CHAPTER III

RESEARCH METHODOLOGY

3.1 Methodology:

The present study aims to focus on the “Psycho-Social Problems of Women Convicts in the Central Prisons of Karnataka State” to achieve the following objectives.

3.2 Objectives:

1. To analyze the existing facilities provided for women convicts in central prisons.
2. To assess the Psycho-Social problems faced by women convicts in central prisons.
3. To evaluate the barriers which affect the rehabilitation process of women convicts.
4. To study about Women convicts non-prioritization due to their limited representation among prison population.
5. To suggest better facilities and rehabilitation measures to women convicts.
6. To know internal facilities like (space, contamination of different types of prisoners marital status, education standards, religious factors, general well being on health, region and language) influencing on women convicts Psycho-social problems in the prison.

3.3 Hypotheses:

1. The existing facilities provided to women convicts are inadequate.
2. Women convicts significantly maladjusted in different areas (family, health, emotional, social and occupational).
3. Women convicts experience significantly higher level of anxiety.
4. The General Health Status of women convicts (somatic, anxiety and depression) is low.
5. Secondary variables age, marital status, education, health conditions, nature of crime, years of imprisonment etc., significantly influence adjustment of women convicts.

3.4 Research Design:

Since the present study has to find answers to the larger issues by taking a specific case study of the women convicts in Karnataka, Karnataka State was selected for conducting the present study. Karnataka being more or less typical of the Indian nation in terms of the incidence of crimes, distribution of criminals under each crime head and number of women convicts completion of their sentence, it was found to be indicative of what is happening in the country as a whole. Besides the available studies referred to above have not adequately covered Karnataka excepting, of course, a few conducted mainly for purpose of knowing the prison conditions, but not giving much attention to after care and rehabilitation. On the top of this, Karnataka being the home state of the researcher was felt to give an added advantage to overcome field work problems like language, identification of respondents, and building up rapport with them.

3.5 Sample

The present study involved collection of both secondary and primary data. The secondary data collected from the published government reports, records and any other literature available with the concerned departments. The researcher collected the primary data by doing fieldwork with the women convicts in the central prisons of the Karnataka.

As the researcher went round the central prisons for collection of data the women prisoners were found to be less in number on later enquiry it is found that most of the women prisoners were shifted to newly established Karnataka State Women central prison, located at Tumkur, Tumkur - Bangalore Highway. On visiting Central Prison meant for women prisoners the researcher found large number of women convicts and by helped by them collect data for the study.

On the whole there were 97 women convicts were in the prisons. The researcher wanted to collect data from all the convicts. Hence, the researcher
employed ‘all occurrences’ sampling technique, since their number was low. The researcher was successful in collecting data from all the respondents personally.

Scope:

This study covered the impact of prison environment on women convicts at different durations. Since holistic approach has been adapted to the research has been adopted to the research problems, every aspect of the women convicts such as Psycho-Social, economic, educational issues and so on have been covered.

3.6 Tools used for the Study:

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<tr>
<th>Sl. No</th>
<th>Tools</th>
<th>Questionnaire</th>
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<tbody>
<tr>
<td>1</td>
<td>M.S.Saxena’s Adjustment Inventory (1959)</td>
<td>Family Adjustment</td>
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<td>Health Adjustment</td>
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<td>Emotional Adjustment</td>
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<td>Social Adjustment</td>
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<td></td>
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<td>Occupational Adjustment</td>
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<tr>
<td>2</td>
<td>Taylor’s Questionnaire (1951)</td>
<td>Manifest Anxiety Scale</td>
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<tr>
<td>3</td>
<td>General Health Questionnaire</td>
<td>Goldberg and Hiller (1979)</td>
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3.7 M.S.Saxena’s Adjustment Inventory (1959):

The researcher selected “Saxena’s Adjustment Inventory” constructed and standardized by Madhusudan Lal Saxena, for the measurement of adjustment. The Kannada translated Inventory applied as “Vyaktitva Parakha Prashnvali”. It is intended for the area suitable for the use of Women Prisoners. It is suitable to provide five separate areas of adjustment i.e. (A) Family Adjustment, (B) Health Adjustment, (C) Social Adjustment, (D) Emotional Adjustment and (E) Occupational Adjustment. The inventory comprises of 90 items seeking responses in “Yes”, “No” and Don’t Know” form and the responses are marked by a tick at the appropriate item by the respondent.
Reliability:

The reliability index ascertained by split-half (odd-even) method and Cronbach alpha Co-efficient for the scale as whole were found to be 0.6737 and 0.8142.

Validity:

The test re-tests adjustment scores and item total correlation was found to be from .5504 to .7424, which validates the Saxena’s adjustment inventory.

Administration of Tool:

After the sample and tools to be applied was decided the same was subjected for collecting the desired data. In the present study, the sample is drawn from the Women Prisoners of Central Prisons in the state of Karnataka, prior explanation of the nature and purpose of the investigation was given to the concerned authorities.

Scoring of Saxena’s Adjustment Inventory:

The scoring of this inventory was done according to the key prescribed by the original author of the test, the items were divided into five categories A, B, C, D and E; these five areas of adjustment were meant for A-Family Adjustment, B-Health Adjustment, C-Social Adjustment, D-Emotional Adjustment, and E-Occupational Adjustment. “Yes”, “No” and “Don’t know” forms as allotted to each element were given one mark each. In this way adjustment scores of all the 97 women convicts were obtained. The higher the score obtained in each of the five areas, the good is the adjustment of the subjects in that area.

Family Adjustment:

Beil (1939) brought out the following significant differences at home adjustment among women prisoners. Family adjustments with respect to acceptance and rejection by family, personal habits, family criticism and such traits concerned questions are involved (15 Questions).
**Health Adjustment:**

Health in its broader aspects is essential to its well balanced personality, it dependent to a large degree on ideas and happiness. Sound health is the source of satisfaction and adjustment. Persons who have physical defects or deformities may develop various types of complexes and frustrations may result in maladjustment (15 Questions).

**Social Adjustment:**

Area of social adjustment is influenced by social maturity of the person. Maturity in social relationship means to establish good relations with family, neighbours, playmates, class-fellows, teachers and other members of the society. Socially mature person behaves in accordance with social norms, customs and traditions. He never engages himself in anti-social activities (15 Questions).

**Emotional Adjustment:**

A person is emotionally adjusted if he expresses proper emotion in a proper situation in a proper form. An emotionally stable person may be well adjusted and emotionally unstable conditions cause mental disorder and maladjustments (30 Questions).

**Occupational Adjustment:**

Subrahmanyam (1989) describes occupational adjustment as the adjustment of the individual to the occupational environment, consisting of occupational conditions such as physical environment, facilities, work-schedule, authority, discipline, interpersonal relations with colleagues and other members of the organization etc. The member in which and the speed with which the individual arrives at satisfactory adjustment to the demands of an organization is an index of his capacity to understand them. In other words, it is the capacity of his adjustment to that environment (15 Questions).

High scores on each area indicate maladjustment in that particular area.
3.8 Taylor Manifest Anxiety Scale:

This scale measures the individual’s level of anxiety. Taylor originally developed this scale in 1951, which consisted of 200 items. Later in 1953, it was reduced to 50 items. The test-retest reliability of the scale was found to be 0.89. In 1993, Nataraj and Nataraj of Mysore University, examined the original form of the scale and reduced it to 40 items. In the present study, 40 statement versions were used. The response alternatives are ‘True’ or ‘False’ there are 30 items related to ‘anxiety’ and remaining 10 items are lie items. The validity is high, and the test-retest reliability is at 0.96.

Norms for interpretation of the total scoring for Taylors Manifest Anxiety Scale

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<thead>
<tr>
<th>Total Scoring</th>
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<tbody>
<tr>
<td>Low Anxiety</td>
<td>Below 4</td>
</tr>
<tr>
<td>Normal Anxiety</td>
<td>4-20</td>
</tr>
<tr>
<td>High Anxiety</td>
<td>Above 20</td>
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Taylors Manifest Anxiety Lie Scale

If the following answers are given to the question, it will be a lie.

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<thead>
<tr>
<th>Sl. No</th>
<th>Questions</th>
<th>Answers</th>
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<tbody>
<tr>
<td>1</td>
<td>Q.No.4</td>
<td>True Lie</td>
</tr>
<tr>
<td>2</td>
<td>Q.No.8</td>
<td>False Lie</td>
</tr>
<tr>
<td>3</td>
<td>Q.No.12</td>
<td>False Lie</td>
</tr>
<tr>
<td>4</td>
<td>Q.No.16</td>
<td>True Lie</td>
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<tr>
<td>5</td>
<td>Q.No.20</td>
<td>False Lie</td>
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<tr>
<td>6</td>
<td>Q.No.24</td>
<td>False Lie</td>
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<tr>
<td>7</td>
<td>Q.No.28</td>
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<td>8</td>
<td>Q.No.32</td>
<td>False Lie</td>
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<tr>
<td>9</td>
<td>Q.No.35</td>
<td>False Lie</td>
</tr>
<tr>
<td>10</td>
<td>Q.No.39</td>
<td>False Lie</td>
</tr>
</tbody>
</table>
3.9 General Health Questionnaire-28 (GHQ-28)

GHQ was developed by Goldberg (1978). It is a versatile, self-administered screening test designed to detect non-psychotic psychiatric disorders in community setting. It is not a diagnostic test and it does not make clinical diagnosis, but can be used to screen acute conditions. It detects individuals’ inability to carry out ‘normal’ functions and the appearance of new and ‘distressing’ phenomena. Overall scores bring to light changes in the conditions of in the individual. GHQ-28 is a 28-item scale version (Goldberg & Hiller, 1979), is used mainly for the research purpose. It consists of 4 sub scales namely somatic symptoms; anxiety and insomnia; social dysfunction; and severe depression.

Validity:

Large numbers of studies are reported on construct, content and concurrent and predictive validity (Goldberg & Williams, 1988; Goldberg & Hiller, 1979, pp.42-60).

Scoring General Health Questionnaire:

Each item consist of a question asking respondent whether she or he has recently experienced a particular symptoms or item of behaviour on a scale ranging from ‘less than usual’, ‘no more than usual’, rather more than usual’, to ‘much more than usual’. This four-point response is scored using GHQ Scoring method assigning 0, 0, 1, and 1 respectively. Scores on GHQ can be interpreted in three ways:

1. As a measure of severity of psychological disorder;
2. To estimate prevalence of psychiatric illness;
3. As an indicator of morbidity. In this use, subjects with high scores are regarded as an indicator of psychiatric disorder.

For Indian population threshold score on GHQ-28 was established by Verma in 1989. Total score of 11 and above is case and a score of 8 and below is a non-case.
3.10 Statistical methods applied

Following statistical methods were employed in the present study

1. Descriptive Statistics
2. Chi-Square Test
3. Analysis of Variance
4. ‘t’ test independent sample
5. ‘t’ test – one samples

3.10.1 Descriptive statistics:

To have a general idea of the nature of the distribution of the variables, the fundamental descriptive like arithmetic mean, median, mode, standard deviation, kurtosis and skewness of the variables were calculated.

3.10.2 Chi-Square Test:

Non parametric inferential statistic was used to evaluate the relationship between variables measured on a nominal scale. In this study chi-square test was applied to find out significant of difference between various groups of frequencies for different questions employed for different groups of respondents.

3.10.3 Analysis of variance (ANOVA):

To examine the significance of the difference amongst more than two sample means at the same time, ANOVA is used. The essence of ANOVA is that the total amount of variation in a set of data is broken down into two types, that amount which can be attributed to chance and that amount which can be attributed to specific causes. The basic principle of ANOVA is to test for differences among the means of the populations by examining the amount of variation in each of these samples, relative to the amount of variables between the samples.

3.10.4 ‘t’ test-independent samples:

The Independent-Samples ‘t’ Test procedure compares means for two groups of cases. Ideally, for this test, the subjects should be randomly assigned to two groups,
so that any difference in response is due to the treatment (or lack of treatment) and not to other factors. This is not the case if you compare average income for males and females.

3.10.5 ‘t’ test- one sample:

The one sample ‘t’ test procedure tests whether the mean of a single variable differs from a specified constant.

All the statistical calculations were done through SPSS for windows (version 16.0).

3.11 Ethical Issues:

1. The nature of the study was explained to the subjects.
2. Confidentiality was assured and maintained.
3. In addition to the above tools, few case studies was made to highlight specific case, where adjustment was found normal and where in it was quiet different for obvious seasons.
4. The research candidates were given a option to opt out in case they found uncomfortable.

3.12 Case Studies:

Case No 1. Laxamma

Laxamma is married women aged twenty seven years old. She belongs to backward caste. She was the only daughter to her parents, who made their living by manual labour. She says that she was dis-obident in her childhood. She was married at the age of eleven years to a sixteen year boy. Her in-laws also made their living by manual labour. She started her marital life at the age of fifteen in a joint family. (His parents, unmarried brothers and sisters) she did not have good relation with her in laws. Her mother in law pledged her jewellery for money. She deserted her husband and started staying with her parents. She developed illicit contacts with one of her co-worker. After some days her husband also came and started staying in the same village. He became suspicious of her character. Her parents forced their son in law to
stay with them in their house. Unwillingly Laxamma was forced to stay with him. One day he assaulted her severely. She became furious and administered poison to him through food. He was taken to the hospital and saved, but on doctors report a case was filed. Laxamma confessed the offence in court and was given twenty years rigorous imprisonment.

Case No 2: Mariamma

The respondent aged 28 years is from Mysore of Karnataka. She comes from an agricultural family. Her father is a land lord and mothers a respectable housewife. She has four brothers. She is the only girl child of the family. She is convicted for life–imprisonment for having murdered her servants son aged 12 years. The respondent was given in marriage to her own maternal uncle. Soon after marriage, the utter shock and bewilderment. She came to that her husband had illegitimate sexual contact (prior to her marriage and her husband has been living in adultery with the servant even after marriage) with the servant who was young and good looking. It was not uncommon for her husband to take her occasionally for an outing, cinemas etc., as soon as the respondent came to know about her husband’s extra-marital affair she started protesting and brought to the notice of the other family members, but all that was of no avail. On the other hand her husband became furious (as he feels that his ego is hurt) and started to abuse and beat the respondent. There were cold wars in the family frequently. The mediators tried to bring about reconciliation which did not work out. The husband refused to give up the contact with the paramour. Meantime the respondent became pregnant and she was sent to her parents place for delivery. When she returned after delivery she became red with rage when she saw her husband sleeping with his paramour. She got sore over her husband’s incorrigible attitude and decided to teach a lesson to the servant. In her fit-of frenzy and emotive impulse the respondent took the son of the servant and pushed him into the well, causing death of the boy. When the servant started to search her son the respondent disclosed her act of pushing the child into the well thus causing death. The matter was immediately reported to the police and the respondent was taken to custody. The respondent confessed her act in the court and was sentenced life imprisonment. She expiates for the wrong done by her and is a totally transformed woman.
Case No 3. Kavita

Kavita is 27 years old, belongs to backward community, is Marathi speaking, and has had 9 years of schooling. She was engaged at the age of 13 and married the following year to a man about 6 years older than her. Immediately after the wedding, she was taken to her marital home which was a thatched mud hut in a remote suburb of Bombay. Her household work included cooking, cleaning, taking care of her disabled mother-in-law and sister-in-law, and washing their clothes (including menstrual clothes). In the absence of regular water supply, water had to be obtained from three different sources: drinking water to be fetched from the nearby municipal tap, well water to be drawn for bathing, and river water to be used for washing clothes. Since money was scarce, she was given insufficient food, and sent by her mother-in-law to work as a domestic help in a nearby house within fifteen days of her marriage. Her husband discovered this accidentally and started to beat her up but was prevented by the neighbours. This was her first taste of his violent tendencies. She was forbidden to go out to work and her husband brought her some assembly work to do at home. But all her earnings were spent on food for the family; in addition, she had to pawn all her jewellery to pay for the repairs of the hut. No new clothes were given to her. After about six years of marriage, her mother-in-law inherited some land in her native village and sold it, and gave her son the money to start a small ball-point pen factory. On this occasion, Kavita’s husband bought her a sari - the first time ever. Kavita had no children, and the medical examination showed that she had no defect. Her husband refused to undergo medical tests. He had a mistress with whom he began to stay for days on end. When Kavita caught him red-handed, he battered her badly. She could not tell her parents, because she was not allowed to visit them by herself. After her father's death, the battering increased and was provoked by the slightest incident, such as dislike for the tea prepared by her. If she tried to keep out of his way, her avoidance became a provocation. He beat her with his hands, used a bicycle chain, and once attempted to use a knife on her. When she lodged a complaint with the caste panchayat (council of elders), she was told not to bring dishonour to her husband's family. Kavita's family's suspicions were aroused, and her sister once came to take her out shopping, but her's father-in-law caught hold of her clothes and started kicking her. She retaliated, but her husband arrived and dragged her inside, threatening to kill her. All the same, she lodged a complaint with the police against her husband and
father-in-law, and was advised to return to her mother. She did that, but one day her husband again came and forced her to return. Kavita did not agree for the same. Tussel went on for a long time between the two which had resulted in assault by Kavita. She out of vain was forced to pick up a stone and threw, which resulted in head injuries. Later Kavita was imprisoned for three years.

**Case No 4. Munniamma.**

Munniamma has two sons and a daughter. Urvarshi is her elder daughter in law. Twenty-two-year-old Urvarshi comes from a hindu community, speaks Kannada, and has had only 4 years of schooling. Urvarshi ’s domestic harassment started within a fortnight of her wedding, when her mother-in-law began persistent complaints that she was not presented with a sari during the wedding. Finally Urvarshi answered that this was not customary in their community (to which both belonged), which angered her mother-in-law so much that she started to beat her up. Urvarshi went to her parental home and brought the required sari. The harassment increased, demands were made for more clothes and household articles, and Urvarshi continued to be battered by both her husband and the mother-in-law. Pretexts, such as bad cooking, were found to harass her; and once, her mother-in-law poured hot curry over her head because she did not like the taste of it. Urvarshi was made to do the cooking and household work during the whole day after her husband left for work in the morning, but complaints were made to him about her laziness, to ensure a beating. A severe battering was routine at least once a week, and the husband's temper could flare up any time. Once Urvarshi husband was pressing his clothes with an iron borrowed from the neighbours who came to ask for it. Urvarshi chided him for constantly borrowing things from the neighbours, and he burnt her arm with the hot iron. Three years after her marriage, Urvarshi became pregnant. After the initial joy, her mother-in-law became discontented, and mooted the scheme of getting another and "better" wife for her son. One night he kicked Urvarshi in the abdomen; she bled for 4 to 5 days and had a miscarriage. She was not given any medical help, nor was her parents told. Her mother, worried because of her long silence, came to visit her and learned about the situation. Urvarshi herself was never allowed to speak to or visit her parents alone. During the Diwali festival, however, Urvarshi was told to visit her parents and stay there for a month in order to recuperate. About this time, her parents heard rumours
that Urvarshi’s husband had married again. She went back to her husband, but before allowing her to return, her mother-in-law asked her mother to give a written statement that if a disaster was to befall Urvarshi her in-laws would not be held responsible. She explained that this was necessary because of Urvarshi's carelessness with the stove while cooking. Urvarshi’s parents, having confirmed the information about her husband's second marriage, feared for her life, and came to fetch her. She returned with her mother a few days later to collect her things, but found the new wife cooking in the kitchen and her husband sitting nearby. Upset at this sight, Urvarshi reproached him. He pulled out a tin of kerosene and tried to douse her with it (in order to set her on fire). She ran out screaming, her mother also shouted, and the neighbours gathered. After a fight, Urvarshi and her mother went to the police station and lodged a complaint under Section 498 A of the Indian Penal Code. Urvarshi’s husband, Munniamma and sister in law were arrested and sentenced.

Case No. 5 Mumtaz

Mumtaz is 23 years old, and belongs to a poor immigrant Muslim family from Bijapur. She is illiterate, but speaks Hindi and Kannada in addition to her mother tongue, Urdu. At the age of 12, Mumtaz was married. The two families had known each other for a few months in Bombay, having migrated from the same State. After the marriage, it was discovered that Mumtaz's husband was already married. The first wife (also 12 years old at her wedding) was harassed and beaten up until she ran away and remarried. Mumtaz's husband's family was poor and lived on the pavement. Mumtaz sold garlands in the suburban trains until 9 a.m., then went with her husband to dig earth at construction sites, returned at 6 p.m., fetched water and did all the cooking. Once Mumtaz’s uncle-in-law who was competing with them in the business, beat Mumtaz. up (but not anybody else in the family). Mumtaz was five months pregnant at the time. Soon after, her husband hit her so hard that she became partially deaf in one ear. Her mother took her home, but she had a miscarriage within a couple of days. After three months, her husband came to fetch her, along with a few caste representatives who intervened on his behalf. Soon the problem started again. Mumtaz had to do hard physical work while her mother-in-law lay at home drinking all day. At night the mother-in-law would complain about Mumtaz's laziness and her husband would beat her up. Several times Mumtaz went back to her mother's house,
and was fetched by her husband with promises of better behaviour. Later Mumtaz gave birth to a baby daughter who was accidentally and deliberately maltreated by Mumtaz’s mother-in-law who was often drunk. The baby developed head injuries and one of her arms was paralysed. Mumtaz’s husband would not take her to a medical doctor but insisted on getting black magic done. In a fit of depression, Mumtaz tried to commit suicide by throwing herself on the railway tracks, but was pulled back by a woman who saw her. A few days later, the baby died. Mumtaz feels that her mother-in-law wanted the baby dead because it was a girl. Mumtaz later gave birth to another baby girl, and Mumtaz’s mother took the baby to her own home to look after her. Mumtaz's husband started drinking and beating her every night. She got pregnant again and gave birth to yet another daughter. The baby was branded with a hot needle, ostensibly as a ritual practice. The wounds got infected, and Mumtaz's mother got the baby hospitalized and cured. Harassment continued, and Mumtaz's husband started blaming her because she could not produce a son. One day he hit her with a small grinding stone, and the neighbours had to rescue her. Mumtaz could not tolerate anymore and in that situation she picked up a lathi lying and hit her husband on the head who later died in the hospital. Her in-laws have lodged the complaint and she is convicted for murder. But she has no regrets as she feels she has saved her second baby after loosing her first daughter.