



Research Article

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Impact of Life Term Imprisonment on Quality of Life: A Comparative Study of Convicted Murderers and Non-Criminals

Kumar R*

Consultant Psychologist and Post-Doctoral Researcher, India

*Corresponding author: Ranjay Kumar, Consultant Psychologist and Post-Doctoral Researcher, 59 E, CBI Colony, Vasant Vihar, New Delhi-110057, India, Tel: 8691916262; Email: drranjaykumar39@gmail.com

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Abstract

Imprisonment has a close relationship with crime, criminals, and the justice system in every nation or state worldwide. It is a form of judicial punishment in which a person is kept under judicial custody in a prison. The Quality of Life (QoL) of imprisoned populations has long been a significant focus of forensic-clinical psychology and criminology. The present study aimed to assess the effect of life-term imprisonment on the QoL of prisoners by comparing convicted murderers with non-criminals. A total of 100 participants were purposively sampled, including 50 convicted murderers from Central Jail, Beur, Patna, Bihar, and 50 non-criminals from various districts in Bihar. Participants, aged 20–60 years, were Hindu males with at least a primary-level education. They were assessed using the WHO-developed Quality of Life Scale (WHOQOL-BREF), which evaluates four domains: physical health, psychological well-being, interpersonal/social relationships, and environment. The obtained data were analysed using the t-test method. Statistically significant differences were observed between convicted murderers and non-criminals in physical health (Domain 1) and interpersonal/social relationships (Domain 3). However, no significant differences were found in psychological well-being (Domain 2) or environmental conditions (Domain 4). The results reveal that convicted murderers had poorer physical health but better interpersonal relationships compared to non-criminals. In conclusion, the findings indicate that life-term imprisonment negatively impacts prisoners' QoL, particularly their physical health. These results underscore the critical need for interventions to address correctional shortcomings and improve the QoL of imprisoned populations.

Keywords: Life Term Imprisonment; Quality of Life; Convicted Murderers; Non-Criminals

Introduction

Imprisonment has a close relationship with crime, criminals, and justice within the judicial systems or criminal administrations of every nation or state in the world. It is a form of judicial punishment where an individual is kept under judicial custody in a prison. This punishment is given to offenders with the aim of preventing future crimes. It serves to deter not only the actual offenders but also others from committing similar acts in the future. For the victim and their relatives, the punishment of the offender provides a sense of solace, serving a social purpose by discouraging others from indulging in criminal acts [1]. However, the imprisonment of an individual also impacts another important aspect: the quality of life of prisoners. The concept of quality of life, which is integral to the well-being of individuals, plays a significant role in the lives of incarcerated individuals [2].

Life Term Imprisonment

Life term imprisonment is a judicial punishment where an individual is sentenced to spend their life in prison, often for severe crimes. In some legal systems, this does not mean lifelong incarceration without parole, as the possibility of release can exist after a specific number of years, depending on the crime and the system. However, life imprisonment without parole ensures the offender remains in prison for life. Life sentences are typically given for the most serious crimes, including:

Murder: Particularly premeditated, serial, or murder involving extreme violence or cruelty.

Terrorism: Acts of terrorism with mass casualties or involving weapons of mass destruction often led to life sentences.

Aggravated Rape and Sexual Assault: Especially when the victim is severely harmed or murdered.

Kidnapping: Life sentences may result from kidnappings involving harm to the victim or other severe circumstances. **Robbery or Armed Robbery:** Especially if the crime results in death or severe injury.

The probability of life imprisonment is influenced by factors such as the severity of the crime, aggravating elements (e.g., premeditation, cruelty), and legal context. For instance, murder with premeditation, terrorism, or cases of child abuse are more likely to attract life sentences. Legal systems may vary, with some allowing parole after a set number of years, while others impose life sentences without the possibility of release, reflecting the crime's gravity and societal risk posed by the offender.

Life Term Imprisonment and Quality of Life

The term "quality of life" is used to evaluate the general well-being of individuals and societies. This concept is often applied in various fields, such as international development, healthcare, and political science [3]. It is important to distinguish quality of life from the standard of living, which is primarily based on income. While standard indicators of quality of life include wealth and employment, it also encompasses the built environment, physical and mental health, education, recreation and leisure time, and social belonging [4].

According to the WHO, quality of life is defined as individuals' perceptions of their position in life within the context of their culture and value systems, in relation to their goals,

expectations, standards, and concerns [4]. This definition highlights that quality of life is a subjective evaluation, embedded in a cultural, social, and environmental context. It should not be confused with terms such as "health status," "lifestyle," "life satisfaction," or "mental well-being," as quality of life incorporates a more holistic view [5]. In the context of life-term imprisonment, the quality of life is profoundly affected by various environmental, social, and psychological factors [6].

Convicted Murderers and Non-Criminals

This study compares convicted murderers—individuals sentenced to life imprisonment for committing murder with non-criminals who have no history of criminal activity. The experimental group (convicted murderers) typically exhibits extreme antisocial tendencies and has committed violent acts for self-satisfaction [7]. The control group (noncriminals), without any criminal history, serves as a baseline to understand the influence of socio-economic factors on criminal behaviour. This comparison is crucial for evaluating how life-term imprisonment impacts the prisoners' quality of life relative to the general population [8].

Conceptual Framework

The impact of life-term imprisonment on prisoners' quality of life is a critical area that warrants attention. Much research has focused on the quality of life of disabled and unhealthy populations, but insufficient attention has been paid to the effects of life-term imprisonment on the quality of life of convicted murderers. This gap in the literature highlights the need for further investigation to guide judicial systems and correctional institutions in the rehabilitation of lifesentenced prisoners [9]. This study aims to fill this gap by examining the impacts of life imprisonment on prisoners' quality of life, which will help improve rehabilitation efforts and policy decisions.

Literature Review

A study was conducted to evaluate the quality of life perceived by forensic patients using the WHOQOL-BREF scale. The results indicated that prisoners exhibited a significant variation in perceived quality of life across physical health, psychological health, environment, and social relations domains [10]. Prisoners generally reported better physical health compared to psychological health, social relations, and environment. Similarly, some studies revealed the significant impact of imprisonment on physical health and social relationships, as prisoners often face social isolation and limited access to healthcare, which diminishes their QoL [8,11].

In a longitudinal study, found that prisoners with life sentences showed a notable decline in physical health over time, largely due to lack of exercise, poor nutrition, and stress [7]. Additionally, the inability to maintain familial and social ties contributed to decreased quality of life [2]. Furthermore, some studies have demonstrated that improving rehabilitation programs and social interaction opportunities for prisoners could lead to significant improvements in their quality of life [12].

Quality of Life of Life-Term Imprisoned Prisoners

Research has shown that the quality of life of life-term imprisoned individuals is generally poorer compared to those not incarcerated. Their physical health suffers due to inadequate medical care, poor living conditions, and limited physical activities [9]. Moreover, the environment within prisons often exacerbates the psychological stress, leading to high levels of anxiety and depression among life-sentenced prisoners [13]. The lack of social interaction and isolation further contributes to their poor quality of life, often leading to a sense of hopelessness and diminished life satisfaction [14].

Relevance of the Study

This study highlights the significance of improving the quality of life for long-term imprisoned individuals to foster ethical development, enhance rehabilitation efforts, and shape public health strategies [15,16]. By identifying factors affecting prisoners' well-being, it underscores the potential for reforms that promote humane correctional practices and better outcomes for inmates. The findings serve as a basis for shaping policies to improve life-term prisoners' conditions, ensuring rehabilitation-focused approaches within the criminal justice system. Addressing these issues can enhance policing practices, influence public perception, and support societal reintegration [6,17].

Statement of the Problem

Aim: To assess the effect of life term imprisonment on the quality of life of prisoners, comparing convicted murderers with non-criminals.

Objective: To examine and compare the performance of convicted murderers and non-criminals on the WHO Quality of Life scale, including the physical health, psychological, interpersonal/social relationships, and environment domains of quality of life.

Methodology

Study Design

The study adopts a comparative research design to explore the relationship between age, all domains of quality of life and life-term imprisonment, comparing convicted murderers and non-criminal groups.

Study Sample and Location

A total of 100 male subjects, aged between 20 and 60 years, were selected for the study. The subjects were divided into two groups: 50 convicted murderers from Central Jail, Beur, Patna, Bihar, and 50 non-criminals from various districts in Bihar. Both groups were matched in terms of age, religion, education, health (physical and mental), and cooperativeness.

Inclusion and Exclusion Criteria

The selection of subjects for the experimental and control groups was based on specific inclusion and exclusion criteria. Subjects who fulfilled the following criteria were selected for the study:

Experimental Group (Convicted Murderer): Sanatan (Hindu), male, aged 20-60 years, convicted for murder (U/s 302 IPC), with at least primary-level education, in good physical health, and cooperative.

Control Group (Non-Criminals): Sanatan (Hindu), healthy males, aged 20-60 years, with no history of criminal activity, mental illness, substance abuse, and cooperative.

Research Tool: The following tools were used to collect data from convicted murderers and non-criminals:

Personal Data Schedule (PDS): A semi-structured proforma was used to record relevant socio-demographic details from the subjects of the two groups.

WHO Quality of Life Scale (QoL): The Quality of Life (QoL) scale is a comprehensive, multidimensional measurement tool reflecting an individual's personal priorities, goals, mental health, and functional status. This self-administered screening test is designed for quick identification of multidimensional patterns and subjective experiences. It consists of 26 items, with responses categorized into five levels: (1) Not at all, (2) Not much, (3) Moderately, (4) A great deal, and (5) Completely, scoring 1 to 5 respectively. The responses reflect the individual's experiences over the last two weeks. The QoL scale is structured into following four domains:

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Domain	Description	Items	No. of Items
Domain 1 (Physical Health)	Activities of daily living, dependence on medication, energy, mobility, pain, sleep, and work capacity	03, 04, 10, 15, 16, 17, and 18	7 items
Domain 2 (Psychological)	Bodily image, negative/positive feelings, self-esteem, spirituality, thinking, learning, and memory	05, 06, 07, 11, 19, and 26.	6 items
Domain 3 (Social Relationships)	Personal relationships, social support, and sexual activity	20, 21, and 22	3 items
Domain 4 (Environment)	Financial resources, safety, health care, home environment, recreation, and transport	08, 09, 12, 13, 14, 23, 24, and 25	8 items

Procedure: To examine the differences between the convicted murderers and non-criminal groups, written approval was obtained from the Inspector General of Police (Prison) of Bihar state to conduct the study on the convicted murderer's population imprisoned in central jails of Bihar, India. Prior written consent was obtained from all participants. Relevant data were collected from subjects using the Personal Data Schedule (PDS) and the Quality-of-Life scale.

Statistical Analysis

The collected data from the sample subjects were statistically analysed using the t-test to compare means.

Results and Discussion

Results and Discussion on Age

Age brings maturity, which influences a person's psychological and physical status and behaviours. To examine the effect of life-term imprisonment on quality of life, this study included only participants aged between 20 and 60 years. This age range represents a critical period during which individuals play a significant role in societal survival and expansion. However, it is also a period during which individuals may pose a threat to society and commit homicidal offenses, which are punishable by life imprisonment. Table 1 shows a statistically significant difference in the age variable between non-criminals and convicted murderers. The mean age of non-criminals was 31.56 ± 6.65 , whereas convicted murderers had a mean age of 37.60 ± 8.09 (t value = 4.07, p < 0.01). The difference between the two mean age scores was 6.04 years. The results suggest that the convicted murderer group is significantly older than the non-criminals, indicating that age may play a role in the commission of serious offenses like murder. Additionally, during case investigations, court trials, and life imprisonment, convicted murderers tend to have attained greater age-related maturity compared to non-criminals. This finding aligns with previous research suggesting that violent crimes are often committed by individuals in adulthood [18]. The higher age of convicted murderers could reflect the maturity of offenders at the time of their crimes.

Variable	Non-Criminals Group (N=50)	Convicted Murderers Group (N=50)	t -Value	df	р
Age (Mean ± SD)	31.56 ± 6.65	37.60 ± 8.09	4.07*	98	0

*(p < 0.01)

Table 1: Comparison of Age between Non-Criminals and Convicted Murderers.

Result and Discussion on Quality-of-Life Domains

Domain 1 (Physical Health): The performance of convicted murderers and non-criminals in the physical health domain is presented below:

Table 2 shows a significant difference in physical health between non-criminals and convicted murderers. The mean score for non-criminals was 23.34 ± 4.00 , whereas convicted murderers scored 21.64 ± 3.36 , with a t value of

2.30 (p < 0.05). The difference between two mean scores was 1.70. Convicted murderers scored lower, suggesting that imprisonment impacts their physical well-being. Previous studies have indicated that individuals in prison often experience reduced physical health due to restricted activities, lack of exercise, and poor living conditions [19]. In contrast, non-criminals, living in unrestricted environments, may have better access to healthcare and physical activity.

Group	Mean ± SD	t	df	p-value
Non- Criminals (N = 50)	23.34 ± 4.00	- 2.30*	98	0.02
Convicted Murderers (N = 50)	21.64 ± 3.36			

* P < 0.05

Table 2: Comparison of Physical Health between Non-criminals and Convicted Murderers.

Domain 2 (Psychological): The performance of convicted murderers and non-criminals in the psychological health domain is presented below:

Table 3 shows no significant difference in the psychological domain between non-criminals and convicted murderers (t value = 0.06, p = NS). The mean scores for non-criminals and convicted murderers were 19.28 ± 6.30 and 19.34 ± 3.01 , respectively. The difference between two mean scores was 0.06. This lack of significance suggests that the psychological

well-being of convicted murderers and non-criminals is comparable. Psychological aspects, including bodily image, self-esteem, personal beliefs, memory, and concentration, do not appear to be impacted significantly by imprisonment in this study. Similar findings have been reported in a study where psychological well-being was not severely impaired in inmates compared to the general population, particularly when factors like social support and coping mechanisms were considered [20].

Group	Mean ± SD	t	df	p-value	
Non- Criminals (N = 50)	19.28 ± 6.30	0.06	98	NC	
Convicted Murderers (N = 50)	19.34 ± 3.01			NS	

Table 3: Comparison of Psychological between Non-criminals and Convicted Murderers.

Domain 3 (Social Relationship): The measured performance of convicted murderers and non-criminals in the social relationship's domain is presented below:

Table 4 shows a statistically significant difference in social relationships between non-criminals and convicted murderers (t value = 4.30, p < 0.01). Non-criminals had a mean score of 10.94 \pm 1.75, while convicted murderers scored 14.36 \pm 5.33. The difference between two mean scores was 3.42. This suggests that, although murderers are

deprived of family and social connections in prison, their relationships with other prisoners are relatively better compared to the social relationships of non-criminals. This finding is consistent with studies indicating that individuals in prisons often form close bonds with fellow inmates, which can serve as a coping mechanism in the face of isolation [21]. The higher score for convicted murderers in this domain could reflect an adaptation to the prison environment, where social networks are often critical for survival.

Group	Mean ± SD	t	df	p-value
Non- Criminals (N = 50)	10.94 ± 1.75	4.20*	98	0
Convicted Murderers (N = 50)	14.36 ± 5.33	4.30*		

* P < 0.01

Table 4: Comparison of Social Relationship between Non-criminals and Convicted Murderers.

Domain 4 (Environment): The measured performance of convicted murderers and non-criminals in this domain is presented below:

Table 5 shows no significant difference in the environment domain between non-criminals and convicted murderers (t value = 1.45, p = NS). Non-criminals scored 23.50 \pm 5.21, while convicted murderers scored 22.12 \pm 4.23. The difference between two mean scores was 1.38. While convicted murderers scored lower, the difference was not statistically significant. This finding could indicate that the environment, as measured in this study, is not a distinguishing factor between the two groups. Inmates' physical environments may be challenging, but access to essential services such as healthcare and recreational activities could mitigate some of the negative impacts of imprisonment [22].

Group	Mean ± SD	t	df	p-value
Non- Criminals (N = 50)	23.50 ± 5.21	1 45	00	NG
Convicted Murderers (N = 50)	22.12 ± 4.23	1.45	98	NS

NS=non-significant

Table 5: Comparison of Environment between Non-criminals and Convicted Murderers.

Conclusion

The study reveals that convicted murderers exhibit poorer physical health but better interpersonal relationships compared to non-criminals. Life-term imprisonment negatively impacts physical health and social relationships, while psychological well-being and environmental factors remain unaffected. These findings align with an study highlighting imprisonment's effects on quality of life [23].

Suggestions and Recommendation

This study explores the impact of life-term imprisonment on prisoners' quality of life, emphasizing the need to address physical health challenges through comprehensive interventions. policymakers, jail authorities, health professionals, and caregivers must collaborate to enhance prisoners' well-being. Further research is essential to investigate long-term impacts and develop interventions to improve prisoners' well-being. It is also suggested research should include diverse samples, such as females and various regional populations, and adopt longitudinal approaches to provide deeper insights into improving quality of life and developing effective preventive strategies.

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