THE NATURE OF THE RELATIONSHIP BETWEEN DEPRIVATION, AGGRESSIVE CONDUCT, WELL BEING AND FRUSTRATION AMONG THE INMATES OF NIGERIA PRISON. A SURVEY OF SOKOTO CENTRAL PRISON

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Abstract
The work probes the relationship between deprivation, aggressive/frustration behaviour, and well being among the inmates in congested Nigerian prison. However, the study elaborated the meaning of deprivation, types of deprivation, theory of deprivation, literature review, method of information collection and data analysis. The deprivation or loss of familiarity is the most immediately obvious pain. The prisoner must live in a world shrunk to thirteen and a half acres and within this restricted area his freedom of movement is further defined by a fixed system of passports, the military organizations in moving from a single detail within the psychiatric hospital to another, and the demand that he remain in his cell until given permission to do otherwise. In short, the prisoner’s loss of intimacy is a double one first, by confinement to the institution and second, by confinement within the establishment. The simple fact that the individual’s movements are restricted, however, is far less solemn than the fact that imprisonment means that the inmate is cut off from family, relatives, and friends. It is not difficult to see this isolation as painfully depriving or frustrating in terms of lost emotional relationships, of loneliness, and ennui. But what makes this pain of imprisonment bite most deeply is the fact that the restriction of the criminal represents a deliberate, moral rejection of the criminal by the tolerant community.

Key words: Deprivation, inmates, relationship, and well being.
INTRODUCTION
Deprivation refers to the lack or denial of something considering to be a necessary or lack of material benefits considered to be a basic necessity in the Society. Deprivation in this study, refers to loss of inmates right (Alloy, Risking & Manos, 2005; Bartol, 2008; Fals- Stewart, Leonard & Birchler, 2005; Hofvander, Ossowski, Hundstrom & Anckarsater, 2009).

Deprivation as an element, long durations may lead to economic crisis and changes to brain physiology. In the absence of a societal context that is needed to validate perceptions of their environment, prisoners become highly malleable, abnormally sensitive, and exhibit increased vulnerability to the influence of those controlling their surroundings. Social connection and the support provided from social interaction are prerequisite to long-term social adjustment as a prisoner. Prisoners exhibit the paradoxical effect of social withdrawal after long periods of solitary confinement. A shift takes place from a craving for greater social contact, to a fear of it. They may grow lethargic and apathetic, and no longer be able to control their own conduct when released from solitary confinement. They can come to depend upon the prison structure to control and limit their conduct. Long-term stays in solitary confinement can cause prisoners to develop clinical depression, and long-term impulse control disorder. Those with pre-existing mental illnesses are at a higher risk for developing psychiatric symptoms. Some common behaviours are self-mutilation, suicidal tendencies, and psychosis (Dye, 2010).

Deprivation of inmates’ right has affected their social institution as a system or whole both in and outside the prison environment, because instead of being reformed, most of the convicts came out to become hardened criminals, this might be attributed to the problem of deprivation and lack of societal well being (Reinke & Herman, 2002). Since in most of the prisons, there is no proper separation between the hardened criminals and minor criminals, there is every possibility of the minor criminals to determine and develop interest in committing serious criminal offenses, such as: armed robbery, gambling, stealing, adultery and assassination. Aggressive behavior can further be attributed to other problems such as congestion, poor physical and social well being, disease, which can easily be contacted as a result of improper ventilation and a contact between the healthy convicts and sick ones, therefore several factors contribute to aggressive behavior, such as deprivation, frustration and low social well being (Calvete & Orue, 2011, Haynes, 2006).

Deprivation is a mental illness that inmates of today are facing which have been considered by a reckless disregard for social norms, an inability to experience guilty, and which leads to aggressive behavior (Mendez, 2009). Therefore there is relationship between deprivation and aggressive behavior among male and female inmates who are in contact with each other (Meier, Slutskec, Arndt & Cadoret, 2008).

THEORITICAL FRAME WORK
Relative deprivation Theory
Relative deprivation theory is an explanation of reasons for people’s reaction to situations. The theory which was propounded by J.C Runcima and Robert Marton assumes that people’s reaction to the situation is determined by making references to others in a similar situation. Deprivation theory is needed to explain the causes and consequence of deprivation among the inmates of Nigerian congested prison.

The concept of related to relative deprivation is the lack of resources to sustain the diet, lifestyle, activities and amenities that an individual or group is accustomed to or that are widely encouraged or sanctioned by the fellowship to which they belong. Measuring relative deprivation allows an objective comparison between the situation of the individual or group compared to the rest of society. Relative deprivation may also emphasize the individual experience of discontent when being deprived of something to which one believes oneself to be entitled, however emphasizing the status of the individual makes objective measurement problematic (Thomson Wadsworth, 2005).

It is relevant to researchers studying multiple subjects in social skills. It has sometimes been linked to the biological concept of relative fitness, where an organism that successfully out produces its competitors leaves more copies in the gene pool (Richard T. Schaefer, Racial and Ethnic Groups, 11th Ed., Pearson Education, 2008).

Social scientists, particularly political scientists and sociologists, have cited ‘relative deprivation’ (especially temporal relative deprivation) as a potential cause of social movements and deviance, leading in extreme situations to political violence, such as rioting, terrorism, civil wars and other instances of social deviance such as crime. For instance, some scholars of social movements explain their rise by citing grievances of people who feel deprived of what they perceive as values to which they are entitled. Likewise, people engage in deviant behaviors when their means do not match their goals. (Solidarity, Springer, 1999)
According to deprivation Theory masses who are deprived of things deemed valuable in society—whether money, justice, status or privilege—join social movements with the hope of redressing their grievances. This is a beginning stage of attending at why people join social movements; even so, it is still more significant to look at the relative deprivation theory, a belief that people join a social movement founded on their evaluations of what they believe they should have compared with what others receive. On the contrary, absolute deprivation is people's actual negative condition; relative deprivation is what people believe they should have relative to what others have, or even compared with their own past or perceived future. Improved conditions, fuel human desires for even better conditions, and thus can spark revolutions. (Dambrun, M., Taylor, D. M., McDonald, D. A., Crush, J., & Meot, A, 2006).

Feelings of deprivation are relative, as they come from a comparison to social norms that are not absolute and usually differ from time and place. This differentiates relative deprivation from objective deprivation (also recognized as absolute deprivation or absolute poverty) - a term that applies to all underprivileged people. This conducts to an important conclusion: while the objective deprivation (poverty) in the globe may change over time, relative deprivation will not, as long as social inequality persists and some humans are better off than others. Relative deprivation may be temporal; that is, it can be seen by people that feel an expansion of rights or wealth, accompanied by stagnation or reversal of those profits. Such phenomena are as well known as unfulfilled rising expectations. In an object lesson from the political realm, the lack of the right to vote is more probable to be felt as a deprivation by people who experienced it once than by the masses who never had the chance to vote (Dambrun, M., & Taylor, D. M, 2013).

The deprivation model is based on the classic work of Clemmer (1940), Sykes (1958), and Goffman (1961), holds that male-adaptation to prison (e.g., Violence, aggression, anxiousness, depression, suffering, and suicide) are produced of the restrictive prison milieu. That is, depriving conditions of the prison produce aggressive or suicidal behavior. Sykes (1958) coined the phrase “pains of imprisonment” to identify these conditions. He identified five specific deprivations and suggested that inmates successfully adapt to these pains through inmate solidarity and a system of inmate social roles. Clemmer (1940) described this process of adaptation as “prisonization.” Goffman (1961) referred to the prison as a “total institution” and detailed how inmates are adapted to life in the total institution following a process of mortification or changing of the self. In a more recent history of the modern prison, Farrington (1992) contended that the prison is a “not-so-total” institution. Evidence of the “get tough” posture on crime and 13 punishment as well as the proceeds of the total institution model witnessed in the supermax prisons, however, suggests a shift toward a more total prison. Farrington’s perspective along with the advance of the supermax prison illustrates how variations in degrees of deprivation are directly related to inmate adaptation. The deprivations and inmate adaptations that correspond to each of these perspectives are represented in the succeeding paragraphs. Sykes’ Pains of Imprisonment According to Sykes (1958: xiv), the “prison represents a social arrangement in which an effort is made to create or maintain total or near total social control.” This total control of the inmate is at the heart of what Sykes refers as the “pains of imprisonment.” He identifies five pains or losses associated with prison life: deprivation of liberty, deprivation of goods and services, deprivation of heterosexual relationships, loss of autonomy, and deprivation of security.

The deprivation or loss of familiarity is the most immediately obvious pain. The prisoner must live in a world shrunk to thirteen and a half acres and within this restricted area his freedom of movement is further limited by a rigid system of passports, the military organizations in moving from single point inside the psychiatric hospital to another, and the demand that he remain in his cell until given permission to manage differently. In short, the prisoner’s loss of familiarity is a double one first, by confinement to the institution and second, by confinement within the institution (Sykes 1958: 65). Sykes (1958: 65) adds: The mere fact that the individual’s movements are restricted, however, is far less sober than the fact that imprisonment means that the inmate is cut off from family, relatives, and acquaintances. It is not hard to see this isolation as painfully depriving or frustrating in terms of lost emotional relationships, of aloneness, and ennui. But what makes this pain of imprisonment bite most deeply is the fact that the restriction of the criminal represents a deliberate, moral rejection of the criminal by the liberal community.

Thus, the loss of liberty consists not only of inmates’ confined to the prison institution, but likewise to the restrictive conditions within the creation that ultimately isolate inmates from family, allies, and the outside. This isolation and rejection are a threat to inmates’ self-conception and must be “warded off, turned aside, rendered harmless” if the captive is to support and adapt to prison life (Sykes 1958: 67). The second pain, deprivation of goods and services, consults to the standard of living afforded to the inmate in prison. Here,
Sykes refers to the prisoner’s basic material need the so-called necessities of life as well as the amenities, however perceived by outsiders and inmates as “rightful.” This admits the basic demands of food, clothing, and shelter, chances for proper health and medical care, including exercise, and material possessions including luxuries such as coffin nails and individual cell furnishings. In some situations, Sykes notes, “inmates are better off in prison, in strictly material terms, than they could ever hope to be in the rough-and-tumble economic life of the liberal community” (68). Nevertheless, “the average inmate finds himself in a harshly Spartan environment which he defines as painfully depriving” (Sykes1958: 68). Inmates are also deprived of heterosexual relationships. The exclusive right of conjugal visits is often refused. Visits with spouses and significant others take home under strict scrutiny of safety devices and usually happen through a plate glass window by means of face-to-face phone communication.

Lack of straight relationships is described as psychologically and physically frustrating for inmates. Overt homosexual threats as well as latent homosexual fears are realities in the lifetime of the convict. For male inmates, Sykes notes that a man’s masculinity is called into question when heterosexual relationships are traversed.

Also called into question is the inmate’s status as an adult versus child. The deprivation of autonomy an inmate experiences while in prison includes the inability to make choices and the ways their lives are totally and minutely controlled by a vast array of regulations imposed by guards. These regulations often do not “clear sense” or are arbitrarily applied. As described by Sykes (1958: 73): Most prisoners, in fact, have an intense hostility against their far-reaching dependence on the conclusions of their captors and the restricted ability to make choices must be included among the pains of imprisonment along with restrictions of physical liberty, the possession of goods and services, and heterosexual relationships. For adult inmates, being thrust back into childhood dependency is frustrating. Because this loss of autonomy is imposed rather than freely granted, it is particularly painful and hard to run, and is another deprivation of prison life that inmates must adapt. The last pain of incarceration is the deprivation of security. The deprivation of protection may include care of physical aggression and exploitation of a person or possessions, and may include threats to a prisoner’s reputation and level of respect. Sykes (1958: 77) observes: There are a sufficient number of outlaws within this group of outlaws to deprive the average prisoner of that sensation of protection which comes from living among human beings who can be reasonably required to abide by the conventions of order. Indeed, living with other crooks who are viewed as violent, dangerous, and out to prove their reputation for toughness is anxiety invoking.

The prisoner must adapt to the loss of security or never feel safe being in prison. Goffman’s Total Institution Parallel to Sykes’ description of the pains of imprisonment is Goffman’s (1961) analysis of the prison as a “total institution.” He determines the entire institution as “a place of abode and work where a heavy number of like-situated individuals, cut away from the wider society for an 16 appreciable period of fourth dimension, together lead an enclosed, formally administered round of spirit” (Goffman 1961: xiii). For Goffman, being “cut away from society” signifies the barriers between the foundation and the external universe (i.e., locked doors, high walls, fences, and surveillance). More importantly, Goffman emphasizes how the social formation of the entire institution is incompatible with the elements of the outdoor world including work, and folk structures. In gain to being cut off from society, inmates lead a formally administered way of spirit. Within the entire institution, inmates’ lives are held away in the presence of other convicts as well as under the authority and surveillance of staff. All inmate activities are tightly scheduled and sequenced/enforced by the institution’s officials. The consequence of this formal round of life is an “entertaining” which gives the inmate incapable, if temporarily, of managing features common to life on the outside (Goffman 1961: 13). Dropping a line about this loss of autonomy, Goffman (1961: 38) explains that: By the time the individual is an adult, he has incorporated socially acceptable standards for the operation of most of his bodily functions, so that the topic of the righteousness of his action gets up only at certain periods. Beyond this he is allowed to work at his own pace. In a total institution, however, minute segments of a person’s line of activity may be subjected to regulations and assessments by staff. In center, inmates are stripped of their former selves and are forced to carry on the role of docile inmate (Foucault 1977). This isolation from the wider society and consequent loss of social roles brings about psychological tension, particularly in instances of involuntary confinement such as the prison. In society to adapt to life in the total institutional environment, the inmates must manage this tension between the home world and the institutional world. Farrington’s Not-so-Total Institution.
As a direct challenge to Goffman’s (1961) notion of the prison as a “total institution,” Farrington (1992) and others (Jacobs 1977; McCorkle, Miethe, and Drass 1995; and Berg and DeLisi 2006) identify the modern prison as “not-so-total.” In essence, prisons and inmates are not as “trim off from society” as Goffman’s ideal type suggests. Berg and Delisi (2006:633) explain: Prisons are no longer ‘total institutions’ whose walls wholly isolate inmates from the residential area. Rather, the barriers between community and prison are porous and permit considerable transference of behaviors that influence inmate conduct.

LITERATURE REVIEW

Few of the conditions imposed on inmates are as severe the loss of autonomy. Yard birds, particularly those serving their sentences in maximum security installations or in special handling units (SHUs), must exist in a world where their freedom of movement is rigidly confined and ordered. For long term inmates, liberty may be deprived for substantial portions of their lifetimes and can bear a severe consequence on their mental wellness. The inmate's loss of liberty comes at two points; first by confinement to the correctional institution and second, by confinement within the establishment. At the beginning level, offenders are cut off from family, relatives and friends, producing what can be a painful deprivation and frustration in terms of lost emotional relationships, loneliness and boredom. Most of their waking hours are expended inside the confines of their cellular phones. There were certainly instances of inmates with a specific problem, but no legitimate process to resolve it who reacted with violence (Morris, 1988).

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

When imprisoned, an offender is placed in prolonged proximity with other inmates who in many cases have a long history of violent, aggressive behavior. It is a state of affairs which has turned out to be anxiety provoking for even the hardest of recidivists. Irrespective of the reciprocal aid and backing which may boom in the inmate population, there is a sufficient number of offenders within this group of offenders to deprive the average inmate of the sensation of security which comes from holding out among people who can be reasonably required to abide by the conventions of society (Sykes, 1966). This deprivation of security arouses acute anxiety, not just because the violent acts of hostility and exploitation can take office, but also because such behavior constantly calls into question the individual's ability to cope in prison and hinder their abilities to live normally in the extraneous universe. The opinions of a long term inmate beginning a 45 year sentence in an American prison illustrate these problems. There will be more violence. How can I break loose it? I am young and I will be living in a maximum security prison. It will be inevitable that I be tried. And I will respond in a manner appropriate for prisons... The constant company of thieves, rapists, killers, aggressive homosexuals, and snitches who will say or answer anything to spare their own hide is far from slowing down. All of these factors exacerbate the stresses of beginning a long prison term. They will not prepare me for release (Santos, 1995, p. 38).

Another threat to the personal security of inmates is the possibility of contacting the HIV virus from another inmate through sexual activity, sharing syringes used to inject intravenous drugs and through unsanitary tattooing practices. Correctional Service Canada (CSC) statistics indicate that in 1997, the known cases of HIV in federal institutions totalled 158 and the number of unknown cases were believed to be a lot higher (CSC, 1998). Contract with HIV infected prisoners entails a risk when bodily fluids are shared, and because
most inmates do not experience the HIV status of fellow inmates, they may engage in high-risk activities with little fear of HIV infection. Others might become fearful of infection, especially those who have been sexually violated.

Some researchers have proposed that male inmates undergo a decrease of the sexual drive and that the sexual frustrations of inmates are, consequently, less substantial than might be anticipated. Yet, these stories were mostly based on the histories of human beings incarcerated in concentration camps or similar extreme situations where starvation, torture and physical exhaustion, reduced life to a struggle for survival or left the captive deep in apathy (Sykes, 1966). In summation to the physiological effects of sexual frustration, Sykes cited possible psychological problems made by the lack of straight relationships for male convicts. A society composed entirely of men tends to generate anxieties in its members concerning their masculinity, regardless of whether or not they are coerced, bribed or seduced into an overt homosexual liaison. Latent homosexual tendencies may be triggered in the soul without being translated into overt behavior and yet still arouse strong guilt feelings at either the conscious or unconscious stage. Sykes made an observation in his 1966 work which is of relevance into our current understanding about male sexuality. Some other factor responsible for aggressive behavior includes poor feeding, inadequate medical care, awaiting trial and low social well being.

All the problems explained in this review affect all the categories of the prisoners be in age, sex, color, literacy level, socioeconomic background, and so on. However, the above-mentioned problems are associated with deprivation of an inmate’s life which can lead to aggressive behavior.

**PHYSICAL DEPRIVATION**

Physical deprivation of inmates is an intentional act causing injury or trauma to another person by way of bodily contact. In most instances, inmates are the victims of physical ill-treatment. Alternative terms sometimes used include physical assault or physical violence, and may also include sexual abuse. Physical abuse may affect more than one abuser and more than one victim. Physical deprive inmates are at risk for later interpersonal problems involving aggressive behaviour, and adolescents are at a much more capital risk for substance misuse. In gain, symptoms of depression, emotional suffering, and suicidal ideation are also common characteristics of the great unwashed who have been physically ill-treated. Giardino, E.R. (12 December 2008).

Seeking treatment is unlikely for a bulk of people that are physically abused, and the ones who are seeking treatment are usually under some kind of legal restraint. The prevention and handling alternatives for physically abused inmates include: enhancing positive experiences early in the maturation of the parental relationship, as well as changing how parents teach, study, and attend to their peoples. Grounds-based interventions include cognitive behavioural therapy (CBT) as well as video-feedback interventions and people -parent psychodynamic psychotherapy; all of which specifically target anger patterns and distorted beliefs, and offer training and/or reflection, documentation, and modelling that focuses on parenting skills and arithmetic means, as well as increasing empathy for the inmates by supporting the parent's taking the child's perspective (Kaufman J (2014).

Maybe not surprisingly, mental illness and developmental disability represent the greatest number of disabilities among prisoners. For instance, a national study of prison inmates with disabilities conducted in 1987 showed that although less than 1% suffered from visual, mobility/orthopaedic, hearing, or speech deficits, much higher percentages suffered from cognitive and psychological impairments. A more recent follow-up study by two of the same authors obtained similar results: although less than 1% of the prison population suffered visual, mobility, language, or hearing deficits, 4.2% were developmentally disabled, 7.2% suffered psychotic disorders, and 12% reported "other psychological disorders. It is likely safe to estimate, then, based on this and other subjects, that upwards of as many as 20% of the current prisoner population nationally suffers from either some sort of substantial mental or psychological disorder or developmental impairment. McKie, Robin (9 June 2012).

And it is certainly far more difficult for vulnerable, mentally-ill and developmentally-disabled prisoners to carry out. Incarceration presents particularly difficult adjustment problems that make prison an especially puzzling and sometimes dangerous situation for them. For mentally-ill and developmentally-disabled inmates, part of whose definition (but often undiagnosed) disability includes difficulties in keeping close contact with reality, controlling and conforming one's emotional and behavioural reactions, and generally impaired comprehension and learning, the principle-bound nature of institutional life may have particularly
disastrous consequences. However, both groups are too often left to their own devices to somehow live in prison and go forth without having owned any of their unique needs addressed. Lieberman, A.F. (2007). Compounded with the de-emphasis on treatment that now characterizes our nation’s correctional facilities, these behavior patterns can significantly affect the institutional account of vulnerable or special needs inmates. One commentator has described the vicious cycle in which mentally-ill and developmentally-disabled prisoners can go down. Lieberman, A.F. (2007).

The lack of mental health concern for the severely mentally ill who end up in segregation units has worsened the status of many prisoners incapable of understanding their condition. This is particularly true in instances where prisoners are placed in levels of mental health care that are not intense enough, and start out to refuse taking their medicine. They then get into a vicious cycle in which their mental disease takes over, often causing hostile and aggressive behaviour to the peak that they break prison rules and end up in segregation units as management problems. Once in punitive housing, this regression can go undetected for considerable periods of time before they again experience more closely monitored mental health concern. This cycle can, and frequently does, repeat. Mash, Eric (2010).

A poor sleeper’s is 3.6 percent greater on average, according to Stanford University researchers who establish that those who typically take only five hours of shut-eye a night have more body fat. If you snap only four hours, expect to waste an extra 559 calories the following day, per the American Journal of Clinical Nutrition. Adult males are twice as probable to get diabetes during their lifetime as an outcome of prolonged sub-six-hour nights, regardless of age or activity level, harmonising to a Yale University Medical School study. After 24 hours without sleep, cognitive, motor performance matches that of someone five drinks in, says a study in Nature. Need to game the system? Drink a medium coffee and snooze for 20 transactions. In a famous study out of Loughborough University in England, this trick made exhausted drivers feel alert. Altogether the above affected Nigerian inmates. Lieberman, A.F. (2007).

SOCIAL DEPRIVATION
Social deprivation is the reduction or prevention of cultural normal interaction between an individual and the reposing of society (Williams, J. (2000).

In that respect are several significant facets that are consistently found within research on the subject. Social deprivation of inmates refers to special access to the social world due to constituents such as low socioeconomic status or poor preparation. The socially deprived may have "a loss of basic capabilities due to a lack of freedom, rather than merely low income. This lack of freedoms may include reduced opportunity, political voice, or dignity (Donelan, B. (2003).

Part of the confusion in defining social deprivation seems to stem from its apparent similarity to social exclusion. Social deprivation may be correlated with or contribute to social exclusion, which is when a member in a particular society is ostracized by other members of the club. The excluded member denies access to the resources that allow for social, economic, and political interaction. Pierson has identified five key components that put social exclusion in motion – poverty, lack of access to jobs, denial of social supports or peer networks, exclusion from services; and negative attitude of the local neighbourhood (Hobcraft, J. (2002).

It is also associated with abusive caretaking, developmental delay, mental illness and subsequent suicide. Although a soul may be socially deprived or excluded, they will not necessarily develop mental illness or perpetuate the cycle of neediness. Such groups and people may have complete normal development and retain a solid sense of community. Yard birds in general and Nigeria in particular are suffering from social deprivation. (Weitin, W. (2007).

SPYROLOGICAL DEPRIVATION
The adaptation to captivity is almost always difficult and, at times, creates habits of thinking and doing that can be dysfunctional in periods of post-prison adjustment. However, the psychological effects of incarceration vary from individual to individual and are often reversible. To be sure, then, not everyone who is incarcerated is disabled or psychologically harmed by it. Only few people are completely unchanged or unscathed by the experience. At the rattling least, prison is painful, and incarcerated persons often suffer long-term effects from having been subjected to pain, loss, and extremely atypical patterns and norms of living and interacting with others (Prison Journal, 80, 3-23 (2000).

The empirical consensus on the most negative effects of incarceration is that most people who have done time in the best-run prisons return to the free world with slight or no permanent, clinically-diagnosable psychological disorders as a termination. Prisons do not, in general, make people "crazy." Yet, even
researchers who are openly sceptical about whether the pains of imprisonment generally translate into psychological harm concede that, for at least some people, prison can produce negative, long-lasting change. And most people concur that the more extreme, harsh, unsafe, or otherwise psychologically-taxing the nature of the restriction, the larger the number of people who will sustain and the deeper the damage that they will incur. Mental Health Treatment in State Prisons, 2000. (NCJ 188215), July, 2001.

Rather than concentrate on the most extreme or clinically-diagnosable effects of imprisonment, however, I prefer to focus on the broader and more subtle psychological changes that occur in the routine course of adapting to prison life. The term “institutionalization” is employed to identify the procedure by which inmates are shaped and transformed by the institutional environments in which they exist. Sometimes called “prisonization” when it occurs in correctional settings, it is the shorthand expression for the negative psychological effects of incarceration. The procedure has been considered extensively by sociologists, psychologists, psychiatrists, and others, and necessitates a singular lot of psychological adaptations that often happen in varying levels in response to the extraordinary demands of prison life. In general terms, the process of prisonization involves the internalization of the norms of prison life into one's habits of thinking, belief, and behaving.(New York: Oxford University Press (1995).

It is significant to stress that these are the natural and normal adaptations made by prisoners in response to the unnatural and abnormal conditions of prisoner life. The dysfunctionality of these adaptations is not "pathological" in nature (even though, in pragmatic terms, they may be destructive in effect). They are “normal” responses to a lot of pathological conditions that become problematic when they are carried to extreme lengths, or become chronic and deeply internalized (so that, even though the conditions of one's life have changed, many of the once-functional but now counterproductive patterns remain). Like all processes of gradual change, of course, this one typically occurs in stages and, all other things being equal, the longer someone is incarcerated the more significant the nature of the institutional shift. When most people first enter prison, of course, they find that being forced to adjust to an often harsh and rigid institutional routine, deprived of privacy and autonomy, and subjected to a diminished, stigmatized status and extremely sparse material conditions is stressful, unpleasant, and unmanageable. [United States District Court, Southern District of Texas, 37 F. Swallow. 2d 855 (S.D. Texas 1999).]

Nevertheless, in the form of becoming institutionalized, a transformation starts. Persons gradually become more habituated to the restrictions that institutional life imposes. The various psychological mechanisms that must be applied to adjust (and, in some harsh and dangerous correctional environments, to survive) become increasingly "natural," second nature, and, to a degree, internalized. To be sure, the process of institutionalization can be elusive and difficult to spot as it happens. Therefore, prisoners do not "choose" do succumb to it or not, and few people who have become institutionalized are aware that it has occurred to them. Fewer still consciously decide that they are going to willingly allow the shift to take place. The process of institutionalization is facilitated in cases in which persons enter institutional settings at an early age, before they have formed the ability and expectation to control their own life choices. Because on that point is less stress between the needs of the psychiatric hospital and the autonomy of a mature adult, institutionalization proceeds more rapidly and less problematically with at least some younger inmates. Moreover, younger inmates have little in the way of already developed independent judgment, hence they deliver little if anything to revert to or rely upon if and when the institutional structure is transferred. And the longer someone stays in an insane asylum, the bigger the likelihood that the process will transform them (The International Use of Incarceration,” Prison Journal, 75, 113-123 (1995).

Forming such an outward image requires emotional responses to be carefully evaluated. Thence, the prisoners struggle to contain and conquer their own internal emotional responses to events around them. Emotional over-control and a generalised lack of spontaneity may occur as a consequence. Admissions of vulnerability to persons in the immediate prison environment are potentially life-threatening because they invite exploitation. As one experienced prison administrator once wrote: "Prison is a barely controlled jungle where the belligerent and the strong will exploit the weak, and the weak are dreadfully aware of it. Some prisoners are driven to become remarkably skilled "self-monitors" who calculate the anticipated effects that every facet of their behaviour might have on the remainder of the prison population, and strive to get to such calculations second nature ( Bonta & Gendreau, pp. 353-359)

Prisoners who labor at both an emotional and behavioral level to develop a "prison mask" that is unrevealing and impenetrable risk alienation from themselves and others, may develop emotional flatness that becomes chronic and debilitating in social interaction and relationships, and find that they have created a permanent
and unbridgeable distance between themselves and other people. Many for whom the mask becomes especially thick and effective in prison find that the disincentive against engaging in clear communication with others that prevails there has directed them to withdrawal from authentic social interactions altogether. The alienation and socially distancing from others is a denial not only against exploitation but also against the realisation that the lack of interpersonal control in the immediate prison environment makes emotional investments in relationships risky and unpredictable (Social Problems, 41, 177-194 (1994), p. 183.

RESEARCH METHODOLOGY
In this section, an endeavour is made to explain how information is starting to be picked up from the area. Considering the nature of the survey, quantitative method seems to be relevant. Consequently the primary concern of this section a research plan, brief history of the subject region, description of the population, sample and sampling techniques, accumulation, and method of data analysis.

Research design
This study was approached by a quantitative research method which employed survey research design. According to Creswell (1994) quantitative study is the investigation of the human social problem based on testing of theory composed of variables which require to measure with numbers and analyzed with statistical method in order to achieve a logical end to assure whether expected prediction of theory hold true or not. This quantitative research employed a cross-sectional and survey as well as correlation study. The correlation method used to encounter the nature of relationships between variables. Two or more variable measures drawn from the same group of themes were related by correlation research design (Salkind, 2006). In this inquiry, sketch design was used because survey involved using a questionnaire to find out the relationship between deprivation, well being, frustration and aggressive behavior among the inmates in Nigerian prisons. According to Barusch & Wilby (2010) and Duan, Brown & Keller, (2010) survey design is a type of descriptive technique that takes a set of scientific and organized techniques for keying out, explaining phenomena and exploring attitudes and behaviors through questionnaires for the purpose of generalizing the findings to a larger population of interest. Survey design has been selected because it helps together and identify the features of a population for a valid outcome (Fraenkel, Wallan & Hyun, 2012).

The reason why quantitative research was required, because the focal point is to plan or establish the use of tests, scales and statistical methods to collect and analyze numerical information, objectivity, validity and reliability for the intent of identifying and explicating the issues that contribute to the explanation of deprivation, well being, frustration and aggressive behavior. It has been practiced in many social sciences (Burnard, Morrison & Gluyas, 2011).

Survey design has been chosen because is among the best method of collecting information from the prison inmates, about aggressive behavior (Igou, 2007; Shaughnessy, Zechmeister & Zechmeister, 2009).

Location of the study
The study was carried out in Sokoto State central prison in Nigerian. The prison was built in 1908 right in the Marina area of Sokoto State during the period of British colonial in Nigeria. Since then the prison has passed through developmental levels, the country felt that from regional two federal levels. It should be mentioned, nevertheless, that it was Prison Act 1960 that effectively brought all the Nigerian prisons under the legal power of the federal government. However, the researcher selected Sokoto State Central prison, Zamfara state and Kebbi state central prison in the northwestern constituent of the Nigeria, but the controller general of the Nigerian prison service only approved Sokoto state central Prison because of the crisis of Bokoaharam that affect the system in particular and the social institution in general. Sokoto Central Prison as proposed selected prison in Northwestern Nigeria is one of the 234 prisons in the country (Nigeria) with the total capacity of 576 inmates. Population of sokoto central inmates was 640 and 164 waders . The population is divided into categories or section based on awaiting trail and convicted. Moreover, Sokoto central prison has different department, which include, welfare unit, security instructor, central admin section, sewing department, carpentry department, wandering department. These sections work inter party in order to maintain and achieve the main objective of the total creation.

Sokoto central prison was selected and approved by the Nigerian Government in order to render the remaining prisons in Nigeria since the bunk is all the same and under one control. Some other reason is that Sokoto central prison is one of the biggest and a central prison in the zone which comprises of different
inmates from different States. Lastly, there are issues of deprivation, well being, frustration and aggressive behaviour among the convicts, which lead to the retardation of human development.

**Population of the study**

The subject population for this study are the inmates males only of the Sokoto central prison, both the awaiting trial and convicted were inclusive. From aged about 18-45 and 45 for the above years. These were not mentioned are excluded. The female was kept out because they are very few in numbers and the stratum of their aggressive behavior is minimal. Population is defined as all members of any well defined people, event and it also the entire group of interest to the researcher, the group to which researcher would like the answers to be generalized (Ary, Jacobs & Sorensen, 2009)

**Sampling size**

Sample refers to the portion, a fraction or part of the population that will select for the purpose of the study that represent the entire population (Avana et al 2004). Graziano & Raulin, (2000) as well as Neumann, (2006) indicate that the sample size in survey depends on the research design, the kind of data analysis employed, how accurate the sample has to be, and various other factors concerning the exact research. Finding a suitable sample size is really essential, since a heavy act of sample size determinants might also constrained by cost; in terms of money, time administrative support, stress, resources and the number of researchers (Borg & Gall, 1979; Cohen, et al., 2007). A small samples may lead to wrong results (Schaffer, 2007). However, Sekeran (1983) suggested that as a normal thumb, more sample size of about 350 to 500 could be effective. Similarly, Tabachnick & Fidell, (1996) given the accompanying template for sample size: 50 as very poor; 100 as poor, 200 as fair, 300 as well, good, 500 as very good and 1000 as excellent. According to Cohen, Manion & Morrison, (2007) sampling is a minor subset of observations selected to characterize and generalize researcher’s findings about the intact population of interests. There are several procedures that determine the sample size of the research. For the purpose of this research, Cochran’s (1977) method was used in order to produce precise needed sample size related to the population. Cochran’s (1977) formula uses two much more important factors:

1. The inaccuracy the researcher is eager to accept. 
2. The alpha level of accepting the risk, the researcher is willing to receive that the true border of error goes above the acceptable margin of error.
3. \( t^2 = 1.96 \text{ or } 2 \) as maintained by Bartlett; (2001), the \( t \) value for the alpha 0.5 and a population of 
   \[ > 60 = 2 \]

\( t^2 = \text{risk willing to assume that actual margin of error may exceed acceptable margin of error.} \)

\( P = 0.5 \) (according to Cochran’s (1977) recommended that, the researcher should use 0.50 as an estimated of the population ratio).

\( P = \text{estimates the ratio of the elements in the population of the categories of interest (estimated variance in the population).} \)

\( Q = 1-p \text{ } q=1-0.5 = 0.5 \)

\( P \text{ } q = \text{estimated variance in population (50% chance = 0.5).} \)

\( D = 95\% \) (0.5) Bartlett et al (2001) asserted that, an alpha level 0.5 is acceptable for many research.

\( D = \text{acceptable margin of error for the proportion being estimated} = 0.05 \) (the error researcher is willing to have a bun in the oven).

\( N = \text{population size.} \)

The Cochran’s (1977) Sample formula is shown to a lower place:

\[ n = \frac{n_0}{1 + \frac{n_0}{N}} \]

\( n = \text{Sample size} \)

Where \( n_0 = \frac{(c_i)^2(p)^2}{(d)^2} \)

\( c_i = 95\% \text{ confidence interval} \)

\( p = 50\% = 0.5 \text{ assumed proportions} \)

\( d = 0.05 \) \( \alpha \) level

\( N = \text{total population} \)

\[ n_0 = \frac{(2)^2(0.5)^2}{(0.05)^2} \]
\[ \frac{3.84 \times 0.25}{0.0025} = 384 \]

\[ n_0 = 384 \]

\[ n_1 = \frac{384}{1 + \frac{0.6}{1.6}} = 240 \]

Additional 25% to avoid drop out based on (\(n\)). To calculate the 25% here is the procedure.

\[ \frac{240}{100} \times 25 = 60 \]

Nagoya et al, (2005) In this study, the sample size is 300 respondents.

**Sampling Technique**

According to Gravette and Forzano (2006) that, any population of the survey which comprises of a number of sub-groups, especially gender, age group and class are expected to show their dissimilarities when studied. Thus, in this work, the researcher used probability sampling technique in which the population sample for the research was drawn through stratified simple random sampling. Rubin and Rubin (2005) assert that, on the technique of picking out samples, rather than selecting large samples representative is enough to make generalizations as in the case of quantitative study. According to Cohen (1988) selecting a representative sample of a population is better than obtaining a large, but biased sample that would contribute to an erroneous opinion in the population.

**DATA ANALYSIS**

<table>
<thead>
<tr>
<th></th>
<th>Aggressive Behavior</th>
<th>Deprivation</th>
<th>Prisoners Well Being</th>
<th>Relationship between the Inmates and Waders</th>
<th>Number in one room</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aggressive Behavior</td>
<td>1</td>
<td>0.174*</td>
<td>-0.117*</td>
<td>-0.114*</td>
<td></td>
</tr>
<tr>
<td>Deprivation</td>
<td></td>
<td>1</td>
<td>0.575**</td>
<td>0.098</td>
<td></td>
</tr>
<tr>
<td>Prisoners Well Being</td>
<td></td>
<td></td>
<td></td>
<td>0.151**</td>
<td>1</td>
</tr>
<tr>
<td>Relationship between the Inmates and Waders</td>
<td>-0.114*</td>
<td>0.098</td>
<td>0.151**</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Number in one room</td>
<td>0.131*</td>
<td>-0.065</td>
<td>-0.192**</td>
<td>-0.076</td>
<td>1</td>
</tr>
</tbody>
</table>

* Correlation is significant at the 0.05 level (2-tailed).
** Correlation is significant at the 0.01 level (2-tailed).

**Aggressiveness vs Deprivation**: The results showed that there is a significant positive correlation between aggressiveness and deprivation. This implies that the probability that the prisoners will be aggressive when they are been deprived of their right is very high. So, delay of judgment and detention before trial attributed to the slow judicial process which is also an abuse of human right that can equally instigate aggressive behaviors.

**Aggressiveness vs Prisoners Well Being**: The results showed that there is a significant negative correlation between aggressiveness and Prisoners Well Being. This implies that the prisoners become less aggressive if they have been taken care of properly.
Aggressiveness vs Relationship between the Inmates and Waders: The results showed that there is a significant negative correlation between aggressiveness and Relationship between the Inmates and Waders. This implies that the prisoners become less aggressive if they have been taken care of properly.

Aggressiveness vs Number in one room: The results showed that there is a significant positive correlation between aggressiveness and number of prisoners in one room. This implies that poor physical and social well being as results of congestion and improper ventilation can instigate aggressiveness among prisoners.

CONCLUSION
Therefore, the loss of liberty consists not only of inmates’ confined to the prison institution, but similarly to the restrictive conditions within the universe that ultimately isolate inmates from family, allies, and the remote. This isolation and rejection are a threat to inmates’ self-conception and must be “warded off, turned aside, rendered harmless” if the captive is to endure and conform to prison life. The second pain, deprivation of goods and services, consults to the standard of living afforded to the inmate in prison. Here, Sykes refers to the prisoner’s basic material need the so-called necessities of life as well as the amenities, however perceived by outsiders and inmates as “rightful.” This admits the basic demands of food, clothing, and shelter, chances for proper health and medical care, including exercise, and material possessions including luxuries such as coffin nails and individual cell furnishings. In some situations, Sykes notes, “inmates are better off in prison, in strictly material terms, than they could ever hope to be in the rough-and-tumble economic life of the liberal community Nevertheless, “the average inmate finds himself in a harshly Spartan environment which he defines as painfully depriving. Inmates are also deprived of heterosexual relationships. The exclusive right of conjugal visits is often refused. Visits with spouses and significant others take home under strict examination of safety devices and normally happen through a plate glass window by means of face-to-face phone communication.

REFERENCES


Institutional Conditions and Inmate Composition`. Journal of Criminal Justice 38, 796-


