IJGGSD
ISSN: 3155-7716
International Journal of Global Goals and Sustainable Development
RESEARCH | INNOVATION | INCLUSION | SUSTAINABLE FUTURES
DOI: https://doi.org/10.65339/ijggsd.V1.I1.58

Challenges and Needs of Persons Deprived of Liberty: Basis for Program Development Plan

Joseph Salise Antiga, RCrim.
Doctor of Philosophy in Criminal Justice Education, Specialization in Criminology, PHINMA Cagayan de Oro College, Carmen, Cagayan de Oro City, Misamis Oriental, Philippines

Email: josephantiga2026@gmail.com

ABSTRACT

This study aimed to determine the challenges experienced by Persons Deprived of Liberty (PDLs) in six selected jail facilities in Northern Mindanao, Philippines, and develop a Program Development Plan responsive to their identified needs. A descriptive mixed-methods design was employed, involving a reported sample of 366 PDLs selected through proportionate stratified random sampling. Data were gathered using a validated researcher-developed questionnaire and focus group discussions, then analyzed through descriptive statistics, analysis of variance, and qualitative categorization. Findings revealed an overall challenge mean of 3.23, interpreted as challenging. Structural challenges were the most pronounced (M = 3.62), particularly overcrowding (M = 3.96), followed by social challenges (M = 3.19), while health and psychological and institutional challenges both recorded means of 3.06. Significant differences emerged across selected dimensions according to age, income, and duration of imprisonment, whereas marital status, offense committed, and educational attainment generally showed no significant differences. Qualitative findings reinforced concerns regarding overcrowding, inadequate healthcare, restricted rehabilitation opportunities, and social discrimination. The study concluded that correctional challenges are interconnected and require coordinated institutional responses. It recommends prioritizing improvements in detention conditions, healthcare accessibility, rehabilitation services, and family support through the proposed Project CARE. The study's geographic scope and descriptive design limit broader generalization and causal interpretation. Nevertheless, its findings provide localized evidence for strengthening correctional management, guiding institutional interventions, and supporting PDL welfare, rehabilitation, and reintegration.

Keywords: *Correctional Facilities, Inmate Welfare, Northern Mindanao, Persons Deprived Of Liberty, Prison Overcrowding, Rehabilitation Programs, Social Reintegration*

1. INTRODUCTION

The deprivation of liberty remains a fundamental component of criminal justice systems, intended to protect society while promoting offender rehabilitation and reintegration. According to the Penal Reform International (2023), correctional institutions must balance public safety with programs that prepare incarcerated individuals for productive lives after release. However, Persons Deprived of Liberty (PDLs) continue to experience structural, health, psychological, institutional, and social challenges that undermine their welfare and rehabilitation (Fair & Walmsley, 2024). In the Philippines, overcrowding, inadequate healthcare, limited rehabilitation opportunities, and insufficient institutional resources remain persistent correctional concerns. According to the Bureau of Jail Management and Penology (2024), the national jail population reached approximately 117,850 in June 2024. Meanwhile, the Philippine Statistics Authority (2023), using data from the Bureau of Jail Management and Penology, reported an average congestion rate of 367% among congested BJMP jails as of December 2022. Such conditions increase health risks, compromise humane detention, and restrict access to essential services. Overcrowded facilities are particularly vulnerable to infectious diseases, including tuberculosis and COVID-19, because of inadequate sanitation, ventilation, and healthcare resources (World Health Organization, 2023). Tuberculosis remains a significant global public health concern, as documented in the World Health Organization's (2024) Global Tuberculosis Report 2024. This highlights the importance of tuberculosis prevention, screening, and access to appropriate healthcare services when addressing health risks in correctional facilities. Beyond incarceration, limited educational and vocational opportunities, inadequate psychosocial support, and social discrimination hinder rehabilitation and reintegration. Formerly incarcerated individuals frequently encounter employment barriers and social exclusion associated with criminal records (Penal Reform International, 2023). These challenges demonstrate the need for comprehensive, evidence-based interventions addressing both institutional conditions and individual welfare. Against this background, the present study examines the challenges experienced by PDLs in six selected jail facilities in Northern Mindanao: Manolo Fortich District Jail, Initao District Jail, El Salvador City Jail, Cagayan de Oro City Jail, Gingoog City Jail, and Malaybalay City Jail. Specifically, it investigates structural, health and psychological, institutional, and social challenges in relation to respondents' demographic characteristics. The findings provide the basis for developing a Program Development Plan intended to improve detention conditions, rehabilitation services, and social reintegration.

Research Problem

Prison overcrowding remains a persistent global concern associated with criminal justice policies, prolonged judicial proceedings, and extensive reliance on incarceration (Fair & Walmsley, 2024). Overcrowded correctional facilities can expose Persons Deprived of Liberty (PDLs) to inadequate sanitation, limited access to essential services, and increased health risks (Human Rights Watch, 2025). Prolonged pre-trial detention can further contribute to pressures on correctional systems (United Nations Office on Drugs and Crime, 2024). Restrictive detention environments may also affect psychological well-being, including experiences of anxiety, depression, and emotional distress (Favril et al., 2024). The Philippine correctional system faces similar institutional challenges. The Commission on Audit (COA, 2023), through its audit of the Bureau of Jail Management and Penology, provides an institutional perspective on correctional resource management and operational conditions. The Bureau of Jail Management and Penology (2024) reported a national jail population of approximately 117,850 as of June 2024. At the international level, Fair and Walmsley (2025) documented patterns of pre-trial and remand imprisonment, highlighting the importance of examining detention practices and the circumstances of individuals awaiting trial. These concerns underscore the need to assess overcrowding, institutional resources, and detention conditions within Philippine correctional facilities, including those in Northern Mindanao. Healthcare and psychological well-being

constitute additional concerns among incarcerated populations. The World Health Organization (2023) discussed health risks affecting people in detention, including infectious diseases, chronic illnesses, and limitations in healthcare access. Favril et al. (2024) examined psychological difficulties among incarcerated individuals, including depression, anxiety, and other mental health concerns. Aging and medically vulnerable individuals may require specialized healthcare services, particularly for chronic conditions and continuing medical needs (Penal Reform International, 2024). Inadequate healthcare resources and limited access to medical personnel may further complicate the delivery of essential services in correctional settings. Republic Act No. 11036 (2018), also known as the Philippine Mental Health Act, establishes a legal framework for promoting mental health services and protecting the rights of individuals requiring mental healthcare. Within correctional facilities, access to psychological support and appropriate mental healthcare remains an important area for assessment. The World Health Organization (2025) addressed mental health and well-being in prisons and other detention centres, emphasizing the relevance of mental healthcare within custodial settings. These considerations highlight the importance of examining the healthcare and psychological needs of PDLs, particularly those requiring specialized assistance. Rehabilitation and reintegration are likewise influenced by institutional resources and available support services. Penal Reform International (2023) discussed the importance of educational opportunities, vocational training, and rehabilitation programs in supporting the reintegration of incarcerated individuals. Limited access to such opportunities may restrict personal development and preparation for community reintegration. Social stigma, employment barriers, and insufficient post-release support may also complicate reintegration. Consequently, assessing the availability and accessibility of rehabilitation programs is essential to understanding the institutional and social challenges experienced by PDLs. Institutional and legal concerns further shape detention experiences. Fair and Walmsley (2025) documented international patterns of pre-trial and remand imprisonment, providing a broader context for examining prolonged detention and access to justice. Legal assistance, awareness of available remedies, and institutional grievance procedures are therefore important considerations when assessing the protection of detainees' rights. Penal Reform International (2023) also discussed correctional conditions and the importance of institutional approaches that support humane treatment and rehabilitation. These interconnected structural, healthcare, psychological, institutional, and social concerns establish the need to assess the challenges experienced by PDLs in selected jail facilities in Northern Mindanao. Although international and national publications provide broader perspectives on correctional conditions, localized evidence remains necessary to understand how these challenges are experienced across facilities and demographic groups. Accordingly, the present study examines the challenges and needs of PDLs as a basis for developing a responsive Program Development Plan aimed at improving institutional support, healthcare accessibility, rehabilitation opportunities, and overall welfare.

Assumptions of the Study

The study is guided by the assumption that challenges experienced by PDLs are shaped by the interaction of individual characteristics and correctional conditions. Structural limitations, inadequate healthcare, restricted rehabilitation opportunities, and institutional practices may influence inmates' physical, psychological, and social well-being (Krieger, 2021). It further assumes that demographic characteristics, including age, income, marital status, duration of imprisonment, offense committed, and educational attainment, may be associated with differences in the extent of challenges experienced during incarceration. Individual circumstances may influence vulnerability, coping mechanisms, access to institutional services, and participation in rehabilitation programs (Penal Reform International, 2023). Educational attainment and offense classification may also affect awareness of rights, access to opportunities, and experiences within correctional facilities (Human Rights Watch, 2025). The

study also assumes that examining these differences can identify the particular needs of vulnerable groups and support targeted institutional interventions (Penal Reform International, 2023). Accordingly, its null hypothesis states that there is no significant difference in the challenges encountered by PDLs when grouped according to their demographic profiles, tested at the 0.05 significance level. These assumptions provide the basis for assessing demographic differences without presuming causal relationships and for developing a Program Development Plan grounded in the identified challenges.

Objectives of the Study

The primary objective of this study is to determine the challenges experienced by Persons Deprived of Liberty in six selected jail facilities in Northern Mindanao and utilize the findings as the basis for developing a comprehensive Program Development Plan. Specifically, the study aims to describe the respondents' demographic profiles in terms of age, income, marital status, duration of imprisonment, offense committed, and educational attainment; assess the extent of structural, health and psychological, institutional, and social challenges; determine whether significant differences exist in these challenges when respondents are grouped according to demographic characteristics; examine qualitative insights from participants' shared experiences to explain the identified challenges; and formulate a Program Development Plan that promotes inmate welfare, rehabilitation, and successful reintegration. The study is limited to the selected facilities and demographic variables. Consequently, its findings are intended primarily to inform interventions within the participating correctional institutions rather than represent all Philippine detention facilities.

Conceptual and Theoretical Framework

The study is anchored on the Ecosocial Theory developed by Nancy Krieger, which explains how social inequalities, environmental conditions, and institutional structures influence individual health and well-being. Central to this theory is the concept of embodiment, through which social and environmental exposures become reflected in physical, psychological, and social experiences (Krieger, 2021). Within correctional institutions, Ecosocial Theory explains how overcrowding, inadequate sanitation, restricted healthcare access, prolonged detention, and limited rehabilitation opportunities contribute to the challenges experienced by PDLs. These conditions represent structural and institutional influences that may affect individuals differently according to their demographic characteristics. The study's conceptual framework identifies demographic characteristics—age, income, marital status, duration of imprisonment, offense committed, and educational attainment—as independent variables. The dependent variables comprise four dimensions of challenges: structural conditions, including overcrowding and inadequate facilities; health and psychological concerns, including illness, stress, and limited healthcare access; institutional difficulties, including inadequate rehabilitation programs and legal support; and social challenges, including stigma, interpersonal relationships, and restricted family support. The framework examines whether differences in demographic characteristics correspond to variations in these challenges. It recognizes that individual characteristics may influence coping capacities, awareness of rights, and access to institutional opportunities (Penal Reform International, 2023; Penal Reform International, 2023). Educational attainment and offense classification may further shape inmates' experiences and participation in rehabilitation activities (Human Rights Watch, 2025). By examining these relationships, the framework supports the identification of demographic disparities and the development of targeted interventions responsive to the needs of PDLs (Penal Reform International, 2023; Penal Reform International, 2023). The resulting Program Development Plan is intended to address the identified challenges and strengthen correctional welfare, rehabilitation, and reintegration services.

Sustainable Development Goal and Multidisciplinary Sustainability Relevance

The study aligns with the United Nations Sustainable Development Goals, particularly SDG 3 (Good Health and Well-Being), SDG 4 (Quality Education), SDG 8 (Decent Work and Economic Growth), SDG 10 (Reduced Inequalities), and SDG 16 (Peace, Justice and Strong Institutions). These goals correspond to the study's emphasis on inmate welfare, equitable access to services, rehabilitation, social reintegration, and institutional reform. SDG 3 – Good Health and Well-Being is reflected in the study's examination of healthcare limitations, psychological distress, inadequate sanitation, and overcrowding. Addressing these concerns through improved medical services and psychosocial interventions contributes to public health sustainability and the protection of vulnerable incarcerated populations. SDG 4 – Quality Education relates to the need for accessible educational, vocational, and skills development programs within correctional institutions. Strengthening these opportunities supports educational sustainability by promoting personal development, employability, and preparation for social reintegration. SDG 8 – Decent Work and Economic Growth is relevant to rehabilitation and livelihood initiatives that prepare PDLs for productive employment after release. Addressing limited vocational opportunities and employment-related reintegration barriers contributes to socioeconomic sustainability. SDG 10 – Reduced Inequalities corresponds to the study's examination of demographic differences in the challenges experienced by PDLs. Identifying disparities in access to healthcare, institutional services, and rehabilitation opportunities provides a basis for developing equitable and responsive interventions. SDG 16 – Peace, Justice and Strong Institutions is particularly relevant to the study's focus on humane detention, access to legal assistance, institutional accountability, and correctional rehabilitation. Addressing prolonged detention, inadequate legal support, and institutional limitations contributes to policy and governance sustainability by strengthening fairness, human rights protection, and correctional management. Overall, the study contributes to public health, educational, socioeconomic, community, and institutional sustainability by providing a basis for a Program Development Plan responsive to the needs of PDLs in Northern Mindanao. Through improved detention conditions, rehabilitation opportunities, and reintegration support, the proposed plan seeks to promote humane correctional practices and strengthen the long-term effectiveness of correctional services.

2. METHODOLOGY

Research Design

The study utilized a descriptive mixed-methods research design to systematically examine the conditions and challenges experienced by PDLs without manipulating variables or establishing causal relationships. Descriptive research facilitates the systematic examination of existing conditions, characteristics, and experiences within a population (Leavy, 2022). The quantitative component assessed the extent of structural, health and psychological, institutional, and social challenges and identified differences according to respondents' demographic characteristics. The qualitative component explored participants' lived experiences and perspectives to provide deeper explanations of the quantitative findings. Integrating both approaches enabled a comprehensive understanding of the challenges encountered by PDLs and supported the formulation of evidence-based interventions to improve their welfare and rehabilitation.

Research Locale or Study Setting

The study was conducted in six selected jail facilities in Region 10, Northern Mindanao, Philippines, namely Initao District Jail, El Salvador City Jail, Cagayan de Oro City Jail, Manolo Fortich District Jail, Malaybalay City Jail, and Gingoog City Jail. These facilities represented urban and rural correctional settings with varying inmate populations and institutional conditions. Northern Mindanao comprises five provinces and 85 municipalities, with Cagayan de Oro City serving as the regional administrative center. Among the selected facilities, Cagayan de Oro City Jail had the largest PDL population at 3,359, while El Salvador City Jail and Manolo Fortich District

Jail had smaller populations of 100 and 108, respectively. These differences reflected variations in custodial demands and available institutional resources. National correctional conditions similarly indicate substantial overcrowding. According to the Philippine Statistics Authority (2023), based on data from the Bureau of Jail Management and Penology, congested jail facilities recorded an average congestion rate of 367% as of December 2022. This situation highlights the persistent pressure on correctional infrastructure and institutional resources. The selected facilities therefore provided an appropriate setting for examining challenges across correctional institutions with varying population sizes and resource limitations.

Participants or Data Sources

The study population consisted of 4,356 PDLs from the six selected jail facilities in Northern Mindanao. Using Slovin's formula with a 5% margin of error, the study determined a required sample of 366 respondents. Stratified random sampling with proportional allocation was employed to ensure representation from each facility according to its PDL population. The allocated sample comprised 18 respondents from Initao District Jail, 8 from El Salvador City Jail, 282 from Cagayan de Oro City Jail, 9 from Manolo Fortich District Jail, 31 from Malaybalay City Jail, and 17 from Gingoog City Jail. The sampling approach was intended to represent PDLs from facilities with varying population sizes and institutional conditions. Respondents were examined according to age, income, marital status, duration of imprisonment, offense committed, and educational attainment to determine differences in **their experiences of incarceration.**

Research Instruments or Materials

The primary research instrument was a researcher-developed questionnaire designed to assess the demographic characteristics and challenges experienced by PDLs. Its development was guided by relevant literature, policy documents, and previous studies concerning incarceration, human rights, healthcare, mental health, and rehabilitation. The questionnaire consisted of two parts. The first gathered demographic information, including age, income, marital status, duration of imprisonment, offense committed, and educational attainment. The second assessed structural, health and psychological, institutional, and social challenges, with four indicators for each dimension. A four-point Likert scale measured respondents' perceptions and experiences, ranging from strongly disagree to strongly agree. Mean scores of 1.00–1.75 indicated not challenging, 1.76–2.50 slightly challenging, 2.51–3.25 challenging, and 3.26–4.00 highly challenging. To establish content validity, three experts familiar with correctional populations and research methodology reviewed the instrument. Pilot testing was subsequently conducted with participants having characteristics similar to the target population to assess clarity, comprehensibility, organization, and reliability. Internal consistency was evaluated using Cronbach's alpha, and the pilot test yielded an acceptable reliability level. Expert validation and pilot testing supported the instrument's suitability for data collection.

Data Gathering Procedure

Data collection commenced after securing ethical clearance and formal authorization from the Bureau of Jail Management and Penology (BJMP) Region 10 and the wardens of the participating jail facilities. The researcher coordinated with jail administrators and personnel to explain the study's objectives, procedures, and logistical requirements. Appropriate schedules and locations were arranged to minimize disruption to regular jail operations. Quantitative data were collected through the administration of validated questionnaires to the selected PDL respondents in supervised settings. Participants received clear instructions and assistance when necessary, while jail personnel provided logistical support without interfering with responses to maintain confidentiality. Qualitative data were obtained through focus group discussions that explored participants' shared challenges, experiences, and proposed solutions. With participants' consent, discussions were audio-recorded and supplemented with

field notes. Before participation, respondents were informed about the study's purpose, voluntary nature, confidentiality measures, and right to withdraw at any time. Informed consent was obtained, and collected information was anonymized and securely stored. Following data collection, responses were organized and categorized according to the research problems for subsequent analysis.

Data Analysis

Quantitative data were analyzed using descriptive and inferential statistical methods. Frequency counts and percentage distributions were employed to describe respondents' demographic characteristics. Means and standard deviations were calculated to determine the extent of structural, health and psychological, institutional, and social challenges experienced by PDLs. Responses were interpreted using the established four-point rating scale. Analysis of Variance (ANOVA) was utilized to determine whether significant differences existed in the challenges experienced by respondents when grouped according to their demographic profiles. The null hypothesis was tested at the 0.05 level of significance. Qualitative data from focus group discussions and field notes were organized and categorized according to the research problems. Participants' shared experiences and perspectives were used to provide contextual explanations of the quantitative findings. The combined findings served as the basis for developing a Program Development Plan responsive to the identified challenges and needs of PDLs.

Ethical Consideration

The study adhered to established ethical principles governing research involving human participants, particularly PDLs, who constitute a vulnerable population. Ethical clearance and institutional permissions were secured before data collection to ensure compliance with applicable research standards and correctional regulations. The principles of respect for persons, beneficence, justice, transparency, and human dignity guided the research process. Participation was voluntary and based on informed consent. Respondents were informed of the study's objectives, procedures, intended use of information, and their right to refuse participation, decline questions, or withdraw without penalty. They were assured that their decisions would not affect their treatment, privileges, legal standing, or relationships with jail authorities. No monetary incentives or financial compensation were provided to prevent undue influence or coercion. Confidentiality and anonymity were maintained by excluding personal identifiers from questionnaires, interview transcripts, and research records. Codes and pseudonyms were used to protect participants' identities, while collected data were securely stored and accessed only by the researcher. Findings were presented collectively to prevent individual identification. Potential psychological and emotional risks were minimized through carefully designed research questions and sensitivity to participants' circumstances. Respondents could decline uncomfortable questions or discontinue participation at any stage. Data collection was conducted without disrupting institutional operations or security procedures. Throughout the study, transparency, fairness, and research integrity were maintained in data collection, analysis, interpretation, and reporting. The research sought to generate findings that could support humane correctional practices, improved rehabilitation services, and the welfare and reintegration of PDLs.

3. RESULTS AND DISCUSSION

3.1 Demographic Profile of the Respondents

3.1.1 Age

The age distribution showed that the largest proportion of respondents were 31–40 years old (125 or 34%), followed by those aged 21–30 (109 or 30%). Respondents aged 41 and above numbered 79, while 53 (14%) were 20 years old and below. The findings indicate that most respondents were in early to middle adulthood. This distribution suggests that incarceration predominantly affected individuals in economically productive and family-building stages. Economic pressures, unemployment, and social disadvantages may contribute to criminal involvement (Penal Reform International, 2023). According to United Nations Office on Drugs and Crime (2024), adults in their late twenties to thirties are disproportionately represented in correctional populations. Penal Reform International (2023) similarly explained that persistent criminal involvement may be associated with structural disadvantages and weakened social bonds. The lower representation of younger individuals may also reflect their placement in juvenile justice and diversion programs (Office of Juvenile Justice and Delinquency Prevention, 2025).

3.1.2 Income

The findings revealed that 148 respondents (40%) reported monthly incomes of ₱5,000 or below, while 119 (33%) earned ₱6,000–₱10,000. Another 58 respondents (16%) reported no income, and only 41 (11%) earned ₱11,000 or above. These results indicate that most respondents came from economically disadvantaged backgrounds before incarceration. The predominance of low-income respondents reflects the relationship between economic disadvantage and incarceration. According to the United Nations Office on Drugs and Crime (2024), economically marginalized individuals are disproportionately represented in correctional populations. Limited employment opportunities, financial instability, and inadequate access to social resources may increase vulnerability to criminal involvement (Penal Reform International, 2023). Conversely, greater economic stability, educational opportunities, and social resources may provide protective advantages (Penal Reform International, 2024).

3.1.3 Marital Status

The results showed that 215 respondents (59%) were married, 122 (33%) were single, 14 (4%) were separated, and 15 (4%) were widowed. Married respondents constituted the largest group, indicating that most participants had established family relationships before or during incarceration. The findings suggest that marriage does not necessarily prevent criminal involvement. According to Penal Reform International (2023), the protective influence of marriage depends on relationship quality, economic stability, and household conditions. Financial pressures associated with family responsibilities may contribute to strain under economically disadvantaged circumstances (Agnew, 2020). Meanwhile, marital instability may weaken social support and increase stress, although separated and widowed individuals represented only a small proportion of respondents (Penal Reform International, 2023).

3.1.4 Duration of Imprisonment

The findings indicated that 256 respondents (70%) had been incarcerated for one to five years, followed by 106 (29%) for less than one year and four (1%) for six to ten years. No respondents reported imprisonment lasting 11–20 years. Most participants were therefore within the early to intermediate periods of confinement. The predominance of shorter incarceration periods may reflect the nature of offenses, pre-trial detention, plea agreements, and sentence-related

arrangements. The original discussion also identified Good Conduct Time Allowance as a possible factor influencing detention duration. United Nations Office on Drugs and Crime (2024) discussed how incarceration patterns are shaped by criminal justice procedures and the nature of offenses. These circumstances highlight the importance of rehabilitation and institutional adjustment during the initial years of confinement.

3.1.5 Offense Committed

Drug-related offenses accounted for the largest proportion of respondents, involving 284 individuals (78%). Other offenses included rape (15), murder (14), theft (14), homicide (12), estafa (10), carnapping (9), cybercrime (3), robbery (3), and physical injury (2). Cybercrime, robbery, and physical injury each represented approximately 1% of respondents. The predominance of drug-related offenses reflects the substantial influence of drug enforcement policies on correctional populations. Research indicates that punitive drug policies frequently result in the incarceration of economically disadvantaged individuals involved in lower-level drug activities (United Nations Office on Drugs and Crime, 2024). The comparatively small representation of other offenses further demonstrates the concentration of drug-related cases within the participating facilities.

3.1.6 Educational Attainment

The results showed that 203 respondents (55%) had reached high school level, while 52 (14%) had reached elementary level and another 52 (14%) college level. Twenty-five respondents (7%) were high school graduates, 17 (5%) were elementary graduates, and 17 (5%) were college graduates or had higher qualifications. No respondents reported having no formal education. The findings indicate that most respondents had experienced formal schooling but had not completed higher educational qualifications. Limited educational attainment may restrict access to stable employment and socioeconomic opportunities. The concentration of respondents at the high school level highlights the relevance of educational and vocational rehabilitation programs that could strengthen employability and preparation for reintegration.

3.2 Extent of Challenges Experienced by Persons Deprived of Liberty

3.2.1 Structural Challenges

Structural challenges obtained an overall mean of 3.62 (SD = 0.51), interpreted as highly challenging. Overcrowding received the highest mean of 3.96 (SD = 0.22), while inadequate sanitation and hygiene recorded the lowest mean of 3.29 (SD = 0.69), although still highly challenging. Respondents reported overcrowded cells, inadequate ventilation, restricted living space, insufficient sanitation facilities, and limited water access. In Cagayan de Oro City Jail, cells designed for approximately 15 occupants reportedly accommodated 50–70 individuals. One participant described a cell housing approximately 75 PDLs who slept closely together on cardboard or mats. These findings demonstrate that overcrowding remains the most severe structural concern, affecting personal space, sanitation, safety, and overall well-being. The World Health Organization (2023) associated inadequate detention environments with increased health risks, while the Penal Reform International (2023) emphasized that insufficient space, ventilation, and sanitation compromise humane detention standards. According to Penal Reform International (2024), excessive inmate populations place substantial pressure on water supply, sanitation, and waste management systems. Similarly, World Health Organization (2023) linked poor detention hygiene with increased vulnerability to communicable diseases.

3.2.2 Health and Psychological Challenges

Health and psychological challenges obtained an overall mean of 3.06 (SD = 0.86), interpreted as challenging. Limited access to medical care received the highest mean of 3.54 (SD = 0.56), followed by the risk of communicable diseases at 3.41 (SD = 0.74) and limited mental health support at 3.26 (SD = 0.60). High stress and anxiety recorded the lowest mean of 2.04 (SD = 1.55), interpreted as slightly challenging. Participants reported shortages of healthcare personnel, medicines, and mental health services. One respondent described the presence of only one nurse, infrequent physician availability, and inadequate medication supplies. The findings indicate that healthcare accessibility constitutes the principal health-related concern. The World Health Organization (2023) emphasized that inadequate medical and psychological services contribute to unmet healthcare needs among incarcerated populations. World Health Organization (2023) similarly identified restricted healthcare access and confined living conditions as factors increasing physical and psychological vulnerability. According to Penal Reform International (2024), shortages of healthcare personnel and medical resources delay diagnosis and treatment, while the Penal Reform International (2023) associated limited healthcare access with untreated illnesses and worsening chronic conditions. The comparatively lower reported stress and anxiety may reflect differences in psychological adjustment, resilience, and social support among inmates, consistent with Fazel et al. (2016).

3.2.3 Institutional Challenges

Institutional challenges recorded an overall mean of 3.06 (SD = 0.96), interpreted as challenging. Limited rehabilitation programs received the highest mean of 3.55 (SD = 0.62), followed by experiences of unfair treatment by correctional officers at 3.49 (SD = 1.18) and limited skills training opportunities at 3.31 (SD = 0.85). Limited legal assistance received the lowest mean of 1.90 (SD = 1.44), interpreted as slightly challenging. Participants reported that rehabilitation opportunities were selective and insufficient, particularly for drug-related cases requiring plea arrangements and Drug Dependence Examination. Jail personnel also identified limited funding, inadequate staffing, and insufficient external institutional support as barriers to program implementation. These findings suggest that restricted access to rehabilitation and development opportunities weakens the rehabilitative function of correctional institutions. According to Penal Reform International (2024), effective rehabilitation requires accessible programs, institutional fairness, and supportive correctional environments. Although legal assistance was rated as less challenging than other institutional concerns, limited legal representation, inadequate awareness of rights, and geographical barriers remain relevant (Penal Reform International, 2023). The Penal Reform International (2023) likewise recognized continuing gaps in legal assistance despite efforts to improve access to justice for marginalized detainees.

3.2.4 Social Challenges

Social challenges obtained an overall mean of 3.19 (SD = 0.96), interpreted as challenging. Discrimination within correctional facilities recorded the highest mean of 3.31 (SD = 0.62), followed by limited family visitation opportunities at 3.24 (SD = 0.85) and difficulties contacting family and external support systems at 3.23 (SD = 1.18). Limited reintegration programs received the lowest mean of 2.98 (SD = 1.44), although respondents still considered this challenging. Qualitative accounts revealed concerns about unequal treatment, restricted family contact, and possible rejection by families, employers, and communities after release. These findings indicate that discrimination, weakened social relationships, and limited reintegration support may affect inmates' emotional well-being and readiness to return to society. Restricted family

communication and inadequate rehabilitation opportunities can hinder institutional adjustment and post-release preparation (Sunico, 2024). In the study of Vivares and Cuevas (2023), stigma and discrimination were identified as persistent barriers during incarceration and reintegration. According to Monteron and Daniel (2025), rehabilitation and reintegration initiatives support psychological adjustment, productive community participation, and reduced reoffending.

3.2.5 Overall Level of Challenges

The combined results produced an overall mean of 3.23 (SD = 0.82), interpreted as challenging. Structural challenges ranked highest at 3.62 (SD = 0.51), followed by social challenges at 3.19 (SD = 0.96). Health and psychological challenges and institutional challenges both recorded means of 3.06, with standard deviations of 0.86 and 0.96, respectively. These findings indicate that structural conditions were the most severe difficulties experienced by respondents, although challenges were evident across all four dimensions. The results demonstrate the interconnected nature of correctional difficulties. Penal Reform International (2024) highlighted overcrowding, inadequate institutional resources, and limited access to essential services as persistent challenges affecting detention conditions and the welfare of incarcerated individuals. According to Aon, Oberconz, and Brasholt, (2025), overcrowding is associated with physical and mental health risks, while Ndindeng, (2024) highlighted the difficulties of maintaining inmate welfare in resource-constrained facilities. Institutional barriers also restrict access to rehabilitation and support services, as discussed by Canada et al. (2022). These findings emphasize the importance of addressing structural deficiencies alongside healthcare, rehabilitation, and social support needs.

3.3 Significant Differences in Challenges According to Demographic Profile

3.3.1 Differences According to Age

Analysis of Variance revealed significant differences in structural challenges ($F = 7.61$, $p = 0.00$) and health and psychological challenges ($p = 0.00$) when respondents were grouped according to age. The null hypotheses for these dimensions were rejected at the 0.05 significance level. However, institutional challenges ($p = 0.50$) and social challenges ($p = 0.40$) showed no significant differences across age groups. The findings indicate that age-related differences are more evident in structural and health-related experiences than in institutional and social conditions. Older inmates may experience greater physical and healthcare difficulties, while younger inmates may face different adjustment concerns. The study of Favril, Rich, Hard, and Fazel, (2024) supports the relationship between correctional environments and inmates' physical and psychological well-being. The absence of significant differences in institutional and social challenges suggests that respondents across age groups experience comparable institutional procedures and social conditions.

3.3.2 Differences According to Income

Income showed significant differences in structural challenges ($F = 3.06$, $p = 0.02$), health and psychological challenges ($F = 8.11$, $p = 0.00$), and institutional challenges ($F = 3.51$, $p = 0.01$). Consequently, the null hypotheses for these dimensions were rejected. However, social challenges showed no significant difference according to income ($F = 0.28$, $p = 0.84$). These findings indicate that respondents' economic backgrounds may influence their experiences of structural conditions, healthcare limitations, and institutional services. According to Penal Reform International (2023), incarceration is closely associated with economic inequality, financial instability, and reduced opportunities for socioeconomic recovery. The absence of

significant differences in social challenges suggests that interpersonal relationships and separation from families may be experienced similarly across income groups.

3.3.3 Differences According to Marital Status

The results showed no significant differences in structural ($F = 0.40$, $p = 0.76$), health and psychological ($F = 1.33$, $p = 0.26$), institutional ($F = 0.27$, $p = 0.05$), and social challenges ($F = 0.12$, $p = 0.95$) when respondents were grouped according to marital status. The original analysis retained the null hypotheses across all four dimensions. The findings suggest that marital status did not substantially differentiate respondents' experiences of correctional challenges. Shared living conditions, institutional regulations, and daily routines may contribute to comparable experiences among single, married, separated, and widowed inmates. Although family relationships may influence emotional support, the study did not identify significant differences in the measured challenges according to marital status.

3.3.4 Differences According to Duration of Imprisonment

Duration of imprisonment showed a significant difference in institutional challenges ($F = 5.61$, $p = 0.00$), resulting in rejection of the corresponding null hypothesis. However, no significant differences were observed in structural challenges ($F = 1.47$, $p = 0.23$), health and psychological challenges ($F = 1.58$, $p = 0.21$), or social challenges ($F = 0.30$, $p = 0.74$). The findings indicate that the length of incarceration may influence respondents' perceptions of institutional procedures, regulations, and rehabilitation opportunities. Inmates confined for different periods may develop varying levels of familiarity with institutional practices. Study of Mukasheva et al. (2024) reported differences in perceptions of rehabilitation and institutional conditions among individuals serving different sentence durations. Conversely, the absence of significant differences in the other dimensions suggests that environmental, health-related, and social challenges are experienced across detention periods.

3.3.5 Differences According to Offense Committed

The results revealed no significant differences in structural challenges ($F = 0.71$, $p = 0.70$), health and psychological challenges ($F = 0.96$, $p = 0.47$), institutional challenges ($F = 1.89$, $p = 0.05$), or social challenges ($F = 1.38$, $p = 0.19$) according to the type of offense committed. The original analysis retained the null hypotheses for all four dimensions. These findings suggest that respondents experienced similar correctional conditions regardless of their offenses. Shared institutional policies, physical environments, and access to services may contribute to comparable experiences across offense categories. Penal Reform International (2023) discussed the influence of institutional conditions and access to correctional services on the experiences of incarcerated individuals. However, the absence of statistically significant differences according to offense classification is a finding specific to the present study.

3.3.6 Differences According to Educational Attainment

Educational attainment showed no significant differences in structural challenges ($F = 1.32$, $p = 0.25$), health and psychological challenges ($F = 2.06$, $p = 0.06$), institutional challenges ($F = 0.61$, $p = 0.69$), or social challenges ($F = 1.52$, $p = 0.18$). Accordingly, the null hypotheses were retained across all four dimensions. The results indicate that respondents with different educational backgrounds experienced comparable correctional challenges. Although educational attainment may influence individual knowledge and coping capacities, the shared detention

environment and institutional regulations appear to have reduced observable differences in the measured challenges.

3.4 Qualitative Findings on the Experiences of Persons Deprived of Liberty

3.4.1 Overcrowding and Inadequate Living Conditions

Qualitative accounts revealed that overcrowding substantially affected daily living conditions. Participants described densely occupied cells, limited sleeping spaces, poor ventilation, and insufficient sanitation facilities. One respondent reported that approximately 75 individuals occupied a single cell, sleeping closely together on cardboard or mats. Limited water availability and inadequate hygiene facilities were also identified as recurring concerns. These experiences reinforce the quantitative finding that structural challenges were the most severe difficulties encountered by respondents. Overcrowding increases pressure on essential resources and compromises health, sanitation, and human dignity. According to Penal Reform International (2024), excessive inmate populations strain water supply, waste management, and sanitation infrastructure, while World Health Organization (2023) associated poor detention conditions with increased health vulnerabilities.

3.4.2 Inadequate Healthcare and Psychological Support

Participants reported insufficient healthcare personnel, limited medicines, delayed medical attention, and inadequate psychological support. One respondent described difficulties obtaining treatment because only one nurse was available, physicians were not consistently present, and essential medicines were insufficient. These experiences reflected concerns regarding access to basic healthcare and mental health services. The World Health Organization (2025), in its report on mental health and well-being in prisons and other detention centres, addressed mental health as an important component of prison healthcare. This international perspective reinforces the relevance of assessing psychological support and mental healthcare needs among Persons Deprived of Liberty. The findings indicate that healthcare limitations remain closely associated with institutional resources and detention conditions. The World Health Organization (2023) emphasized that inadequate medical and psychological services contribute to unmet health needs among incarcerated populations. Similarly, the Penal Reform International (2023) identified restricted healthcare access as a factor contributing to untreated illnesses and worsening health conditions.

3.4.3 Limited Rehabilitation and Institutional Support

Participants reported that rehabilitation programs were available to only a limited number of inmates. Access to livelihood training, educational activities, religious programs, and drug rehabilitation services was described as selective and inconsistent. Jail personnel likewise acknowledged that insufficient budgets, limited staffing, and inadequate external support restricted program implementation. These findings suggest that institutional resource limitations hinder access to rehabilitation and personal development opportunities. According to Penal Reform International (2024), effective rehabilitation depends on accessible programs and supportive correctional environments. Restricted opportunities for education, training, and psychosocial development may weaken preparation for successful reintegration.

3.4.4 Social Stigma and Reintegration Difficulties

Participants expressed concerns about discrimination, weakened family relationships, and possible rejection after release. Some feared that their families, employers, and communities

would continue to associate them with criminal behavior. Limited communication with family members and inadequate reintegration opportunities were also identified as barriers to maintaining social support. These experiences indicate that social stigma may affect inmates' confidence, emotional well-being, and readiness for community reintegration. In the study of Vivares, & Cuevas, (2023), discrimination and negative societal perceptions were identified as barriers to successful reintegration. According to Monteron, and Daniel, (2025), rehabilitation and reintegration initiatives are important in strengthening psychological adjustment, social functioning, and preparation for productive community participation.

3.5 Proposed Program Development Plan

3.5.1 Development of Project CARE

Based on the identified challenges, the study proposed Project CARE, or Comprehensive Assistance for Rehabilitation and Empowerment of Persons Deprived of Liberty, under a holistic support and institutional enhancement framework. The proposed intervention focuses on mental health and wellness, healthcare awareness and medical support, rehabilitation and skills development, staff capacity building, and peer counseling. Its primary objective is to strengthen health, psychological, and institutional support systems to improve inmate welfare and rehabilitation opportunities. The proposed program responds to the documented limitations in healthcare access, psychological support, rehabilitation services, and institutional resources. Its components are intended to improve emotional well-being, strengthen correctional rehabilitation, enhance personnel competencies, and establish supportive relationships among inmates. These interventions address the needs identified through the quantitative and qualitative findings.

3.5.2 Implementation Strategies and Resource Requirements

The proposed program includes quarterly mental health counseling, psychological assessments, stress management activities, health education, and medical check-ups. Vocational training, educational activities, livelihood development, and personal development workshops are scheduled every six months, while staff capacity-building activities are conducted annually. Peer support groups, mentoring, and guided discussions are proposed monthly. Implementation involves jail administrators, healthcare personnel, psychologists, social workers, trainers, partner government agencies, and trained inmate facilitators. The implementation plan emphasizes coordinated institutional support and resource allocation. The proposed activities are intended to strengthen rehabilitation services, improve access to healthcare information, develop correctional personnel competencies, and promote positive peer relationships. The involvement of institutional personnel and external partners reflects the need to address program limitations identified by respondents and jail staff.

3.5.3 Implementation Timeline, Budget, and Expected Outcomes

The proposed implementation covers 12 months, beginning with planning and coordination during the first month, followed by program implementation from the second through the tenth month. Monitoring activities are incorporated during implementation, with a final evaluation scheduled in the twelfth month. The estimated total budget is ₱48,000, comprising ₱8,000 for mental health and wellness, ₱10,000 for healthcare awareness and medical support, ₱15,000 for vocational and institutional development, ₱7,000 for staff capacity building, ₱5,000 for peer support activities, and ₱3,000 for monitoring and evaluation. Proposed funding sources include jail facilities, local government units, partner agencies, nongovernmental organizations,

institutional funds, and donations. The program is expected to improve inmates' psychological and emotional well-being, increase participation in rehabilitation and skills development activities, strengthen staff competencies, and establish positive support systems within correctional facilities. Monitoring and evaluation are intended to assess program implementation and provide recommendations for improvement. These outcomes represent the anticipated benefits of the proposed intervention rather than measured effects of an implemented program.

4. CONCLUSIONS AND RECOMMENDATIONS

The study established that Persons Deprived of Liberty (PDLs) in six selected jail facilities in Northern Mindanao experienced interconnected structural, health and psychological, institutional, and social challenges, with structural difficulties emerging as the most pronounced. Overcrowding, inadequate facilities, limited healthcare access, insufficient rehabilitation opportunities, and restricted family interaction characterized their experiences during incarceration. Significant differences were observed in selected challenge dimensions according to age, income, and duration of imprisonment, whereas marital status, offense committed, and educational attainment generally showed no significant differences. These findings indicate that although certain demographic characteristics are associated with variations in inmates' experiences, many difficulties are shared across the correctional population. The results underscore the importance of institutional conditions and available support services in understanding PDL welfare. Overall, the study provides a contextualized assessment of correctional challenges and an evidence-based foundation for developing a Program Development Plan that addresses identified needs and supports rehabilitation and reintegration.

Jail administrators and the Bureau of Jail Management and Penology should prioritize improvements in living space, sanitation, ventilation, and essential resources to address the most pressing structural challenges. Government agencies should strengthen appropriate non-custodial measures for minor offenders to help reduce congestion. Correctional institutions should improve healthcare accessibility through adequate medical personnel, regular health assessments, psychological counseling, mental health awareness activities, and peer support programs. Rehabilitation services should be expanded through accessible educational programs, vocational training, livelihood activities, and personal development initiatives that prepare PDLs for reintegration. Jail management should also strengthen family visitation, communication opportunities, and family-centered activities to address social isolation and maintain supportive relationships. Collaboration among correctional administrators, government agencies, healthcare providers, and community organizations should support the implementation and evaluation of the proposed Program Development Plan. Future research may examine rehabilitation outcomes across additional correctional facilities and assess the effectiveness of implemented interventions.

The study was confined to six selected jail facilities in Northern Mindanao, limiting the generalizability of its findings to other correctional institutions. Participant inclusion was influenced by accessibility, willingness to participate, and institutional regulations governing research activities. The analysis focused on age, income, marital status, duration of imprisonment, offense committed, and educational attainment, excluding potentially relevant factors such as mental health history, family background, and pre-incarceration livelihood. Furthermore, the descriptive research design examined existing conditions and demographic differences without establishing causal relationships. Future investigations may include broader

correctional settings, larger samples, and additional variables to strengthen the applicability and depth of findings.

5. REFERENCES

Agnew, R. (2020). *General strain theory and delinquency*. Routledge.

Aon, M., Oberconz, S., & Brasholt, M. (2025). The association between health and prison overcrowding, a scoping review. *BMC Public Health, 25*, Article 2218. https://doi.org/10.1186/s12889-025-23340-9

Bureau of Jail Management and Penology. (2024). *Jail population data as of June 2024*. https://bjmp.gov.ph

Canada, K. E., Barrenger, S. L., Bohrman, C., Banks, A., & Peketi, P. (2022). Multi-level barriers to prison mental health and physical health care for individuals with mental illnesses. *Frontiers in Psychiatry, 13*, Article 777124. https://doi.org/10.3389/fpsyt.2022.777124

Commission on Audit. (2023). *Bureau of Jail Management and Penology consolidated annual audit report 2023*. https://www.coa.gov.ph/wpfd_file/bureau-of-jail-management-and-penology-consolidated-annual-audit-report-2023/

Fair, H., & Walmsley, R. (2024). *World prison population list (14th ed.)*. Institute for Crime & Justice Policy Research. https://www.prisonstudies.org/sites/default/files/publications/world_prison_population_list_14th_edition.pdf

Fair, H., & Walmsley, R. (2025b). *World pre-trial/remand imprisonment list (5th ed.)*. Institute for Crime & Justice Policy Research. https://prisonstudies.org/sites/default/files/publications/world_pre-trial-remand_imprisonment_list_5th_edition.pdf

Favril, L., Rich, J. D., Hard, J., & Fazel, S. (2024). Mental and physical health morbidity among people in prisons: An umbrella review. *The Lancet Public Health, 9*(4), e250–e260. https://doi.org/10.1016/S2468-2667(24)00023-9

Fazel, S., Hayes, A. J., Bartellas, K., Clerici, M., & Trestman, R. (2016). Mental health of prisoners: Prevalence, adverse outcomes, and interventions. *The Lancet Psychiatry, 3*(9), 871–881. https://doi.org/10.1016/S2215-0366(16)30142-0

Human Rights Watch. (2025). *World report 2025: Philippines*. https://www.hrw.org/world-report/2025/country-chapters/philippines

Leavy, P. (2022). *Research design: Quantitative, qualitative, mixed methods, arts-based, and community-based participatory research approaches*. Guilford Press.

Krieger, N. (2021). *Ecosocial theory, embodied truths, and the people's health*. Oxford University Press.

Monteron, E. O., & Daniel, E. R. (2025). Rehabilitation programs in relation to psychological well-being and behavioral adjustment of detainees in provincial detention facility. *International Journal of Research and Innovation in Social Science, 9*(14), 1182–1191. https://doi.org/10.47772/IJRISS.2025.914MG0089

Mukasheva, D., Tulkinbayev, N., Prilutskaya, M., Yessimova, D., & Stöver, H. (2024). Behind bars: Understanding prisoner perception of penitentiary rehabilitation in Kazakhstan. *International Journal of Law, Crime and Justice, 77*, Article 100669. https://doi.org/10.1016/j.ijlcj.2024.100669

Ndindeng, A. N. (2024). Mental health and well-being in prisons and places of detention. *International Journal of Prisoner Health*. https://doi.org/10.1108/IJOPH-07-2024-0035

Office of Juvenile Justice and Delinquency Prevention. (2025). *Trends and characteristics of youth in residential placement, 2023*. U.S. Department of Justice.

https://ojjdp.ojp.gov/library/publications/trends-and-characteristics-youth-residential-placement-2023

Penal Reform International. (2023). *Global prison trends 2023*. https://www.penalreform.org/global-prison-trends-2023/

Penal Reform International. (2024). *Global prison trends 2024*. https://www.penalreform.org/global-prison-trends-2024/

Philippine Statistics Authority. (2023). 2023 *Philippine statistical yearbook*. https://psa.gov.ph/system/files/psy/2023-Philippine-Statistical-Yearbook.pdf

Republic Act No. 11036, *Philippine Mental Health Act* (2018). https://lawphil.net/statutes/repacts/ra2018/ra_11036_2018.html

Sunico, A. J. P. (2024). Struggles of persons deprived of liberty (PDL) in Tuguegarao City District Jail: A basis for intervention plan. *AIDE Interdisciplinary Research Journal, 9*.

United Nations Office on Drugs and Crime. (2024). *World drug report 2024*. United Nations. https://www.unodc.org/unodc/en/data-and-analysis/world-drug-report-2024.html

Vivares, K. M. S., & Cuevas, J. F., Jr. (2023). The reintegration of ex-convicts in society: A case study. *International Journal of Social Science and Human Research,* 6(10). https://doi.org/10.47191/ijsshr/v6-i10-52

World Health Organization. (2023). *Status report on prison health in the WHO European Region 2022*. https://www.who.int/europe/publications/i/item/9789289058674

World Health Organization. (2024). *Global tuberculosis report 2024*. https://www.who.int/publications/i/item/9789240101531

World Health Organization. (2025). *Mental health and well-being in prisons and other detention centres: Report of the International Prison Health Conference, Amsterdam, 18–19 April 2024*. https://www.who.int/europe/publications/i/item/WHO-EURO-2025-10968-50740-76853