manage mental health issues while in prison? Each interview lasted 30 to 45 minutes and was conducted in the nurse's room for privacy. Researchers recorded the sessions and noted verbal behaviours, such as pauses and facial expressions. Before the interviews, participants were thoroughly informed about the study's purpose, benefits, and recording process.

### Data analysis

The characteristics of participants were analyzed using frequency distribution and central tendency. The qualitative data were analyzed using thematic analysis, following a systematic coding process as outlined by Creswell. This process included several key steps: 1) listening to participants' verbal descriptions from recordings, 2) carefully reading each text multiple times, 3) identifying and highlighting essential statements or phrases, 4) making connections between important themes identified in these statements, and 5) compiling these themes into a final description of the phenomenon.<sup>(30)</sup> The analysis was conducted on two data sets: one sourced from adolescents and families. Then, triangulation was carried out by incorporating perspectives from nurses and prison officers. Triangulation involves combining data from various sources to achieve a more comprehensive and accurate understanding.<sup>(31)</sup> The final analysis produced an integrated theme derived from all four groups of data sources. The study adheres to principles of data validity, including credibility, dependability, confirmability, and transferability.<sup>(32)</sup>

### Ethical considerations

Researchers protect participants' rights by respecting their dignity, prioritizing their well-being, and ensuring fairness. They also provide important information about the research and participants' right to withdraw at any time before the study begins. Written consent is obtained after a face-to-face meeting with each participant, and confidentiality is guaranteed. The Research Ethics Committee of the Faculty of Nursing, University of Indonesia (KET-100/UN2.F12.D1.2.1/PPM.00.02/2024) has given ethical approval.

## RESULTS

### Characteristics of Participants

The characteristics of adolescent inmate participants were an average age ( $16,44 \pm 0,6$ ) years, male (100 %), high school education (55,56 %), and an average sentence ( $4,6 \pm 0,4$ ) years. The characteristics of caregivers were average age ( $42,63 \pm 9,29$ ) years, gender between men and women was the same (50 %), married (87,5 %), junior high school education (37,5 %), and not working (37,5 %). The characteristics of nurses were average age ( $36,2 \pm 7,73$ ) years, female sex (60 %), and average working period ( $5 \pm 4,74$ ) years. The characteristics of prison officers were average age ( $40,88 \pm 12,64$ ) years, male (100 %), undergraduate education (75 %), and average working period ( $3,5 \pm 2$ ) years (table 1).

### Thematic Findings

This research produced four themes, namely 1) Transition experience during legal proceedings, 2) Risk factors for adolescent mental health problems, 3) Protective factors of adolescent development, and 4) The need to handle mental health problems.

Table 1. Demographic characteristics of the participants			
Participants (n)	Categories	Characteristic	Number (%) or Mean $\pm$ SD
Adolescent inmate (n = 9)	Age (years)		16,44 $\pm$ 0,6
	Gender	Male	9 (100)
	Education	Primary school	1 (11,11)
		Junior High School	3 (33,33)
		High School	5 (55,56)
Detention period (years)		4,6 $\pm$ 0,4	
Caregiver (n = 8)	Age (years)		42,63 $\pm$ 9,29
	Gender	Male	4 (50)
		Female	4 (50)
	Marital Status	Married	7 (87,5)
		Doubt	1 (12,5)
	Education	No school	1 (12,5)
		Primary school	2 (25)
		Junior High School	3 (37,5)
		High School	1 (12,5)
		College	1 (12,5)
	Work	Not Working	3 (37,5)
		Construction Workers	1 (12,5)
		Fisherman	1 (12,5)
Self-employed		2 (25)	
Laborer		1 (12,5)	
Nurse (n = 5)	Age (years)		36,2 $\pm$ 7,73
	Gender	Male	2 (40)
		Female	3 (60)
Working period (years)		5 $\pm$ 4,74	
Prison officer (n = 8)	Age (years)		40,88 $\pm$ 12,64
	Gender	Male	8 (100)
	Education	High School	2 (25)
		College	6 (75)
Working period (years)		3,5 $\pm$ 2	

### Transition experience during legal proceedings

The theme encompasses two subthemes: the holistic responses of adolescents during detention, which include emotional, cognitive, behavioral, and interpersonal categories, and their coping strategies, consisting of religious and spiritual coping, passive assessment, and seeking social support.

Teenagers often struggle with negative emotions such as fear, anxiety, stress, sadness, shock, and regret. One participant expressed, “*I was terrified in prison and regret what I did. Thinking about this case makes me sad*” (P3). Cognitive concerns primarily focus on their parents, the future, and life after release. One adolescent said, “*I worry about my parents’ health and what will happen when I’m free*” (P1). Behaviorally, they experience loneliness, trouble sleeping, and self-reflection. For example, one noted, “*When I feel overwhelmed, I go to bed alone to calm down*” (P5). Another stated, “*I’ve had nightmares and often feel like crying*” (P9). In interpersonal interactions, they seek safe spaces to talk, whether with roommates or officers, though some avoid discussing personal issues with friends. One mentioned, “*We chat in our room, but I rarely confide in my friends*” (P5). A nurse observed, “*Some want to talk about their problems, while others remain silent*” (P22).

Participants indicated that religious activities like praying and reciting verses provide strength and calmness during difficult times. One noted, “*If I can’t sleep because of racing thoughts, I go to ablution, pray, and recite*” (P7). Engaging in scheduled activities in correctional facilities such as exercising, reading, and watching

movies helps alleviate their mental burdens temporarily. However, some participants lamented the limitations of these activities after 5 p.m. when they must remain in their rooms, with one stating, *“We only participate in scheduled activities. After 5 p.m., we’re locked in and don’t know what to do”* (P6). Coping and seeking social support is vital for these adolescents. They turn to family and staff for help and empathy. One participant expressed, *“Every week I come. If he calls, I’ll come. I told him I wanted to be here; if I don’t come, I feel like I’ll go crazy”* (P16).

#### **Risk factors for adolescent mental health problems**

This theme includes six categories: 1) Physical violence during examinations, 2) Unpleasant experiences, 3) Stigmatization, 4) Loss of confidence, 5) Isolation and loss of freedom, and 6) Separation from family.

Participants shared traumatic experiences of physical violence by officers, including being hit or kicked for incorrect answers or coerced confessions. One adolescent recalled, *“At the police station, I was tortured and beaten when I answered wrong”* (P5). They also described inhumane treatment, such as sleeping in small chairs with handcuffs and feeling like animals, even if not guilty. The social stigma during the judicial process was also evident, with participants concerned about wearing orange uniforms and how others perceived them. One adolescent expressed, *“I felt bad wearing an orange shirt; I worry about what others think”* (P6). The participants’ loss of confidence was significant, as they felt unheard and guilty. Due to embarrassment, they became reluctant to attend school. One stated, *“They didn’t listen to me; I wasn’t guilty, but they believed my friend”* (P1). Participants reported feelings of isolation and confinement from limited movement and restricted communication. One noted, *“We can’t hold cellphones and are locked in at 5 PM”* (P8). Lastly, separation from family caused deep sadness and anxiety. One adolescent said, *“I worry about my parents managing the rice fields”* (P3), and a nurse observed that many felt regret and sorrow for their parents (P18).

#### **Protective factors of adolescent development**

This theme highlights five key categories: 1) Fulfillment of basic needs, 2) Monitoring growth and health, 3) Educational sustainability, 4) Religious guidance and moral values, and 5) Talent and creativity development.

Participants, including teenagers and prison officers, noted that inmates’ basic needs are well met, with regular nutritious meals, adequate physical activity, hygiene, and rest being emphasized. *“Meals are provided three times a day, ensuring nutritional needs are met,”* stated Prison Officer (P29). One of the teenagers also said, *“We have sports facilities and toiletries provided for personal hygiene”* (P2). Routine health checks, including measurements and examinations, are also conducted. Nurse explained, *“Initial health checks upon entry include weight and dental examinations”* (P20), while other nurses stated, *“If someone is unwell, they visit the clinic for evaluation and medication”* (P21). Efforts to sustain education include partnerships with educational institutions. *“We support educational continuity through Package A, B, and C for students without diplomas,”* explained Prison Officer (P30). Inmates also have opportunities to enhance their religious knowledge. *“Religious activities, including Quran recitation and lectures, are provided regularly”* (P2). To foster creativity, the correctional institutions offer activities such as art programs and sports. *“We support activities like music bands and skills training,”* noted Prison Officer (P28). Overall, these initiatives aim to ensure the healthy development of adolescents in custody.

#### **The need to handle mental health problems**

This theme highlights four key areas: 1) The need for mental health check-ups, 2) The importance of following up on examination results, 3) The requirement for mental health interventions, and 4) staff involvement in these interventions.

Participants emphasized the lack of mental health examinations, which they believe are essential given their complex psychological conditions. One adolescent noted, *“Health checks exist, but mental health checks do not. We need these examinations because we have too many overwhelming thoughts”* (P4). A nurse added, *“We haven’t haven’t conducted mental health assessments for the foster children, which is important as many appeared scared when they arrived”* (P19). There is also a demand for more transparent communication regarding examination results. Participants expressed frustration that results were often not shared. *“There was a psychiatric test, but the results were never communicated; it’s necessary to know how we are doing”* (P7). Another nurse remarked, *“Mental health checks are limited to entry, and we don’t understand the assessment process”* (P21). Participants highlighted the need for support in managing stress and emotions. *“We need guidance on handling stress and controlling our emotions”* (P3). Another suggested, *“We need tools to manage anxiety and cope with sleeplessness”* (P9). Additionally, nurses stressed the importance of involving staff in mental health interventions. *“While there are external programs, we’re not included. we must participate in counseling to better support the foster children”* (P18). Another nurse noted, *“We need training to effectively address mental health issues in adolescents”* (P19).

## DISCUSSION

This qualitative research exploration identified four main themes: transition experiences during the legal process, risk factors for adolescent mental health problems, protective factors for adolescent development, and the need for addressing mental health issues. During punishment, adolescents undergo various emotional, cognitive, behavioural, and interpersonal changes. Many experience anxiety, post-traumatic stress disorder (PTSD), and symptoms of depression. A study conducted on 300 inmates revealed that 62,7 % experienced general mental disorders, including anxiety, depression, and somatic symptom disorder.<sup>(33)</sup> This figure indicates a significant prevalence, with three out of every five inmates suffering from mental disorders.<sup>(34,35)</sup> Conversely, researchers also identified spiritual and religious coping strategies that were beneficial for the adolescents' mental health. These strategies involve drawing closer to their faith by increasing practices such as prayer and reading spiritual texts, which have been shown to enhance resilience during times of stress, anxiety, or depression.<sup>(36)</sup> Additionally, prison officers participated in these activities, praying with the inmates.<sup>(23)</sup> Furthermore, adolescents are engaged in structured activities within the prison environment to help alleviate their anxiety. They also seek out sources of support to address their challenges.

This study identifies several risk factors contributing to mental health issues among adolescent inmates, including physical violence by authorities, negative experiences, stigmatization, loss of confidence, loss of freedom, and separation from family. Traumatic experiences, particularly in the absence of family support, can significantly exacerbate mental health disorders.<sup>(24)</sup> Stigmatization leads to psychological distress, reducing social support,<sup>(37,38)</sup> while poor living conditions and a lack of self-confidence further worsen their mental health.<sup>(39)</sup>

The encouraging finding from this study is that it highlighted several protective factors that can help adolescents minimize the likelihood of developing more severe mental health disorders. In contrast to some previous research suggesting that individuals with poor health are frequently found within the prison population,<sup>(6,40,41)</sup> our study revealed a different scenario for adolescent inmates. These young individuals actively prioritized their fundamental needs, including access to nutritious meals and comprehensive health examinations, which helped them monitor their growth and development. Moreover, the environment within the prison aimed to support their educational pursuits, allowing them to explore their talents and express their creativity. This holistic approach not only catered to their physical and intellectual growth but also encompassed opportunities for personal development through various religious activities. Such engagement is instrumental in nurturing their emotional well-being. These regular, structured activities within the prison setting play a pivotal role in alleviating feelings of stress, anxiety, and depression among adolescent inmates, ultimately serving as vital protective factors for their mental health.<sup>(33,42)</sup>

Adolescents also highlight the need for mental health screening and interventions during sentencing. This need is in line with the recommendations of the World Health Organization, which recommends the implementation of early detection programs, preventive interventions, and treatment of mental disorders in adolescents.<sup>(1)</sup> The role of nurses is vital in meeting this need through multidisciplinary cooperation with psychologists and social workers.<sup>(5)</sup> Research suggests that social support and access to mental health services can reduce the risk of mental disorders in adolescents in correctional institutions.<sup>(9,43)</sup> Overall, this study provides important insights into adolescent inmates' psychosocial dynamics and mental health needs from their own perspective. This understanding can be the basis for developing a comprehensive and responsive mental health program for adolescents in correctional institutions.

## CONCLUSIONS

This study identified four key themes and 22 categories related to the mental health of incarcerated adolescents. These individuals often face significant anxiety and require psychiatric support due to various risk factors, such as physical violence during examinations, negative experiences, stigmatization, loss of confidence, isolation, and separation from family. Conversely, protective factors that can alleviate these issues include meeting basic needs, effective growth monitoring, disease management, sustainable education, religious guidance, strong moral values, and encouragement of talent. There is an urgent need for comprehensive mental health support, including assessments, follow-ups, targeted interventions, and staff involvement.

### Strengths and limitations

This study enhances our understanding of adolescent male inmates' perceptions of their mental health needs in custody. For a broader perspective, data were also collected from caregivers, nurses, and prison officers. Interviews were conducted in a relaxed environment to encourage openness. A limitation is that the study focuses solely on male participants, which may lead to different results if performed with female inmates.

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The author has no conflict of interest regarding this article.

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