



SCHOOL OF APPLIED HUMAN SCIENCES

**“THE IMPACT OF CORRECTIONAL CENTRE OVERCROWDING ON
REHABILITATION OF OFFENDERS: A CASE STUDY OF
DURBAN WESTVILLE CORRECTIONAL CENTRE”**

by

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DECLARATION

This is to confirm that this

Thesis is my own work which

I have never previously submitted to any other university

for any purpose. The references used and cited have been acknowledged.

Signature of candidate.....

On the.....day of.....2018

DEDICATION

This thesis is dedicate to the inmates at
Durban Westville Correctional Centre and all those who
have been subjected to abuse because of
overcrowding in correctional centres.

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I'm thankful to God for the opportunity, wisdom and the strength He provided me with to conduct this research for I wouldn't have done it without you Lord.

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ABSTRACT

The existing conditions in correctional centres bring have negative effect of inmates emotional and physical being. The purpose of imprisonment according to the Department of Correctional Services is rehabilitation yet obstacles such as overcrowding makes rehabilitation of offenders impossible. This study was conducted at the biggest correctional centre in KwaZulu Natal, Durban Westville Correctional Centre and argues that the effects of overcrowding in correctional centres includes unavailability resources (participation in rehabilitation programmes), stress amongst inmates, violent behaviour, creation of gangs, corruption, misclassification of inmates, malnutrition and non-consensual sex. This thesis presents the extent of overcrowding in correctional centres, causes of it and also the legal frameworks underpinning correctional centres and rehabilitation in South Africa. In order to understand correctional centres at present the researcher outlined the historical development and shift of prisons to correctional centres. The findings of this study revealed that due to overcrowding in correctional centres, implication of rehabilitation becomes impossible. The inmates recommended that the Department of Correctional Services should employ more correctional officials to help with the implication of rehabilitation programmes as Westville only has one psychologist, one social worker and one educator. The main aim of this study was to examine the perceptions of inmates and officials on the impacts overcrowding has on the rehabilitation of inmates. It is an undeniable fact that correctional centres are no longer safe environment that implements rehabilitation to offenders due to the conditions caused by overcrowding that inmates and forced to live under.

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CHAPTER ONE

INTRODUCTION

1.1 Introduction

The increasing crime rate in South Africa has left the Correctional System riddled with the issue of massive overcrowding, which persistently results in the violation of the human rights of a number of inmates. Correctional centres are constitutionally obliged to provide a healthy environment for all inmates where they get a chance to reflect on their crime/s, repent and renew themselves for the free world that should welcome them after confinement (DeLisi, Berg & Hochstetler, 2004). However, overcrowded correctional centres are not only uncomfortable, but the conditions are also harsh, and thus numerous released inmates bear the consequences of their experiences for a very long time.

The literature review that was conducted revealed that the effects of overcrowding in correctional centres impact the rehabilitation of offenders negatively, regardless of the fact that the Department of Correctional Services (DCS) regards rehabilitation as the main goal of imprisonment (Muntingh, 2006). Overcrowding in correctional centres has been a driving cause of the ineffectiveness of the rehabilitation of offenders, and Ndebele (2012) suggests that this phenomenon affects inmates negatively as they are constantly unclean and lack the necessary resources such as uniforms, toiletries, food and blankets.

Manganye (2016:105) investigated the perceptions of offenders on rehabilitation, and concluded that the unavailability of resources can lead to two things: "...frustration or unpleasantness [because] of being limited or denied resources, and competition and conflict over limited resources that often lead to aggression and violence". Violence and aggressive behaviour often go hand in hand with overcrowded conditions in correctional centres, which in turn leads to the formation of gangs that provide 'protection' for vulnerable inmates. It is usually in this context that inmates learn illegal survival tricks within these centres (Muntingh, 2006). The latter author also asserts that because of overcrowding, correctional officers cannot always intervene in violent conflict situations and they often fail to protect inmates who are locked up in cells that accommodate more people than they should. This leaves inmates with no choice but to defend themselves or to join gangs to ensure their protection.

Ndebele (2012) also points out that not only do overcrowded correctional centres provoke violence and aggression among inmates, but they are also a melting pot for many viruses and diseases. He further mentions that inmates who have infectious diseases such as Tuberculosis (TB) are often accommodated in cells with those who are not sick, and this puts the latter category of inmates at risk of contracting these diseases. Kenan and Manda (2014) state that one issue of concern is the spread of HIV/AIDS in correctional centres as a result of non-consensual and consensual sex among men. These sexual activities are generally coerced by powerful gang leaders and their members to intimidate and subvert vulnerable victims.

Muthaphuli (2008:3) argues that the ideal of uplifting the human rights of inmates through correctional endeavours has taken a dire turn, as these centres “have become universities of crime”. He further asserts that the overcrowded conditions create barriers to opportunities for inmates to participate in self-improvement and rehabilitative programs such as educational programs, psychological support programmes, and employment and skills training. According to Muthaphuli (2008), barriers to the effective rehabilitation of offenders in overcrowded correctional centres is rife in many countries around the world. Ndebele (2012:73) argues that rehabilitation as a process of making offenders law abiding citizens is ineffective and that institutional challenges ensure that “rehabilitation programmes are no longer executed correctly”. He asserts that the main institutional challenge that affects the effectiveness of rehabilitation programmes in correctional centres is overcrowding. In these overcrowded conditions, the opportunities for inmates to participate in self-improvement and rehabilitative programs, such as educational programs, psychological, employment and skills training are reduced (Ndebele, 2012).

Manganye (2016) argues that research on the effects that overcrowding in correctional centres has on the rehabilitation of offenders in South Africa have not been studied sufficiently. There is also a paucity of information on how correctional officers deal with the consequences of overcrowding, or what the strategies are that they use to ensure that the rehabilitation of offenders occurs. Much research has focused on overcrowding in correctional centres, but studies on the effects that overcrowding has on the rehabilitation potential of offenders are still lacking (Muthaphuli, 2008; Kenan & Manda, 2014).

1.2 Conceptualisation of Key Terms

This study report involves the extensive use of key terms that need to be defined to generate a clear understanding of the foci of the study. These key terms are briefly expounded below.

2.2.1 Inmate/offender

“An inmate is a person imprisoned for a crime committed; [the person may be] awaiting trial or has been found guilty by a court of law and sentenced to imprisonment” (Republic of South Africa, 1998:5). The terms ‘inmate’ and ‘offender’ are used interchangeably in this report.

2.2.2 Department of Correctional Services (DCS)

The DCS is responsible for the incarceration of sentenced offenders and detainees who are awaiting trial. The responsibilities of the Department include “safe custody, rehabilitation, and the reintegration of prisoners into the community” (Republic of South Africa, 1998:14).

2.2.3 Correctional centre

According to the Correctional Services Act No. 111 of 1998 (Republic of South Africa, 1998:2), a correctional centre is any place “established under this Act as a place for the detention, confinement, training or treatment of persons who have been sentenced to imprisonment for a certain period of time by the court or detention in placement under protective custody”.

2.2.4 Rehabilitation

This is the process that is a combination of “the correction of offending behaviours, human development and the promotion of social responsibility and values” (Manganye: 2016:9). The term refers to the internal change that occurs in an inmate and that brings about cessation of the targeted negative behaviour through the implementation of different programmes (Pallock, 2005). Briefly, any intervention with the intention of reducing further criminal activities constitutes rehabilitation.

1.3 Background to the Study

1.3.1 Development of correctional services in the United States (US)

Overcrowding in correctional centres in the US has been exacerbated as it has been overlooked for decades by many role players such as politicians, the media and the judicial system. According to Campers (2012), this has resulted in ineffective correctional centres that are characterised by overcrowding. For the duration of the colonial period, authorities used banishment, public execution and corporal punishment to punish those who broke the law. Only at the beginning of the 19th century did the Americans adopt new practices of punishment by focusing on isolating inmates to elicit their repentance. The failing British practice of incarceration was thus gradually changed. According to Campers (2012), the US introduced new incarceration practices – regardless of the fact that they were cruel and inhumane – in efforts to rehabilitate incarcerated offenders:

“The first of these new practices was introduced as the Pennsylvania System. It hoped to be unlike the failing English prisons by focusing on the goals of isolation and penance. In 1790, the Walnut Street Jail was transformed into the very first ‘modern’ American prison. Within a short period of time, the Walnut Street Prison became overcrowded. Other prisons were built to meet the demands. The prisons under the Pennsylvania System, also called the segregate system, used solitary confinement for all prisoners in order to promote self-reflection and repentance for past crimes. This system was soon found to be costly and architecturally too spread out. As a result, a second prison system was developed.”

By the end of the 18th century, the country was growing and more urban centres dotted the various states. It became clear that reformation could not be achieved with overcrowding in prisons, and from 1867 a new penal goal was established according to which labour was used to teach offenders decency and order. However, Borich (2012:2) argues that this system evolved from the idea that “possession of a convict’s labour was an opportunity for the state to make money”. This system was used until the early 1900s, but during the 1940s and 1950s the American prison system seemed to shift back to one of rehabilitation. According to Borich (2012:3):

“During this era, more recreational and rehabilitative programmes were introduced into the prison system. While overcrowding was certainly not at its peak, it remained a lingering obstacle in the way of the true rehabilitation of offenders.”

The introduction of the rehabilitation concept in correctional centres is not a new phenomenon, and Snacken & Belguim (2010) suggest that it dates it back to the 19th century. However, overcrowding has been a stumbling block that has hampered the implementation of this ideal for many years, and it has remained a scourge to this day.

It is in this context that debates have been ongoing in California to determine the most efficient method to control correctional centre overcrowding. The issues that the correctional system faces when detainment facilities are genuinely packed have been on the table for a long time, yet this remains the main issue that politicians and other role players face when searching for a solution to overcrowding while under pressure by the courts and a severe fiscal crisis (Snacken & Belguim, 2010).

1.3.2 Correctional services within the South African context

Since the advent of a modern judicial system in South Africa, the practice of imprisonment has been utilised to detain offenders and to deprive them of their personal freedom. In the early years, the correctional system often used correctional centres as a temporary stop gap before sentencing offenders to death or to a life of slavery (Dubois & Miley, 2010). Since these early days, the Department of Correctional Services has implemented different stages of change in the organisation.

According to Mataka (2000), these changes were brought about by the variety of political dispensations that the country has undergone. It was after 1994 that the Ministry of Correction and Justice saw the need for programmes that will rehabilitate offenders instead of punishing them. Moreover, the democratic government of South Africa believes “that offenders are capable of changing their criminal behaviour and become law-abiding citizens” (Manganye, 2016:42). According to Bhengu (2005:25), one of the major changes that occurred was in 1996 “when the Department demilitarised prisons and introduced correctional centres that [now] focus on rehabilitation of offenders through different activities and also [on] the development of community-based sentences for offenders who committed small offences”.

The demilitarisation process means that the Department has to adopt new civilian ways and eradicate the militaristic character of incarceration in order to perform its core business, which is to rehabilitate inmates. Mohoje (2006:1) states that the implications of this process have effected various changes in the previous military structure of the Department, particularly in terms of “the rank system, mode of address, uniform insignia and daily militarised parades”.

However, he further asserts that the demilitarisation era has not yet resulted in an extensive change in the culture within the correctional service, as the staff still undergoes training that consists of military-type drills and the handling of a range of firearms. Mpemva (2000:196) argues that “staff members have not yet been re-trained to meet the demands of managing correctional centres under a democratic order by implementing rehabilitation”. The latter scholar further asserts that efforts to establish rehabilitation programmes were prompted because of an alarming proportion of offenders who would re-offend after their release. The estimate of this occurring ranged between 85% and 94%. Offenders’ repeated involvement in criminal activities is problematic and impacts negatively on their families and on the taxpayer, who has to bear the cost of their incarceration. To curb this problem, offenders attend various rehabilitation programmes inside correctional centres; however, these rehabilitation efforts do not seem to be sustained.

According to Wehrman (2010), research has shown that the rate of recidivism has remained remarkably high over the years and this has led to overcrowded correctional centres. He further asserts that high rates of recidivism place a question on the effectiveness of the incarceration and rehabilitation systems employed in correctional centres. Given the aim of imprisonment, Werman (2010:95) strongly argues that “if a large number of ex-offenders find it difficult to cope with the situation in their respective societies and re-offend only to be incarcerated again, then the purpose of incarceration is far from achieved”.

Questioning the effects of rehabilitation initiatives is currently a growing phenomenon in the correctional service field both nationally and internationally. For example, Bruyns (2007) maintains that “there is also more buoyancy about the efficiency of correctional programmes and the probability of them averting recidivism” and further argues that, “in contrast to imprisonment and community constraints, rehabilitation strategies focus on changing individual offenders’ behaviour so that they will not continue their criminal activities” (Bruyns, 2007:100).

Bruyns (2007) proposes that recidivism can be significantly reduced through the provision of correctional programmes, yet reality has shown that this ideal has not been reached. Therefore, in light of the emphasis that is placed on rehabilitation by the Department of Correctional Services in South Africa and the questionable impact of this initiative to curb crime in the country, the need to identify and explore the factors that hamper the successful response to rehabilitation efforts was identified.

1.4 Rationale for the Study

Muthaphuli (2008:3) argues that the shift from punishment towards uplifting the human rights of inmates “took a different [i.e., an unexpected] turn as correctional centres have become universities of crime and those who live in them regard them as five-star hotels, given that the daily expenditure for an individual prisoner is far more than what some households earn”. The literature review revealed that a large body of research on correctional centres focused more on the causes of overcrowding than on the effects that overcrowding has on the rehabilitation of offenders, regardless of the fact that rehabilitation is the core business of correctional centres. It is indisputable that, due to the increasing number of offenders that are incarcerated as they await trial, harsher sentencing, longer sentences for severe crimes and overcrowding in correctional centres have become a powerful reality. According to Walmsley (2015), more than 10.2 million people are held in correctional centres throughout the world, with the United States (US) holding the highest inmate population of 2.2 million.

In Africa, South Africa had the highest incarcerated population in 2014/2015 at 156 402 inmates (Wamsley, 2015). The reality is that correctional centres have exceeded their capacity which has resulted in a very large number of inmates spending up to 23 hours a day in overcrowded, cramped accommodation settings. According to the United Nations Office on Drugs and Crime (2013), the International Committee of the Red Cross (ICRC) was launched close to 150 years ago to look into the number of people incarcerated in US correctional centres and to address the consequences of overcrowding on inmates. The ICRC conducted its first activities in 1870 and the organisation is well known for its work among incarcerated people in armed conflicts, for which it has a specific monitoring mandate under international humanitarian law (United Nations Office on Drugs and Crime, 2013). In the almost 150 years since its inception, this organisation has visited over 90 countries and witnessed the impact of overcrowding on offenders and correctional officials.

Research has revealed that thousands of offenders spend the majority of their sentence in inhumane conditions with inadequate space to sleep, and thus many are often compelled to sleep on the floor. For example, according to Giffard and Muntingh (2006:42), many inmates are “squeezed into cramped living quarters, often in appalling hygiene conditions and with no privacy, [and this] makes the experience of being deprived of freedom [which is] already stressful in normal circumstances exponentially worse”. The ICRC thus aims to combat overcrowding by compelling the US government to implement new policies in this country.

However, countries on the African continent, and in particular South Africa, are left unaffected by these policies, resulting in an unacceptably high inmate population in Africa. The impact of organisations such as the ICRC on the rights of inmates outside South Africa prompted this researcher to address the lack of scientific studies that focused on the negative effects of overcrowding on the rehabilitation of incarcerated offenders. MacKenzie (2002) argues that it is a travesty that inmates are not seen as victims even though many are incarcerated in overcrowded environments where they are subjected to victimisation.

MacKenzie (2002:17) suggests that a victim is any person who is victimised while carrying out a respectable activity in an environment or location where s/he cannot be blamed for being in. This definition makes it hard for inmates to be considered as victims, as they are incarcerated for a wilful and often harmful act that impacted innocent, law-abiding members of society. However, both international and national human rights conventions state categorically that all people are entitled to respect and dignity (National Human Rights Institutions, 1993) and inmates who are incarcerated for a crime, no matter how heinous it was, are still part of human society and thus entitled to respectful and humane treatment.

It is undeniable that the proliferation of incarcerated inmates in South African correctional centres paints a dark picture. According to a 2014/2015 annual report, the Department of Correctional Services is responsible for 243 correctional centres at a cost of R9.8 billion per annum (Ngoepe, 2015). Each inmate costs the taxpayer R9 876.35 per month, which is more than many families earn. It is in light of these facts that the overcrowding of correctional centres takes on an even more worrisome dimension, as the dire impact on ordinary tax payers’ pockets will be exacerbated if this phenomenon is not curbed.

According to Dissel (2002: 142), overcrowding entrenches a vicious cycle in the correctional services field:

“The effects of overcrowding and misclassification create a vicious cycle for the inmate. It begins with overcrowding, then the assignment to an inappropriate facility and programmes (i.e., misclassification), followed by inmate stress reaction to the lack of services, no movement or progress within the system, being labelled as ‘failure to adjust’, no parole release, rule infractions to regressive transfer. At this point the cycle starts all over again.”

The misclassification of inmates is one of the results of overcrowding, as offenders are now incarcerated based on the availability of space instead of security reasons and programmes suitable for the offender in line with the crime that was committed. There is much evidence in the literature and the media that many inmates who were supposed to be placed in medium security were incarcerated in maximum security, while those classified for maximum security were placed in medium security facilities. It goes without saying that the classification process for security reasons is not to be jeopardized, yet the misclassification of inmates seems to continue unabated. For example, Mcetywa (2008) narrates the incident of a 15-year-old boy who was found in an adult cell after being repeatedly raped during his incarceration in a Medium B (adult) cell in a correctional centre in Durban. The boy had been arrested for not appearing in court after shoplifting a pair of pants worth R49.00, and he was placed in a Medium B cell. This raised the question of how a juvenile could have ended up in a maximum security centre among some of the most dangerous criminals. Mcetywa (2008) also found that overcrowded correctional centres are associated with higher rates of psychiatric commitment, sicknesses, violent behaviour, a high suicide rate, and the increased possibility of recidivism.

In light of the above, this research aimed to understand the effects of overcrowding in correctional centres on the rehabilitation potential of offenders. The study endeavoured to add to the existing body of knowledge on overcrowding in correctional centres by specifically focusing on the effects on the inmates rather than on the causes of overcrowding. This research was thus motivated by the desire to contribute to the discourse on the unsuccessful implementation of rehabilitation strategies in correctional centres due to overcrowding.

1.5 Aim

The aim of this study was to elicit the perceptions of inmates and officials on the impact that overcrowding has on the rehabilitation of inmates.

1.6 Objectives

The objectives were to:

- Explore the causes of overcrowding in South Africa's correctional centres.
- Investigate the effects of overcrowding on the conditions within the correctional centres.
- Determine the impact of overcrowding on the rehabilitation process of inmates.
- Explore strategies that could enhance the rehabilitation of inmates who are incarcerated in overcrowded correctional centres.

1.7 Key Research Questions

- What factors are drivers of overcrowding in correctional centres?
- What are the current conditions in the correctional centre under investigation and to what extent are these conditions caused by overcrowding?
- How are inmates affected by overcrowding and will this impact their potential for rehabilitation?
- What strategies can be used to enhance the rehabilitation of inmates who are incarcerated in overcrowded correctional centres?

1.8 Chapter Sequence

Chapter 1: *Introduction.* The introductory chapter outlines the research topic and the problem under investigation and the relevance of the investigation is discussed. The background of the study and the motivation for the study are illuminated and the aim, objectives and key research questions are presented. A brief summary of the structure of this study report concludes this chapter.

Chapter 2: *Literature Review.* This chapter commences with definitions of the key concepts referred to in the study. Relevant literature within the field of interest that was reviewed is discussed. This review enabled the researcher to understand and compare the existing ideas and arguments of other scholars within the field of the topic under investigation, and it also assisted in identifying any gaps in the literature that should be addressed by the current study.

Chapter 3: *Theoretical Framework.* In this chapter, the theoretical framework within which this study was located is described and linked with the research topic.

This theory underpinned the scholarly narratives pertaining to the reviewed literature and the findings of the current investigation.

Chapter 4: *Research Methodology*. This chapter explains the research design that was employed and elucidates the research methods that were used.

The population sample is described, followed by a description of the primary data collection technique, the data analysis methods and how the data were interpreted. The ethical considerations that were adhered to in this study are also indicated.

Chapter 5: *Data presentation and Analysis*. This chapter presents an analysis of the data and illuminates the findings that emerged from the data. The data were elicited by means of semi-structured interviews that were conducted with participating inmates. Verbatim transcriptions of the primary data are used to contribute to the validity of the study. The findings are also linked with the theoretical framework and the literature that was reviewed, which was a process that contributed to the validity and trustworthiness of the findings.

Chapter 6: *Conclusions and Recommendations*. This chapter concludes the study report. The main conclusions are discussed and recommendations for future research are offered. Measures that can be implemented to deal with overcrowding in correctional centres are suggested.

1.9 Conclusion

Much evidence was obtained from the literature review that confirmed that correctional centres in South Africa are over populated. One researcher refers to these centres as “universities of crime” which suggests that they have become institutions where criminal behaviour is exacerbated rather than rehabilitated, regardless of efforts by the Department of Correctional Services to curb criminal tendencies in its inmates. This chapter provided an outline of the dissertation and discussed the core of the study as articulated through the background, the aim of the study, the objectives and the key research questions that gave direction to the investigation. A synopsis of the chapters was presented to provide the reader with an overview of the dissertation.

A conceptualization of the terms that were employed and an in-depth literature review are presented in the following chapter, which is concluded with an elucidation of the theoretical framework within which this study was located.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

Overcrowding in correctional centres does not only affect the inmates, but impacts the community at large as the rehabilitation of inmates seems ineffective and criminal tendencies are exacerbated. The overcrowding of correctional centres occurs in most countries of the world, with South Africa being no exception.

This chapter presents a review of relevant literature that focuses on the themes of overcrowding and the rehabilitation of offenders in correctional centres. The discourse examines various findings and opinions and positions the research in the context of the existing body of knowledge regarding correctional centre overcrowding, and the rehabilitation (or lack or rehabilitation) of offenders in South Africa.

SECTION 1

2.2 Historical Overview of the Establishment of Correctional Centres in South Africa

In South Africa, the contemporary standing of correctional services is a consequence of numerous political and social changes that have occurred in the past. During the 1600s, the sentencing of offenders “was aimed mainly at deterring other citizens from offending, hence punishment was carried out in public” (Coetzee, Kruger & Loubser, 2012:28). It is widely held that the most notorious prison that was established in South Africa was located on Robben Island just off the coast of Cape Town, and that this facility was characterised by “severe punishments” that were meted out to the inmates (Muthaphuli, 2008:118). The latter scholar affirms that the first prison in the Cape was established in 1781 and that, by 1848, 22 prisons had already been established around in the Cape (Muthaphuli, 2008). He further asserts that in Natal, the first prison was established between 1838 and 1842 in Pietermaritzburg. In 1854 the Orange Free State also established a prison in Bloemfontein, and the first prison to be established in Pretoria was in 1865 (Muthaphuli, 2008:118). Naser (2005:66) states that “by 1873, 33 prisons had already been established in the Transvaal area”.

Throughout the years, South Africa has been faced with numerous developments in the political, economic, social and technological spheres, and these developments of necessity impacted the legislative framework that guides correctional services in the country. The main moments of these developments are briefly discussed below.

2.2.1 South African prisons in the early 1900s

According to Smit (1992: 20), “the unification of South Africa that took place on 30 May 1910 led to many changes regarding the operations of prisons”. Numerous changes were effected after Jacob de Villiers Roos, who had at the time been employed as the Director of Prisons for the Transvaal since 1908, was elected as the Secretary of Justice and Director of Prisons for the Union. As the newly appointed Secretary, his first task was to develop legislation that would control the operations of prisons. “The outcome of his work was the Prisons and Reformatories Act No. 13 of 1911” (Muthaphuli, 2008:120).

Coetzee, Kruger and Loubser (1995: 29) note that the 1911 Act had many shortcomings in terms of the administration of prisons. One severe weaknesses of the Act was a lack of clarity with regards to the aims of imprisonment, which means that the prison system focused predominantly on safe custody and that prisoners were therefore incarcerated in harsh conditions. According to Muthaphuli (2008:120), “punishment and forced labour were the order of the day within the prisons”. Moreover, section 9(1) of the 1911 Act made specific provision for racial segregation in prisons, which reflected the issue of racial segregation and prejudice at the time.

2.2.2 The 1947 Lansdowne Commission on Penal and Prisons Reform

Due to the high levels of reoffending amongst prisoners, there was a dire need to reexamine the daily procedures of correctional centres so that changes could be implemented where necessary. According to Muthaphuli (2008:119), the Lansdowne Commission was appointed in 1941 to address this need, but its findings were only released in 1947. One of the chief findings of the Commission was that the legacy of the 1911 Act continued to sanction harsh sentences and a discriminatory system instead of changing the operations of correctional centres to reflect democratic and humane values. Coetzee, Kruger and Loubser (1995:31) comment that the Commission had the mandate to investigate:

“...[the] whole structure of the Department of Prisons, methods of recruitment used by the Department as well as the qualifications of the prison officials, classification and

control of prisons, methods of punishment which were being used in various prisons, various forms of programmes aimed at educating and training offenders in various skills, the remuneration of offenders for the work that they did, the use of prisoners for labour by private institutions or individuals, and the transfer of prisoners from prison to society.”

According to Muthaphuli (2008:122), the Commission recommended, among others, the abolishment of the practice to use inmates as cheap labour. He stated:

“It did not support the hiring of prisoners to private institutions or individuals; it emphasised the rehabilitation of prisoners and the provision of education and training, and it discouraged the military approach to management followed by the Department, as this was not conducive to the rehabilitation efforts” (Ibid.)

2.2.3 The epoch of South African prisons from 1959 to date

In 1959, the Prisons Act No. 13 of 1911 was replaced by the Prisons and Reformatories Act No. 8 of 1959, as Act 13 was ostensibly a failure because it did not clearly state the aims of imprisonment. Muthaphuli (2008:116) states that the new Act was influenced by the Standard Minimum Rules for the Treatment of Prisoners that had been developed by the United Nations in 1955. According to this scholar, “the Act did manage to set out the responsibilities of the Department as follows: safe custody of offenders, development and rehabilitation of offenders, efficient management of the Department, and the performance of other duties that can be assigned by the Minister” (Ibid.).

However, the 1959 Act, which was later referred to as the Correctional Services Act No. 8 of 1959, was fraught with various shortcomings. Although it was intended to be in line with the international Standard Minimum Rules, some requirements were in conflict with these rules (Human Rights Watch, 1994:1). For example, Rule 6(1) of the Standard Minimum Rules states that all the provisions should be applied impartially without any discrimination on one or more of the following grounds: “...race, colour, gender, language, religion or other opinion, national or social origin, property or other status” (Muthaphuli, 2008:98), yet the South African legislative framework of the time was still deeply entrenched in the apartheid policies of the ruling political party.

Thus the 1959 Act stated in section 23(1):

“(b) as far as possible, white and non-white prisoners shall be detained in separate parts thereof and in such manner as to prevent white and non-white prisoners from being within view of each other; and

(c) wherever practicable, non-white prisoners of different races shall be separated.”

Smit (1992:31) remarks that even after the introduction of the Act of 1959 which was envisioned to be a replacement of the 1911 Act, the racial segregation of offenders was maintained. Additionally, corporal punishment was retained as a means of punishment and as a corrective measure for male prisoners. This form of punishment was used even though the Standard Minimum Rules sternly opposed it. The Act also did not encourage the principle of transformation in the prisons system either (Smit, 1992:31).

These developments affected the daily proceedings within prisons. For example, “the political control of the past as characterised by the rule of apartheid also extended to the operations of prisons because prisons are government institutions” (Smit, 1992:31). According to Muthaphuli (2008:121), “the separation of white offenders from non-white offenders and the dominance of white people in the management of prisons are some of the examples of the apartheid rule”. However, earlier Smit (1992:39) argued that “the reversal of racial segregation which had been part of South African prisons for more than a century began in 1988 owing to amendments to a number of regulations that referred to race”. Muthaphuli (2008:121) concurs with this assessment, stating that “in 1990, a national peace accord that led to the end of all discriminatory laws was signed. The end of discriminatory laws also extended to prisons, where racial discrimination was abolished”.

SECTION 2

2.3 Extent of Overcrowding in Correctional Centres

2.3.1 The attention overcrowding invited internationally

Brivika (2006:33) annotates that numerous research studies have been conducted abroad to consider the problems associated with overcrowded prisons. This scholar propagates that government officials in South Africa should take heed of some of these studies’ startling conclusions.

For example, Klofas et al. (2003 as cited in Steinberg, 2005) propagates that a focus group of some 20 seasoned prison officials came together to discuss ways to improve the functioning of the prison system in the USA. The focus group reported that when a prison reached 80% of its design capacity, already the efficiency of the prison administration would begin to suffer, particularly in the classification and movement/placement of prisoners. The focus group stated that adjustments to or the abandonment of the classification system was one of the most serious drivers of overcrowding and that it stunted the development of appropriate inmate rehabilitation programs.

Other scholars have found that overcrowding in correctional centres throughout the world is escalating, which places an enormous financial burden on governments (Pijoos, 2017; Shabangu, 2006 & Archibold, 2010). For example, Allen (2010) estimates that about 30 million people are annually incarcerated world-wide and suggests that, regardless of the number of international provisions in instruments that protect inmates, their rights are persistently violated. Allen also (2010:12) affirms that, in many countries across the world, “places of detention are constantly overcrowded, filthy and lack the minimum facilities necessary to allow for a dignified existence”.

2.3.2 Overcrowding: the requirement of square meters per detained person

The overcrowded conditions in correctional centres in South Africa are unacceptable. According to Brivik (2005), South African courts have refrained from coming up with rulings that will address the issue of overcrowding in correctional centres and have thus disregarded inmates’ constitutional right to adequate floor space. Instead, they seem to address other questions first, and fail to tackle the issue of overcrowding. Brivik (2005:30) suggests that the courts primarily tend to address questions such as:

- How much time do inmates spend in their cells each day?
- Do they receive adequate exercise, nutrition and recreation?
- Do they have access to adequate ventilation and natural light?
- Do inmates have sufficient access to health services and rehabilitation interventions?

Johnny Steinberg published an article entitled *Treating prisoners like dogs is not going to solve the problem* to expose the issue of overcrowding in South African prisons (Steinberg, 2005).

This scholar estimated that with an overcapacity of more than 74 000 inmates in South African correctional facilities, each inmate is left with an average of only 2 m² of floor space. Brivika (2006:35) asserts that the prescribed floor space for an inmate in a communal cell is 3.344 m², which is stipulated in regulations established by the DCS and governed by the new Correctional Services Act No. 107 of 2008. The latter scholar further argues that, as the problem of overcrowding worsens, “the issues surrounding prison conditions is [sic] piercing the public consciousness, and where once there was ignorance or denial, a new shift in thought is taking place and all courts [that have been] traditionally fearful of tackling sensitive issues such as these have begun to sit up and take action” (Ibid.).

When the former first South African first lady Winnie Madikizela-Mandela was sentenced, Judge Eberhard Bertelsmann explicitly described the conditions facing inmates in South African prisons. He commented as follows, as cited in Brivika (2006:36):

“Beds are placed bunk-style on top of one another, with only a few inches separating them. Prisoners are locked up for 23 hours per day, with sanitary facilities which are by definition overburdened and consequently in a regular state of disrepair. The same holds good for the warm water supply, electricity and other creature comforts. It is no exaggeration to say that, if an SPCA were to cram as many animals into a cage as our correctional services are forced to cram prisoners into a single cell, the SPCA would be prosecuted for cruelty to animals. The crisis in our prisons has huge constitutional implications for the whole criminal justice system, and urgent steps need to be taken to address our entire sentencing and prison regimes.”

Brivika (2006:36) accentuates that “such poignant words by Judge Bertelsmann should not be seen to be limited to the South African experience alone”. This scholar argues that numerous other countries go through similar challenges and should seek solutions to the problem of maintaining inmates’ rights with only inadequate resources at their disposal. He cites the following example:

“In *Kalashnikov v Russia 110*, the applicant was confined to a cell with 11 to 14 occupants, each of whom had 0.9-1.9 square meters of floor space. The court went on to describe other an issue under Article 3 of the European Convention on Human Rights, which prohibits degrading treatment. Hence the reasoning behind such extensive and explicit legislation is found both in the South African Constitution and

International bodies which are there to protect inmates from cruel, inhuman or degrading treatment.”

Notwithstanding the lack of control in local case law, there are international standards on accepted accommodation standards. The Council of Europe's Committee for the Prevention of Torture and Inhuman or Degrading Punishment (1999) establishes 4 m² per inmate as the minimum floor space in a communal cell and 6 m² for single cells.

Brivika (2006:37) indicates that in the USA, both the American Correctional Association and the American Public Health Association “have set standards requiring a minimum of 60 square feet (18.18 m²) for each inmate”. These standards have now found their way into USA federal regulations, with the Bureau of Prisons having used them to establish the rated capacity of its prisons. Courts have also used these standards to establish judicially enforceable minimal standards of floor space per inmate.

2.3.3 Overcrowding and HIV/AIDS

Notwithstanding the gross human rights deficiencies due to overcrowding, there is another alarming social phenomenon that is associated with the prison cells. John Howard notes that as far back as 1777 it was commented that the mixing of inmates of all types in the same jail “spreads diseases rapidly” (Howard, 2004). Brivika concurs (2005:40), asserting that in the present day “correctional centres remain a melting pot of diseases, viruses and infections which has [sic] become ever more serious with the HIV/ AIDS pandemic”. According to Avert (2017:2), globally 3.8% of inmates are HIV positive and 2.8% have active TB. This scholar further argues that the HIV/AIDS pandemic “is currently ravaging our country making it, along with poverty, the country’s most pressing problem”. The HIV/AIDS pandemic is claiming millions of lives in South African communities and prisons are no exception. Even more worrying is the intentional spreading of HIV/AIDS. This phenomenon is was addressed by Dr Anthony Minaar (2003:78) from the institute of Human Rights and Criminal Justice Network, in the following statement:

“Overcrowding is only one of the factors. There are extremely strong gang cultures and rape is used for control and power and for the punishment of non-members. Gangs catch up with so-called enemies and one of the forms of punishment is a so-called “slow puncture”. This is the rape of an inmate by a fellow inmate who knows that he is HIV-positive, and thereby inflicting a death sentence.”

Bearing in mind that 4 out every 1 000 South Africans are incarcerated and that “inmates are primarily young, black men from impoverished communities which are already hardest hit by HIV/AIDS, the overcrowding of correctional centres only adds fuel to this perilous fire” (Goyer, 2003). In South Africa, the anticipated prevalence rate of inmates infected with HIV/AIDS is 60%. The following are official statistics relating to HIV/AIDS nationally and internationally (Brivika, 2006:41):

- In correctional centres in England and Wales, 8 inmates were identified to be HIV positive and/or to suffer from AIDS in May 1996.
- In the US, 2.3% of the entire population was infected with HIV or AIDS in 1995, which was a total of approximately 24 200 individuals. In the same year, more than 1 000 inmates died of AIDS in correctional centres. The overall rate of confirmed AIDS cases among the American inmate population in 1995 was more than six times that of the general US population.
- In South Africa, there were 2 600 registered cases of HIV and 136 cases of AIDS by 31 December 1999. There were also 1 360 cases of tuberculosis. In the same period, the Department of Correctional Services reported 3 427 cases, stating that from 31 December 1999 to 31 March 2000 (a 3-month period) there was an increase of 691 cases of HIV/AIDS infections in correctional centres.

According to Shange (2016), 98% of the HIV positive inmates took antiretroviral medication. The DCS 2015/2016 annual report revealed that the number of HIV positive inmates increased drastically in 10 years from 60% to 90%. Amongst the 22 142 inmates who took an HIV test, 21 722 tested positive and were on antiretroviral therapy (Makou, Skosana & Hopkins, 2017). However, the latter scholars assert that 85% of the inmates who were infected with TB were cured. After the DCS had partnered with different stakeholders such as the Department of Health in 2015, objectives were formulated that were intended to provide “health care services, nutritional services and hygiene services to all inmates” (Makou, Skosana & Hopkins, 2017). Shange (2016) argues that the conditions in correctional centres are not suitable for the well-being of inmates as these centres are deemed a high risk environment for HIV transmission and are “characterized by overcrowding and commonly operate in an atmosphere of violence and fear” (Shange, 2016:22). The inmates are often locked up in their cells 23 for hours a day and tensions and boredom abound. The release of boredom usually involves drug use which includes sharing needles, tattooing with homemade unhygienic utensils and high risk, non-consensual sex (Ibid.).

SECTION 3

2.4 Causes and Effects of Overcrowding in Correctional Centres

2.4.1 Crime rates

According to the Canadian Correctional Service (2000), the crime rate, types of crime and the degree to which offenders are sentenced to a period of incarceration are the main determining factors of prison admission rates. Sheldon and Brown (1991:347) found that “a major factor in overcrowding in US prisons is a rise in arrests for specific crimes such as impaired driving, domestic violence and the war on drugs”.

Mauer (in Needham, 1992:4) links a high crime rate to the patterns of policing as well as prosecuting and sentencing practices such as the “get-tough-on-crime laws” and the “war on drugs”. The “get-tough-on-crime” attitude has made alternative sentencing practices and community-based supervision less appealing options for the judiciary, correctional services and parole boards. The “war on drugs”, on the other hand, led to an increase of drug arrests in the US from just over 471 000 in 1980 to 1.2 million in 1989 (Needham, 1992:4).

According to Bhorat, Lilenstein and Monnakhgotla (2012), South Africa has the highest crime statistics in the whole world and most researchers argue that economic deprivation is a prime determinant of crime. The latter scholars further assert that “in a traditional economic model of crime, criminal behavior depends on, amongst other things, the payoff from committing a crime successfully, conditions for the likelihood of obtaining legitimate sources of income, together with this commensurate level of legal labour market income” (Bhorat, Lilenstein & Monnakhgotla, 2012:16).

According to Budlender (2015), the crime rate can be linked to three major socio-economic issues: unemployment, income levels and the prevalent level of income inequality. South Africa has one of the highest unemployment rates in the world (Statistics South Africa, 2016), and therefore the possibility that an individual will gain a reasonable source of income by legitimate means in an effort to sustain a family is low. Bhorat and Mayet (2012:6) argue that inequality also influences crime levels in South Africa as “high levels of legal income simultaneously increase payoff from criminal activities as the benefits of crime in high income areas are high while the benefits of legitimate activities are simultaneously low”.

This information correlates with the South African Police Services Crime Statistics of 2016/2017 (see table below) which show that of the seven categories of crime, theft and property crimes were the highest between 2007 and 2017.

Table 2.1: SAPS Crime Statistics 2016/2017

| CRIME CATEGORY | FINANCIAL YEAR OF 2007/2008 | FINANCIAL YEAR OF 2016/2017 |
|---|--|--|
| Contact crime | 686 294 | 608 321 |
| Sexual offences | 69 197 | 49 660 |
| Subcategories of aggravated robbery | 49 103 | 61 078 |
| Contact related crime | 137 914 | 120 730 |
| Property related crimes | 527 088 | 540 653 |
| Other serious crimes (theft not mentioned above, shoplifting and commercial crime) | 1 885 881 | 1 738 980 |
| Crime detected as a result of police action | 186 988 | 3910 021 |

2.4.2 Inmates awaiting trial

Brunys (2007:35) suggests that some laws, coupled with the provision of non-bailable legislation, exacerbate the waiting period for trials in some countries, and that this situation deteriorates into overcrowding. For example, Swaziland passed a law that allows a 60-day detention period without trial (Makhanya, 2011). In South Africa, the Criminal Procedure Second Amendment Act No. 85 of 1997 allows magistrates and judges to use their discretion to grant bail in certain cases (Brunys, 2007: 35), which sometimes alleviates the number of incarcerated inmates who await trial.

Swaziland passed an Act (the Non-Bailable Offences Act of 1998) which prevents Swaziland's courts from granting bail to persons arrested for rape, murder, robbery and other serious crimes. The annual report of the South African Judicial Inspectorate of Prisons (SAJIP) (2006:28) implies that many trial-awaiting inmates "are detained unnecessarily". For example, the 2005 report revealed that 225 373 (about 18 000 per month) trial-awaiting inmates were taken to court and not returned to prison (SAJIP, 2006:28). Some of the offenders might have been found guilty and given non-custodial sentences whilst the remainder may have had their charges withdrawn. Most of the time, trial-awaiting accused are incarcerated even though their offences may be bailable because they cannot afford paying bail due to poverty or they are not offered bail due to restrictions in legislation (Brunys, 2007:36).

According to the SAJIP (2006:28), on 6 February 2006 "there were almost 13 000 trial-awaiting inmates in South African correctional centres because of their inability to pay their bail amounts. Non-bailable legislation and the slow delivery of justice exacerbate ongoing judicial problems such as the backlog of pending cases, lengthy pre-trial detention and continual remands in custody by the courts". It was also noted that 11 464 offenders had been awaiting their trials for more than six months whilst 1 433 had waited more than two years (SAJIP, 2006:14). In South Africa, the average number of trial-awaiting inmates was 23 783 in 1995 and reached a high of 64 000 in 2000 (Brunys, 2007:37). The latter scholar further states that these numbers steadily declined to 46 327 in 2005 "and continuing to drop due to efforts made by the police and judiciary to reduce the number of those awaiting trials" (Brunys, 2007:37). According to Nxumalo (2016), spokesman for the DCS, at the end of the 2015/2016 financial year a quarter of inmates who were incarcerated in South Africa in that period were detainees. Actions such as releasing trial-awaiting inmates on warning, affordable bail settlements and the proclamation of higher amounts for admission of guilt fines assisted in achieving this goal.

2.4.3 Imprisonment rates

The world population of correctional centre inmates has grown progressively and markedly in the past years. A finding by Walmsley (2007:1) shows that the population in correctional centres has increased in almost three-quarters of the countries listed. According to the Institute for Criminal Policy Research (2016), South Africa had the highest correctional centres population at 158 111 inmates in the year receding the survey.

The report also confirmed that the inmate population world-wide had increased in 64% of the countries in Africa, in 84% in the countries in the Americas, in 81% of the countries in Asia, in 66% in of the countries in Europe, and in 75% of the countries in Oceania” (Walmsley, 2007:1). The growth of the population in correctional centres in Southern Africa is presented in Table 2.2 below. Botswana is the only country in this region where the inmate population declined, whereas all the other countries had a steady growth in their correctional centre populations in the mid-1990s until 2007. The statistics also indicate that all the countries in its region (excluding Botswana and Namibia) had a downward trend in their prison populations in the period 2002 to 2007 (Brunys 2007:37). This can be ascribed to the fact that Southern African countries are endlessly involved in discussions to resolve issues related to overcrowding in correctional centres.

Table 2.2: Southern African inmate population figures

| COUNTRY | PRISON POPULATION (YEAR) | | | | | |
|---------------------|---------------------------------|--------|---------|--------|---------|--------|
| Botswana | 6 455 | (1998) | 6 102 | (2002) | 5 917 | (2007) |
| Lesotho | 2 552 | (1999) | 3 000 | (2002) | 2 701 | (2007) |
| Namibia | 3 660 | (1995) | 4 779 | (2000) | 4 814 | (2001) |
| South Africa | 54 576 | (1999) | 181 944 | (2002) | 159 961 | (2007) |
| Swaziland | 2 213 | (1997) | 3 169 | (2003) | 2 719 | (2007) |

Source: Adopted from the ICPS, 2007

2.4.4 Short-term incarceration

Brunys (2007:36) maintains that short-term inmates are usually offenders who are sentenced for a period of incarceration of less than two years. Moreover, short-term incarceration has the likelihood of destroying the community’s support for an offender who may lose his/her job, residence and partner and become less employable (Brunys, 2007:36). Smit, Goggin and Gendreau (2002) indicate that short sentences are not effective in reducing crime, and neither are they effective in containing population growth in correctional centres. These scholars further maintain that the abolition of sentences of less than six months has also been a subject of political and academic debate for many years in numerous countries.

Tonry (cited in McGinty, 2002:27) also found that “short sentences are ineffective and are problematic in the context of recidivism”. This scholar also found that a slight increase in courts imposing longer sentences occurs where short sentences have been obliterated. To further drive his point, Tonry (Ibid) used Western Australia as an example and added that this region in Australia had achieved an 11% decrease in its adult correctional centre population since October 2001 as it had, inter alia, legislated the abolition of correctional sentences of less than six months (Daley, 2003:1-2). “Short-term inmates are in custody for a very short time frame and this makes it difficult for vocationalists (e.g., spiritual and social workers and psychologists) to have a positive impact on these inmates’ future likelihood of reoffending” (Brunys, 2007:40).

The John Howard Society of Alberta (2002:3-4) also argues that there is no definite indication that correctional efforts will have any effect on the probability of future recidivism amongst short-term offenders. The JHSA (2002:12) suggests that the following could positively impact recidivism among short-term inmates:

- Correctional services should collaborate to develop a uniform, centralised information gathering system to determine the risk factors for criminal involvement and recidivism among short-term inmates.
- Correctional services should critically evaluate the effectiveness of interventions that are seemingly intended to prevent recidivism.
- When intervening with serious and violent offenders, correctional services should make the most of the extended time that these offenders are incarcerated.
- Whenever possible, offenders who do not pose a threat to public safety should not be incarcerated.

2.4.5 Long-term incarceration

Van Zyl Smit (cited in the Annual Report of the Judicial Inspectorate of Prisons, 2006:21) argues that overcrowding in South African correctional centres is caused by a number of factors. The first is that offenders are incarcerated for periods that are too long, and the second is that offenders are not released in good time.

According to Brunys (2007:40), South Africa introduced minimum sentences in the Criminal Law Amendment Act No. 105 of 1997 for crimes such as murder, rape, robbery and drug related offences because it was believed that long sentences would deter criminals from committing further crimes; however, this move contributed to the overcrowding of correctional centres. Thus even though reduced custodial sentences were imposed, the effect of minimum sentencing greatly increased the number of inmates serving life and long-term sentences. Brunys (2007:40) further maintains that “this legislation does not allow for the suspension of any part of the sentence or any deduction in sentence for the period the offender is in prison awaiting trial”.

Many cases should also be referred to the High Court for sentencing as they fall beyond the jurisdiction of Magistrates’ courts. According to the SAJIP annual report (2006:23), this process can cause delays of more than one year between conviction and sentencing. Additionally, McGinty (2002) indicates that the effect of this legislation on the correctional centre population is enormous. This scholar further maintains that “the number of life sentences since the implementation of the minimum sentence legislation on 1 May 1998 has increased from 793 to an average of 6 214 in 2005”. The Minister of Justice and Correctional Services mentioned that, between 2005 and 2016, sentences for longer periods (10 to 15 years) rose by 77% while short-term sentences decreased in the same period. However, as many accused criminals received long-term sentences, this put enormous pressure on the correctional centres that were already overcrowded (Masutha, 2016).

Before the implementation of this legislation, “only 35 459 (35%) of the inmate population served a term of seven years or more” (McGinty, 2002:51) but by the year 2005, this increased to 70 435 (60%). The SAJIP annual report, (2006:23, 25) maintains that, as a result of this, “the number of inmates classified as maximum security escalated from 14 229 in 1995 to 38 406 in 2005 – an increase of 270% in 10 years”. A member of the Economic Freedom Fighters political party maintained, at the presentation of the DCS budget in 2016), that long-term imprisonment led to thousands of offenders being incarcerated for years without any chance of parole. He further argued that long-term imprisonment led to overcrowding, making the rehabilitation of offenders impossible (Masutha, 2016).

2.4.6 Sentencing practices

Brunys (2007:40) argues that the insufficient use or lack of alternative procedures to incarceration is considered as a chief causal factor of overcrowding in correctional centres in many African countries. “The propensity in these countries is one where incarceration is applied by the courts as a first option before considering other non-custodial measures, while incarceration should be considered as a last resort” (Brunys, 2007:45).

Lengthy incarceration has been used as a traditional way of punishment in various countries and brings about negative effects on the wellbeing of inmates (McGinty, 2002). It was after the insinuation of the Correctional Supervision Parole Board under the Correctional Service Act No. 111 of 1998 that inmates were subjected to early release. McGinty indicates that early release measures such as probation, parole and remission have been put in place as alternative measures to incarceration and to address the problems related to overcrowding and the rehabilitation of offenders. Early release measures have the advantage of reducing the length that an inmate spends in a correctional centre and also limits the costs to the taxpayer (McGinty, 2002). When early release is approved subject to good conduct, it also serves as an understated inducement for good behaviour in correctional centres, which is an essential requirement to effective control, care and treatment (Brunys, 2007:45).

SECTION 4: The legal framework that underpins correctional services and rehabilitation

2.5 Provisions in the Correctional Services ACT No. 111 of 1998 for the Rehabilitation of Offenders

2.5.1 Section 4: Approach to safe custody

Section 4 of Act 111 of 1998 deals with the approach to safe custody of offenders and it is associated with the treatment of offenders. This section describes the offender as the responsibility of the Commissioner and all the officials of the Department; hence the offender should accept their authority at all times. While offenders have to submit to the authority of the Department, “the Department must ensure that the security and the safe custody of the offender are maintained at all times” (Muthaphuli, 2008:141).

The treatment of offenders must be upheld in a manner that is lawful and does not encroach upon any of the rights which offenders have while they are in the correctional centre. Fagan (2004:8) argues that “if offenders are safe, they will be motivated to participate in rehabilitation programmes designed for them”, but believes that this is unlikely if offenders are always concerned about their safety. It is also the duty of the Department to provide safe custody for offenders at all times without any discrimination. “By ensuring safe custody of all the offenders, the Department is guaranteed to have offenders who will not hesitate to participate in rehabilitation programmes that will change their lives for the better” (Fagan, 2004:8).

2.5.2 Section 6: Admission

The Commissioner and his representatives are authorised to arrest an offender only if they are in possession of a warrant. Taking an offender into custody without a warrant constitutes an unlawful detention. When an offender has been detained, the personal belongings that the offender had with him/her during the arrest should be recorded, the nature of the offence should be indicated, and the date and time of admission and release should be noted (Fagan, 2004). This section also provides that while an offender/alleged offender is detained in the correctional centre, s/he has the right to consult a legal practitioner of his/her choice and if he or she is not able to afford a legal practitioner, the state must provide one.

All the rights of the offender must be explained in a language which is understood, or an interpreter must be provided (Muthaphuli, 2008). The offenders must be alerted of the official channels of communication through which they can raise their complaints or requests. After admission, offenders must be alerted of the official forms of communication they may use if they have any complaints or requests. Before being put in a cell, offenders must shower and submit to a general health examination to ensure that their health is maintained while being incarcerated. Failure to do so may result in the spread of infectious diseases, or the health of inmates who do not take proper medication may be compromised.

2.5.3 Section 7: Accommodation

According to Ramadikela (2008:5), “the accommodation of offenders must meet all the requirements which are adequate for offenders to be detained under conditions maintaining their human dignity”. As indicated in the Standard Minimum Rules for the Treatment of Prisoners, the detention cell must have enough space, lighting, ventilation and sanitary installations and must be in a condition that promotes the health and safety of the offender.

As a means of ensuring the safety and security of offenders and safeguarding that offenders do not fall victim to nefarious acts, this section of the Act stipulates that offenders must be separated into categories, for example sentenced and not sentenced, male and female, adult and children. Ramadikela (2008:5) propagates that “failure to provide enough space for accommodation not only hampers the offender’s wellbeing, but it also has a significant impact on the implementation of rehabilitation programmes”. This may occur when offenders who should be focusing on programmes that will work for them, rather tend to worry about their health and pay very little attention to their rehabilitation.

Muthaphuli (2008:144) annotates that if offenders are provided with enough space to meet all their requirements, “there is no doubt that they will find it comfortable and focus on the positive aspects of their lives. To avoid such [any] problems, the Department must [thus] ensure that the accommodation meets all offenders’ needs”.

2.5.4 Section 8: Nutrition

This section provides that offenders must be supplied with adequate, healthy food and those with specific nutritional requirements – such as children and pregnant women – “must also be provided with whatever it is that they require” (Masutha, 2016:23). Additionally, diets for religious and cultural reasons must be well prepared if possible. For example, Halaal food for Muslims and no hot food on Saturdays for Seventh-day Adventists and members of the Nazareth Baptist Church. This Act necessitates that inmates must be provided with nutritious food and clean water at all times. The needs of offenders with special nutritional requirements such as children, women and sick people also have to be met.

However, Winter (2011) found that these requirements were not met at a large correctional facility in the Durban area. The study revealed that inmates had to settle for a portion of phuthu (‘pap’ or maize meal porridge) and a chicken wing or drumstick with soup for supper. If the food ran out (which reportedly often happened), two slices of brown bread and soup were provided for supper. This scholar also mentions that inmates were given black tea and that no fresh milk was served as a beverage. Taking into consideration that supper would be served at 3 pm, the inmates were hungry and some were starving at bed time. Winter’s study confirmed that providing inmates with a well-proportioned, nutritional diet plays a vital role in the rehabilitation of offenders. Muthaphuli (2008:144) notes that “failure to provide sufficient food will have a major impact on the rehabilitation process because no starving offender will be able to dedicate himself or herself to the programmes”. Ramidikela (2008:5) also adds that to ensure

the effective implementation of rehabilitation programmes, “the DCS should first meet, amongst others, the nutritional requirements of offenders”.

2.5.5 Section 9: Hygiene

The Department of Correctional Services is tasked with the responsibility of ensuring that offenders’ bodies as well as their clothing, bedding and cells are clean at all times and that personal hygiene must be encouraged amongst all inmates.

Pang argues that in the process of rehabilitating offenders, “it is essential to provide them with the necessary products such as soap, towels and extra clothing in order to ensure that they are always clean” (Pang, 2014). It is undeniable that a lack of such products will present a barrier to any rehabilitation attempts that may be initiated. For example, the community will find it difficult to welcome an unkempt person back into the fold even though he/she has been rehabilitated, but they will be more open to this idea when a former inmate is tidy and clean.

2.5.6 Section 10: Clothing and bedding

Section 9 of the Act urges that “clean and tidy clothing and bedding must be made available to offenders whether sentenced or unsentenced and they should meet the hygienic and climatic conditions of the time”. The state of the clothing and bedding of offenders must reflect their dignity as specified in the Standard Minimum Rules for the Treatment of Prisoners (2010). It is thus the duty of all correctional officers to make sure that offenders are in good health and that they have been provided with clean clothes that are suitable for any climatic change, particularly in the winter. Pang (2014) mentions that failure to provide warm clothes will result in inmates contracting colds and influenza which can lead to an unhealthy offender population which will in turn hamper any programmes aimed at rehabilitation. To ensure the successful implementation of rehabilitation programmes, the Department must thus avoid providing inmates with clothing and bedding that compromise their dignity.

2.5.7 Section 11: Exercise

Section 11 of Act 111 of 1998 stipulates that each offender is allowed to at least one hour of exercise per day to ensure their healthy. According to Muthaphuli (2008:146), “all offenders must be given enough time to exercise because it gives them access to light and fresh air”. Through exercising, offenders stay in shape and are deterred from undesirable practices such as drug use or gangsterism and it is also an alternative way of dealing with stress.

Exercise also improves heart health lowers the blood sugar levels of diabetic inmates. Muthaphuli (2008:146) states that “offenders must be encouraged to take part in various activities such as sports, music and a wide range of physical exercise available to them to strengthen the rehabilitation opportunities for offenders”. Pang (2014) argues that “failure to provide offenders with enough exercise time will hamper the rehabilitation process because it is during this time that offenders come together and exchange ideas that can help one another”. Muthaphuli (2008:145) also argues that it is through exercise that offenders develop interpersonal relationships.

2.5.8 Section 12: Health care

“Every offender has the right to adequate medical treatment which will lead to a healthy life at the state’s expense. Unless a prisoner requests the services of his or her preferred medical practitioner, only the certified medical practitioner of the institution may offer medical treatment when the need arises” (Masutha, 2016:2).

The Minister of Justice and Correctional Services stated that, in order to maintain a healthy life, offenders should be encouraged to willingly undertake medical examinations and treatment (Masutha, 2016). However, Magubane (2017) argues that the reason why correctional centres are a melting pot of many diseases is because the DCS affirms that no inmate should be forced to undergo a medical examination; yet the majority of inmates are sick and they may infect other inmates. This in turn leads to an unhealthy inmate population which has a negative impact on rehabilitation.

Masutha (2016) states that like any other patient, offenders have the right to be told when they need to undergo surgery and must give their permission, unless the offender is in no state to give his or her consent. In such an event it is up to the practitioner to determine the impact of the surgery on the offender’s health. The Department is tasked with the responsibility of ensuring that all the medical requirements of offenders are met at all times, as this can aid in the prevention of infectious diseases such as Tuberculosis and HIV/AIDS. The inability to provide adequate medical care to offenders results in an unhealthy population with the potential to infect others with widespread dangerous diseases that can result in offenders losing their lives. Therefore, in order to avoid these problems and focus on the implementation of rehabilitation programmes, the department must meet all offenders’ medical needs (Magubane, 2017:16).

This can be done by making sure that all the offenders with contagious diseases such as Tuberculosis and Hepatitis A are kept separate until the disease has been treated or is no longer infectious.

2.5.9 Section 13: Contact with the community

According to Muthaphuli (2008:148), “contact with community members must be encouraged and enough opportunities must be provided for visits by family members, friends, religious leaders and authorised medical practitioners”. In addition, an offender from a foreign country must be allowed to maintain contact with his or her country’s embassy or any member of his or her country who has the responsibility to protect the interests of that offender.

When an offender is detained, it is the duty of the correctional officer to inform the next-of-kin or any other relative mentioned by the offender of his or her incarceration. If a child is detained, “the parents and even legal guardians as well as the Departments of Education and Welfare should be notified and that child cannot refuse to allow notification” (Pang, 2014). Successful rehabilitation depends to a large extent on the support offenders receive from the community form which they come. Thus strong relationships between the offender and the community “strengthen opportunities for successful reintegration into society” (Pang, 2014). If the community does not accept that the offender has been rehabilitated, he or she might resort to unlawful actions that will mostly likely get him/her arrested again.

2.5.10 Section 14: Religion, beliefs and opinions

An offender can practise his or her freedom of religion, conscience, thoughts, beliefs and opinions and is allowed to attend religious services or meetings within the correctional centre without being bothered or even forced to do so by anyone. The Department of Correctional Services is liable for establishing a a place of worship for all religions in a correctional centre (Muthaphuli, 2008:152). Because religion is important to most human beings, offenders’ religious beliefs must be respected. Moreover, because of the positive influence that religion has on people, the Department may find it easier to maintain discipline and to focus on the implementation of rehabilitation programmes when religious practices by inmates is encouraged. In this context, Magubane (2017) mentions that religious offenders are disciplined and more likely to focus on their rehabilitation than those who are part of irreligious gangs. More disciplined inmates could also encourage other offenders to change their behaviour.

The Directorate of Spiritual Care can thus change the criminal tendencies of offenders and assist them to lead a new life even outside the prison. Communication among offenders who have the same religious beliefs can lead to the sharing of positive thoughts which will strengthen their rehabilitation potential.

2.5.11 Section 16: Development and support services

Masutha (2016) states that it is the duty of the Department to make sure that every development and support service is available to inmates and that those offenders who request these services must be allowed to utilise them. When planning policy and designing the infrastructure of correctional centres, services required by disabled inmates must be considered. For example, creating wheelchair ramps is a necessity.

Muthaphuli (2008:152) states that “because it is the aim of the Department to rehabilitate offenders, it is important to provide every means that will lead to this rehabilitation”. Therefore, offenders ought to be encouraged to take part in skills development programmes that will equip them with skills and knowledge for reintegration into society. The Directorate of Skills Development is responsible for the development of offenders by offering training programmes that will be of use to them after their release. However, according to Muntingh (2012) overcrowded correctional centres fail to provide enough resources and skills rehabilitation programmes for this ideal to be realised.

2.5.12 Section 18: Reading material

“Offenders can receive study materials of their choice from outside the correctional centre or access those in the centres’ libraries unless this hampers the rehabilitation process of the offender or the material constitutes a security risk” (Muntingh, 2012:19). To decrease the recidivism rate in South Africa, offenders must be given ample opportunities to access reading materials that will assist them in obtaining new skills and expanding their knowledge. Thus offenders should not be deprived of access to newspapers, radio broadcasts and televisions as these resources keep them up to date with what is taking place in the outside world.

2.5.13 Section 21: Complaints and requests

Every offender has the right to communicate with the head of the correctional centre if s/he has complaints or requests. This official is expected to take the necessary steps to deal with the need or complaint and to communicate the outcome to the offender.

However, Khweswa (2014) maintains that “if the offender is still not satisfied with the outcome, he or she might take the matter to the area manager and must provide substantive reasons for his or her dissatisfaction”. Furthermore, Muthaphuli (2008:150) adds that “the area manager will try to tackle the issue and if a solution is still not found, the problem can be referred to an independent visitor to the correctional centre”.

2.6 The White Paper on Corrections regarding the rehabilitation of offenders

The 1994 White Paper was substituted with the 2005 White Paper on Corrections by parliament in November 2004. According to the Department of Correctional Services (2005b:13), the 1994 White Paper had the following inadequacies, amid others:

- It did not focus on correction and rehabilitation in South Africa and, in particular, the role of the Department in these services.
- It lacked a positive approach to the erection and procurement of facilities to ensure alignment with the objectives of rehabilitation.
- It lacked a long-term vision on policy with regard to issues such as a public-private partnership policy.
- It did not address important issues relating to human resources that are critical to the implementation of the Department’s new rehabilitation centre system.
- It did not set out a clear departmental role in contemporary government initiatives, including corrections in the African Union, the Moral Regeneration Movement, sustained growth and development, and the National Crime Prevention Strategy.
- It lacked consistency in the use and understanding of key terminology and definitions in a way that is user-friendly and consistent with the philosophy of corrections.

In 2014, Makabetse Sekhonyane published an article entitled “First things first: Rehabilitation starts with alternatives to prison” in which he wrote: “The White Paper of 2005 focuses on the correction of offending behaviour, the development of the offenders, security (for both offenders and officials), care of offenders (health, physical and psychological needs), facilities and aftercare” (Sekhonyane, 2004). According to the South African Yearbook (2006/07: 415), the White Paper of 2005 addresses the notion of rehabilitation and the fact that rehabilitation as well as social reintegration remain the chief responsibilities of the authorities.

The White Paper is underpinned by the morals and rights that are rooted in South Africa’s Constitution of 1996 and in the Correctional Service Act 111 of 1998.

Amid other things, these legislations safeguard offenders against abuse and insist that they are treated in a compassionate manner that makes rehabilitation possible (White Paper on Corrections, 2005:8). The White Paper deals with the following rights of inmates in the respective sections:

- Section 9: equality
- Section 10: human dignity
- Section 35: the rights of detained persons
- Section 27: the right to health care services, food, water, etc.
- Section 12: the freedom and security of the person
- Section 28: the rights of children
- Section 29: religious freedom
- Section 41: intergovernmental relations
- Section 195: values and principles governing public administration.

Table 2.3 is an excerpt from a table that was presented by the Centre for the Study of Violence and Reconciliation (CSVR) on 03 February 2004 to the Parliamentary Portfolio Committee on Correctional Services on the Draft White Paper on Corrections in South Africa:

Table 2.3: CSVR submission to the Parliamentary Portfolio Committee on Correctional Services

| FACTOR | ASSISTANCE THAT CAN BE PROVIDED |
|----------------------------|--|
| Education | Education and training programmes can give offenders the skills needed to gain employment. |
| Employment | Opportunities are provided to gain valuable practical experience of paid work and to make contact with employers prior to release. |
| Drugs and alcohol | The correctional centre can be an effective place to get drug treatment. Many who have had no help before are assisted in drug rehabilitation. Valuable links can be created to access community treatment programmes. |
| Mental and physical health | Access is possible to proper diagnosis and treatment, often for the first time. Ex-offenders are able to take up opportunities such as employment and training on release. |

| | |
|--------------------------------------|---|
| | |
| Attitudes and self-control | Opportunities to take part in programmes to improve thinking skills and anger management are offered. Inmates may be guided to learn from past experiences while they are separated from negative peer pressures. |
| Institutionalisation and life skills | The correctional system can provide a safe place for offenders to develop positive life skills. |
| Housing | Opportunities are created to access safe tenancies or to reduce mortgage and housing payment arrears. Inmates may be assisted in repaying rent arrears, assessing their housing needs and beginning a move to stable, supported accommodation. Opportunities are created to acquire skills in managing tenancies. |
| Benefits and debt | The correctional system can provide access to debt advice and can improve the chances of accessing financial support on release via the setting up of benefits interviews. It offers the chance of earning and saving money. |
| Families | The correctional system can give offenders' families the opportunity to have an input into an offender's rehabilitation needs. It can separate an offender from a criminal background, or give a family respite from a difficult or dangerous family member. |

Source: Centre for the Study of Violence and Reconciliation (2004)

According to Bruyns (2007), limited education and lack of employment are the main causes of crime in South Africa. Table 3.2 outlines important areas in which inmates can be assisted while being incarcerated, and these include education and gainful employment opportunities. Offenders with a drug problem also get free drug treatment in the centres. It is no secret that most of the opportunities that inmates get while incarcerated are not available to them in their communities. "One can conclude that sending an offender to a correctional centre is not only a way of eradicating [removing] him or her out of the community, but also of helping that offender to obtain skills that might not be easily available to him or her in the community" (White Paper on Corrections, 2005:11). All these programmes are there to ensure that the offender returns home as a rehabilitated person and gets reintegrated into society.

Additionally, the White Paper on Corrections (Department of Correctional Services, 2005b:21) states that the Department must evaluate the following needs of offenders after admission:

- *The security needs of offenders while taking into consideration their human rights:*

The security needs of the offender means the placement of the offender according to the crime committed. For example, an offender that is sentenced to 2 years for shoplifting but placed in a maximum security facility with serial rapists and murderers can lead to the adoption of more serious criminal tendencies and exposure to rehabilitation programmes that are not suitable.

The physical and emotional wellbeing of offenders:

To ensure appropriate rehabilitation support, an evaluation of the physical and emotional wellbeing of each offender must be conducted. For example, programmes that are designed for inmates who are older will be offered to older offenders, and offenders with a mental illness should be allocated to appropriate rehabilitation programmes that include psychological services.

- *Educational and training needs of offenders:*

Each offender should be evaluated for his or her educational capabilities to ensure that each inmate is placed at a level of education support that is suitable for him or her. In this manner the rehabilitation needs of offenders will be met. This will not happen when offenders are placed in inappropriate programmes.

- *Accommodation needs:*

Because the state has an obligation to supply suitable accommodation for offenders, assessing them will help determine what is appropriate and those with special requirements, such as offenders with disabilities, will be identified. Rehabilitation requires that every accommodation need is met so that offenders can focus on the rehabilitation programme that they are assigned to.

- *The need for support after the offender has been released:*

It is the duty of the Department to ensure that the offender is successfully reintegrated into society. The Department thus offers a variety of rehabilitation programmes for offenders that will help them after their release. By thoroughly assessing offenders, it will be determined whether they require further support to ensure that they reintegrate successfully.

- *Offenders' needs which are related to specific information programmes that deal with offending behaviour:*

Offenders' behaviour which may be problematic in the rehabilitation process may be identified in the assessment stage. The White Paper also accentuates that, for the effective reintegration of offenders, Correctional Services should try and reconstruct the lost relationship between the offender, the community and society (Department of Correctional Services, 2005b: 21).

- *Written and telephone communication:*

For offenders to successfully reintegrate into the community of their origin or choice, they should be encouraged to regularly interact with members of that community. Mail and telephone conversations between offenders and the community outside correctional institutions have a positive contribution towards their reintegration. Through such modes of contact, offenders are kept up to date with developments within their families or in their communities.

- *Physical and emotional wellbeing:*

Offenders must be well prepared both physically and emotionally to return to society. Service providers such as social workers, psychologists and doctors must monitor the integration of offenders into the community. If an offender is not emotionally prepared to return to the community, chances are that he or she will return to the prison sooner than expected.

- *Visits with family, friends and loved ones:*

“Visits give inmates something to look forward to, an incentive to participate in rehabilitative programs, and a mechanism with which to cope with prison life” (Carlson & Garrett, 1999: 281). Most offenders who receive enough support from their families and friends will adapt positively to the rehabilitation programmes that are offered in the prison. Visits can lead to offenders' good behaviour, amongst other things. Many offenders will try everything possible to change the behaviour that caused them to go to prison in the first place so that they do not disappoint their families again.

- *Access to information about the world outside through newspapers, television and radio:* Newspapers and television and radio programmes, just like telephone and mail communication, also keep offenders up to date with the latest developments in their respective communities and society as a whole.

These means of contact with the outside world ensure that offenders are not left out of normal community life and offenders are updated with political, economic and technological developments. This knowledge will create an informed inmate community and will help offenders when they return to society.

- *Contact with social institutions from his or her community of origin:*

Social institutions have a positive impact on every individual's life, whether the person has been an offender or not.

These institutions can help offenders to find employment that will sustain their lives after their release. In addition, they can provide guidance to the offenders when needed.

2.7 Rehabilitation programmes offered by the Department of Correctional Services in South Africa

Several programs are offered by the Department of Correctional Services that are aimed at the rehabilitation of offenders. These programmes comprise social work services, psychological services, health services, skills development programmes, and spiritual care.

“Within the departmental environment, rehabilitation is best facilitated through a holistic sentence planning process that engages offenders at all levels – social, moral, spiritual, physical, work, education/intellectual and mental. It is premised on the approach that every human being is capable of change and transformation if offered the opportunity and resources” (Department of Correctional Services, 2005b:72).

According to Bhengu (2005:1), in 2004 South Africa had 184 871 offenders, 47 778 of whom were awaiting trial. The Department of Correctional Services' annual report (2015/2016) stated that 18 126 inmates participated in educational programmes, 19 851 were involved in training programmes, 103 380 attended social work sessions, 156 457 were assisted in spiritual care sessions, and 9 352 were involved in psychological support sessions in that year.

2.7.1 Psychological services

The Directorate of Psychological Services provides services that aim to offer professional services to offenders, probationers as well as parolees with the aim of promoting their emotional and mental wellbeing.

These services attempt to ensure that offenders are rehabilitated so that they will reintegrate successfully into the social order. “Psychologists within the Directorate ensure that offenders are diagnosed as soon as they are admitted in order to make sure that they are treated according to their needs” (Department of Correctional Services, 2005:15). Brivika (2006) states that “during the first stage, offenders are evaluated by means of interviewing, psychometric tests and observations within a group situation”. Evaluation also involves asking for feedback from correctional personnel and also through consultations with people who have a relationship with the offender. He further notes that programmes will then be planned based on the information attained. Magubane (2016:15) accentuates that:

“...individual therapy, group therapy and family therapy are the methods used by psychologists to ensure the effective treatment of offenders, which will in turn strengthen their rehabilitation. These methods are applied to various forms [categories] of offenders, ranging from ones with suicide [sic] tendencies to ones who request these services themselves”.

2.7.1.1 The effectiveness of some psychological programmes on offender behaviour

Psychological programmes that are implemented in correctional centres are based on the cognitive behavioural theory and thus included programmes to address drug and alcohol abuse, anger management and violent behaviour, sexual offending and general offending. Bruyns (2007) asserts that these programmes are essential as they are seen as addressing predisposing factors to criminal behaviour.

Petersilia (2000:115) argues “that while there are too many moderating variables (e.g., staff training and supervision, length of contact in treatment, aftercare provisions, quality control) to identify a specific programme as superior in achieving measurable treatment outcomes, there have been significant efforts to demonstrate the effectiveness of some programmes”.

Anger management

The chief aim of anger management programmes is the acknowledgement of anger issues and finding ways to express anger appropriately. Bruyns (2007:114) states that programmes such as the Skills Training for Aggression Control that is offered in Western Australia “teach relaxation techniques to deal with high levels of arousal and focus in detail on the build-up to anger”. This is achieved by looking at the cognitions and by evaluating what increases aggression.

MacKenzie (2000) adds that participants who attend such programmes are given a diary that they call an 'anger diary'. This diary is to help offenders write down the patterns and triggers of their anger so that later on they are asked to find alternative ways they could have used to manage the situation. This is when offenders are taught self-control strategies and cognitive self-control methods to use next time they are in a similar position.

In 2002 the Department devised the Prison Stress Management and Rehabilitation Training (Prison SMART) program which has been applied in correctional centres since that year. The vision of the program is to teach stress management to inmates and also offenders who are on parole (Bright, 2017). This programme has successfully rehabilitated more than 8 881 inmates and has been implemented in other African countries such as Zimbabwe, Tanzania and Kenya.

- ***Drug and alcohol use/abuse***

Bruyns (2007:114) identifies a clear link between substance use and crime, and further annotates that effective treatments for drug and alcohol use will have an impact on subsequent offending. Gerstein and Harwood (2011) concur that treatment has the ability to reduce substance use and criminal activity, particularly when in-prison treatment is augmented with treatment in the community. Gaes, Flanagan, Motiuk and Stewart (1999) argue that experts agree that the longer the treatment intervention lasts (at least 90 days), the more successful it will be in reducing deterioration or recidivism.

According to Petersilia (2000:30), "most sources agree that re-entry programmes that closely monitor offenders upon release and that provide ongoing treatment programmes to ex-offenders in the community show the highest success rates". Bruyns (2007:115) also suggests that correctional centre-based therapeutic treatment of drug offenders that collaborates with therapeutic treatment in the community is effective in reducing criminal activities. These programmes are concentrated and behaviour-based and aim at curbing offenders' drug use, a behaviour that is visibly connected with criminal activities (Bruyns, 2007:114).

However, MacKenzie (2000:465) argues that "it is not possible to determine whether the combination of in-prison and community follow-up is effective because offenders spend a longer period of time in treatment or because the combination of in-prison and follow-up is a particularly effective one". Bruyns (2007:115) strongly believes that drug treatment combined with urine testing may be a promising possibility for decreasing reoffending.

In a research study conducted by Taxman and Spinner (1996) in Australia, they found a reduction in reoffending among a group of participants who had undergone a prison-based programme with follow-up treatment and urine testing. In 2003, Seiter and Kadela assessed 12 programmes connected to drug rehabilitation. The two outcome variables measured were reoffending and relapse to drug use. They found that drug treatment was statistically significant in reducing both outcomes for men but not for women (Bruyns 2007:115). The in-prison therapeutic communities evaluated by Knight and other scholars (1997, 1999, cited in Seiter & Kadela, 2003:374) showed the efficacy of intensive treatment when combined with aftercare and with benefits for offenders with serious crime- and drug-related problems.

- ***Sexual offending***

According to Bruyns (2007), sexual offenders are more likely than other offenders to reoffend. This scholar argues that “in Australia, sex offender treatment programmes are currently offered by most of the states and territories, both in correctional centres and community settings, and place emphasis on victim empathy and the justifications and rationalization for offending behaviour” (Bruyns, 2007:115). The initial stages of such treatment programmes are dedicated to ascertaining cognitions and appraisals and offering challenges to beliefs that support offending.

In South Africa, the Department of Correctional Services devised a Sexual Offender Treatment Programme (SOTP). According to Beangstrom (2014:2), this programme “is aimed at dealing with both men and women who were convicted of a range of sex crimes” and that “the programmes aim to correct the offending behavior, develop needs-based interventions when dealing with sexual perpetrators, and seek to deal with offenders during their incarceration and after they have been released. Bright (2010) argues that a survey by the Press Association in 2017 revealed that 10% of sexual offenders who completed the SOTP committed a minimum of one sexual offence. However, Corbis (2017:1) states that the SOTP “is generally associated with little or no change in sexual and non-sexual reoffending”.

2.7.2 Social work services

Social work services are offered by the Directorate of Social Work and it offers professional services to offenders by professional and qualified social workers.

These services comprise “therapeutic, informative, supportive, crisis intervention, development, administrative, assessment and evaluation services to empower offenders with social functioning skills and to help them solve their own problems (Department of Correctional Services, n.d.). Offenders are also helped to reintegrate successfully into society.

“Casework, group work and community work are the methods used to implement social work services” Muthaphuli, (2008:163). The comprehensive purposes of the social work services are, according to the Department of Correctional Services (2015), to:

- strengthen offenders’ support system;
- link offenders with systems that provide them with resources, services and opportunities;
- address situations that influence behavioural change;
- enhance offenders’ capacity to deal with the demands in their social environment;
- ensure goal-oriented services to special categories of offenders in terms of their accommodation, custodial programmes, development and treatment programmes with a view to the empowerment and enhancement of their total functioning within the family and community;
- ensure care and stimulation programmes for young children incarcerated with their mothers in an environment conducive to their normal development;
- co-ordinate the development of distinctive and comprehensive policies for these categories regarding accommodation, custodial development and treatment in consultation with relevant directorates and other parties; and to
- develop and design needs-based care programmes for targeted offenders and probationers.

It is the duty of psychological services in correctional centres to ensure that offenders are placed in programmes that are suitable for them. Kheswa (2014:642) states that “offenders are provided with programmes that help them deal with substance abuse, marriage and family, life skills and sexual offending, amongst other things”. However, Davis, Bahr and Ward (2012) argue that if the programmes offered by social workers in correctional centres were effective, recidivism would not be as high as it is. They further add that once offenders have been released, they face innumerable challenges such as stigmatisation and a lack of employment, and that these factors are often drivers of reoffending.

2.7.3 Health care services

Health care services are offered to inmates by the Directorate of Health Care Services and are designed to promote the health of incarcerated offenders. “In this process, those offenders with health problems are identified so that their needs can be assessed [so that they are] given the necessary treatment” (Kheswa: 2014:645). Treatment is freely available to all offenders. The Directorate should, according to the Department of Correctional Services (n.d.):

- provide legislative policy guidelines regarding the provision of health care, nutrition, personal and environmental hygiene services in correctional centres (policies, standards and procedures formulation, monitoring and evaluation);
- design the minimum health care package for correctional centres guided by the principles of primary health care and the district health model;
- establish correctional clinics, in-patient facilities and kitchens;
- ensure the delivery of a comprehensive package of primary health care services;
- offer resource management and mobilization;
- liaise with relevant internal and external stakeholders regarding health care provision, nutrition and personal and environmental hygiene issues; and
- advise the Department on health care, nutrition, personal and environmental hygiene matters.

The Directorate is tasked with the responsibility of ensuring that offenders are provided with three nutritious meals per day and that their dietary requirements according to their religion and cultural practices are met. “The Health Care Services also aim to emphasise section 10 of the Correctional Services Act, which states that offenders must be provided with clothing and bedding on admission. Offenders must be issued with the necessary toiletries in order to meet their basic health needs” (Muthaphuli, 2008:165).

The Correctional Services Act 111 of 1998 prescribes that the Department of Correctional Services must provide accommodation, nutrition, hygiene, clothing and bedding as well as exercise to all inmates (sections 7, 8, 9, 10 and 11). Ramagaga (2011) approves of this provision by declaring that “it lies with prison health care services to supervise catering requirements (quantity, quality, preparation and distribution of food) and conditions of hygiene (cleanliness of clothing and bedding, access to running water, sanitary installation) as well as the heating, lighting and ventilation of cells”.

In 2014, the Department of Correctional Services claimed that isolation facilities were used in centres to prevent the spreading of infectious diseases. Moreover, Ramagaga (2011) and the Health System Trust (2012) argue that correctional centres are characterised by poor living conditions which often lead to the spreading of TB. These authors further emphasise that inmates who have infectious diseases are often not isolated and that they spend 23 hours a day locked in a cell that has poor sanitation and is unhygienic.

2.7.4 Skills development and education

Skills development and educational programmes are major parts of offender rehabilitation, as most scientific research on education and crime has shown a direct link between low educational levels and crime (Petersilia, 2001). This scholar further proclaims that the establishment of skills development and educational programmes in correctional centres reduces the risk of future offending (Ibid).

The Directorate of Skills Development offers programmes that are in line with section 29 of the Constitution, which states that every citizen has a right to education (RSA, 1996). Kheswa (2014:640) mentions that “the main objective of these programmes are [sic] to provide quality education and training for those offenders showing potential and enthusiasm, improve offender’s educational, vocational and life skills, change offenders’ attitudes regarding work, and also prepare them for integration into society”.

Johnson and Smith (2003) argue that many of the educational programmes offered in correctional centres are only in line with secondary school level and those who want a tertiary education have a hard time getting funding to study through UNISA. The authors further state that many centres are faced with the issue of not having enough educators; for example, the Durban Westville Correctional Centre has only one educator who is responsible for more than 10 000 inmates. This makes it impossible for all inmates to enroll in educational programmes of their choice (Johnson & Smith, 2003). Bruyns (2017) adds that the Westville facility doesn’t offer efficient skills development programmes due to a lack of resources in the centre.

2.9 Conclusion

This chapter presented a brief historical overview of the South African correctional system since the early 1900s. It was mentioned that, through the years, there have been many changes and developments in correctional services and that these places of detainment went from being prisons that kept offenders for slavery and imposing harsh punishments on them to centres that

now offer rehabilitation programmes. It was highlighted that the promulgation of the Correctional Services Act No. 111 of 1998 that addresses the rehabilitation of offenders was a breakthrough for correctional services in South Africa. However, due to overcrowding the facilitation of rehabilitation programmes has been adversely affected not only in terms of the rehabilitation of offenders, but also in terms of health issues and the safety of inmates.

CHAPTER THREE

THEORETICAL FRAMEWORK

3.1 Introduction

This chapter presents the theoretical framework that underpinned this study. The findings of this study are important because the study was grounded on sound methodological and analysis processes, as proposed by Grant and Osanloo (2014:12). The theory that framed this study was the deprivation theory that was first voiced by Clemmer (1940). Sykes (1958) and Goffman (1961) built on this theory. The researcher chose this theory to illuminate the insights that were gained on prison overcrowding and the effects that this phenomenon has on the rehabilitation potential of incarcerated offenders.

3.2 The Deprivation Model

The deprivation model argues that life in correctional centres is degrading and stigmatising and that inmates act out aggressively to oppressive conditions (Peacock, 2013). According to Huey (2008:13), the deprivation model “is based on the work of Clemmer (1940), Sykes (1958) and Goffman (1961) and holds that mal-adaptation to prison (e.g., violence, aggression, anxiety, depression, distress and suicide) is a product of the restrictive prison milieu”. Berrie (2011) concurs with this view, and argues that these reactions occur as a result of the deprivations that the inmates experience on a daily basis. The model further argues that the pain of being detained in prison is the most predominant impact of a person’s reaction to being imprisoned.

Goffman (1961:13, cited in Huey, 2008:15) defines a correctional centre as “a total institution [that is] a place of residence and work where a large number of like-situated individuals, cut off from the wider society for an appreciable period of time, together lead an enclosed, formally administered round of life”.

The depriving conditions in correctional centres created by overcrowding produce aggressive, self-destructive behaviour among inmates and Sykes (1958) coined these conditions as “the pains of imprisonment”. For Sykes, prison represents “a social system in which an attempt is made to create or maintain total or almost total social control” (Sykes, 1958 in Huey, 2008). Sykes further identifies five deprivations associated with prison life: deprivation of liberty, deprivation of goods and services, deprivation of heterosexual relationships, the deprivation of autonomy, and the deprivation of security (Huey, 2008).

3.2.1 Deprivation of liberty

Being incarcerated means being kept in a confined space where freedom of movement is further restricted by a rigid system of passes. Inmates are placed in an institution where they are cut off from family and friends. As time goes by, the inmates become lonely and bored because of a lack of connection with the outside world. The military structure restricts movement and inmates are guided when to do what and are restricted in their cells until given consent to do something else (Huey, 2008). In other words, inmates are deprived of their liberty in two ways: by being confined in the institution (i.e., the loss of freedom) and by the many forms of degrading rules that come with being incarcerated, such as wearing a distinctive uniform and by being referred to as a number instead of by a name. For example, at the Westville facility most inmates are locked up in their overcrowded cells for 23 hours a day and they only get out during breakfast and lunch resulting to their time to attend rehabilitation programmes limited. However, Sykes argues that the fact that individual movements are restricted...

“...is far less serious that the fact that imprisonment means that the inmates are cut off from family, relatives and friends. It’s not difficult to see this isolation as painfully depriving or frustrating in terms of lost emotional relationships and loneliness and boredom. But what makes this pain of imprisonment bite most deeply is the fact that confinement ... represents a deliberate, moral rejection of the criminal by the free community” (Sykes, 1958:65).

3.2.2 Deprivation of goods and services

Deprivation of goods and services refers to the fact that basic necessities and facilities are withheld from inmates. These necessities that are often viewed by outsiders and inmates as ‘rightful’ (Huey, 2008) include food, clothes, shelter, proper health care, medical care and exercise. However, some inmates who have previously been poor, homeless or unemployed are better off incarcerated as here they receive basic commodities such as food and shelter which are luxuries for them. However, the majority of inmates find themselves in what Sykes calls “a Spartan environment” which is “painfully depriving” (Meredith, 2008:12). For example, according to Maganye (2016) the conditions in our correctional centres are very crowded, leaving a number of inmates sleeping on the floor without any mattresses or blankets.

Moreover, inmates who had a high standard of living prior to imprisonment experience the stress of being deprived of goods and services as they are now forced to live in conditions that resemble poverty. This engenders a sense of failure, which can in turn lead to aggressive behaviour. Regardless of the standard of life offenders lived prior to imprisonment, lack of basic necessities and facilities hinders the successful implementation of rehabilitation (Manganye (20016).

3.2.3 Deprivation of heterosexual relationships

According to Rochelou (2013) the loss of heterosexual relationships is an overwhelming loss for inmates and because of a lack of such relations, “latent homosexual tendencies are created”. He further explains that involuntarily abstaining from sex could create emotional, psychological and physical problems and is also a cause of male-on-male sexual assaults in prisons (Rochelou, 2013). A lack of heterosexual relationships also causes frustration in male inmates in particular because when these relationships are denied, a man’s masculinity is called into question, which causes stress. According to Huey (2008:15), the lack of heterosexual relationships is “psychologically and physically frustrating for inmates [as] overt homosexual threats as well as latent homosexual fears are realities in the life of inmates”. Sykes also notes that when heterosexual relationships are denied, a man’s masculinity is called into question.

3.2.4 Deprivation of autonomy

Imprisonment means that the life of an inmate is controlled and governed by the rules imposed on the inmates by the guards. Inmates thus lose their ability to make basic decisions about their daily life such as when and what to eat, what to wear, and when and where to sleep. This situation calls inmates’ status as adults into question (Rochelou, 2013). Moreover, the loss of autonomy causes a sense of frustration and aggressiveness among inmates as they experience a number of public humiliations; from being stripped naked in front of other inmates on the first day of imprisonment to being told when to eat and at what time to sleep.

3.2.5 Deprivation of security

Crime and violence are often rife in prisons and they can be unsafe for inmates. Deprivation of security may include the loss of personal security, physical aggression or sexual assault. According to Shammass (2017), rape in prisons is a huge problem and a significant proportion of inmates become victims of sexual abuse.

Correctional centres have the most dangerous people in the world and rapists and murderers can threaten the security and sense of safety of an inmate who is accommodated in the same cell with them. Prisons were designed to limit offenders' freedom and thus living areas and sleeping quarters are restricted. However, due to overcrowding the situation goes from limited freedom to no freedom and privacy at all, as many inmates are housed in their cells for 23 to 24 hours a day, with a limited exercise period of 1 hour.

Inmates are thus deprived of a sense of security and privacy as they are forced to live in overcrowded conditions in cells that do not have enough beds and blankets. A sense of failure and frustration is often the result, and this leads to aggressive behaviour. Inmates fear exploitation as their few personal possessions become 'common property'; this constant sense of fear threatens inmate's causes a sense of helplessness which often manifests in aggressive behaviour as inmates need to protect their belongings. Violence, fear, a sense of helplessness, aggression and anger thus colour the tapestry of life within a prison.

3.4.3 Critique of the Deprivation Theory

According to Thomas and Foster (2000:226-227), the advocates of the deprivation theory (Schrag, 1994; Irwin & Cressey, 1944; Wellford, 1967) also criticise the restrictive scope of this model as they argue that "the heavy emphasis on the immediate pressures of confinement in the deprivation model implies a closed-system paradigm and thus fails to take into consideration the fact that the type of response made by the inmates may be influenced by both their past experiences and their anticipations of the future".

The deprivation model also ignores the biological approach and does not take into account factors such as the fact that some individuals have higher levels of testosterone than others and they are thus biologically more prone to violent behaviour. This model thus focuses on the "influence of the external environment and ignores the internal factors that might also be important to consider" (Deas, Robson & Wong, 2003:41).

However, regardless of its limitations, this theory was relevant to this study as it offered an in-depth understanding of the influence of the conditions and physical features of correctional centres on the way certain inmates behave and how their lives are affected by being incarcerated.

CHAPTER FOUR

METHODOLOGICAL ORIENTATION

4.1 Introduction

The purpose of this chapter is to outline the research design and research methods that were used in this study. The discussion in this chapter is based on how the data were collected, the sampling method that was applied and the techniques used for data analysis. A purposive sampling method was used to select the participants and the main data collection technique was one-on-one in-depth interviews with selected inmates and members of staff of a correctional centre in the Durban area in KwaZulu-Natal, South Africa.

4.2 Research Approach

A qualitative research approach was employed because this study aimed to understand the experiences, perceptions, opinions and attitudes of the inmates and staff of the correctional centre under study. The focus of the study was to explore the effects overcrowding had on the inmates and their consequent potential for rehabilitation. According to Patton and Cochran (2002), the best way to understand the experiences and perceptions of the effects that overcrowding has on inmates is to involve them as participants in the study. “This assumes that this type of methodology is chosen with the purpose of explaining what the social reality of the study is, critically analysing it, and subsequently coming up with recommendations on how it can effectively be dealt with” (Makhaye, 2016:38). This research method was suitable for this study because it facilitated a deeper analysis than a numerical investigation (i.e., a quantitative study) would have done, as the researcher was able to insightfully record the attitudes, feelings and behaviours of the study participants (Wyse, 2011). It also enabled the researcher to determine why inmates acted in a certain way and to understand their feelings about these actions.

4.3 Research Design

In the quest to answer the research questions, the researcher used an interpretive research paradigm by employing a qualitative method to understand and interpret human behaviour (Wyse, 2011). The study thus sought to obtain a better understanding of how certain individuals in the correctional centre context perceived the study phenomenon, which was overcrowding in an incarcerated context (Patton & Cochran, 2002).

Interpretive research can be conducted within three possible paradigms: observation, a case study, or a survey. Cohen, Manion and Morrison (2011) argue that in a case study a researcher “aims to capture the uniqueness of real individuals and situations through accessible accounts”. According to Rule and John (2011:182), a case study is “a systematic and in-depth study of one case in its context”. According to Bertram and Christiansen (2014:84), a case study endeavours to explain what it is like to be in a specific situation [at a specific time] and in this case the perceptions of inmates in a notoriously overcrowded correctional facility in the Durban area were elicited to illuminate the phenomenon under study.

Cohen et al. (2011) differentiate among exploratory, expository, ethnographic, and multiple case studies, but this study utilised an exploratory case study design. Streb (2011:53) defines an exploratory case study as “research that is conducted for a problem that has not been clearly defined”. The current study thus adopted an exploratory case study approach because the literature review had revealed some gaps in the exploration of the effects of overcrowding on inmates based on their personal perceptions and experiences. This study was located within a qualitative case study design that was supported by the interpretive paradigm. Cresswell (2009:23) argues that a qualitative approach “is grounded in a naturalistic setting and researchers are regarded as key instruments because they generate data through data generation tools”.

This approach was highly suitable for this study as it would enable the researcher to interact with the participants in their natural setting, which was a correctional centre that is notorious for its overcrowded conditions. This centre also accommodated five categories of medium security inmates at the time of the study. By employing this approach, the researcher was also assisted in illuminating the perceptions, feelings and behaviours of inmates in an overcrowded correctional facility and it allowed her to better understand the challenges and successes they experienced in their endeavours to adapt to a life of incarceration in an environment that could reportedly be both threatening and violent at times.

4.4 Study Location

The study was conducted at a large correctional centre in the Durban area in KwaZulu-Natal. This centre is one of 39 correctional centres in this province, but the selected centre is one of the biggest in South Africa and the only one situated in Durban (Singh, 2014). Prior to the opening of this centre in 1985, two smaller prisons, the Durban Central Prison and Point Prison, were still in use.

Point Prison accommodated maximum security inmates while the Durban Central Prison housed inmates who had been arrested and awaited trial (Singh, 2014). These prisons were situated close to the old harbour in Durban, and during their existence overcrowding was already a huge issue. Earlier there was another prison on the North Coast of Durban. It was the Verulam Prison “where the late honourable Mahatma Gandhi was detained” (Singh, 2014:263). Due to overcrowding in these prisons, offenders had to be sent to other centres. Currently the correctional centre under study receives large numbers of inmates and gang-related issues have reportedly become a serious problem in this facility

The correctional centre under study accommodates Medium A, B, C, D and E inmates (Singh, 2014).

Medium A: Offenders are still awaiting trial and have not been sentenced.

Medium B: Inmates have been sentenced and should be accommodated under maximum security conditions.

Medium C: Inmates who are about to be released.

Medium D: Juvenile offenders below the age of 18 years who, according to the Child Justice Act No. 75 of 2008 (CJA), were in conflict with the law.

Medium E: Female offenders are accommodated under this category.

The study focused on Medium B category inmates because they were exposed to rehabilitation programmes and were reportedly accommodated in the most overcrowded section of the facility. In each of these Medium categories there are ten sections that are divided into two wings and each wing comprises six cells. The first wing houses cells 1-6 and the second wing houses cells 6-12. Each cell is designed to accommodate a minimum of 19 to a maximum of 29 inmates. If all the cells in a section are full, it should accommodate no more than 350 inmates.

However, cells that should accommodate 19-29 inmates can house up to 50 and more inmates and it is common that more than 600 inmates are accommodated in one section, which is double the number of inmates it was designed to accommodate (Singh, 2014). The correctional centre under study was designed to accommodate 6 023 inmates in total, but in 2014 it housed more than 12 500 inmates in all five sections (Singh, 2014).

By the end of 2016 the South Africa's correctional centres had 161 984 incarcerated people but only 119 134 bed spaces available (Makou, Skosana and Hopkins; 2017). According to the DCS 2015/2016 financial year reports, correctional centres in Johannesburg was 233% full leaving 1 736 of inmates shorts of beds.

Despite the fact that the court ordered the Department of Correctional Centre to reduce overcrowding, in the financial year end 2015/2016 Pollsmoor Correctional Centre was found to have the biggest shortage of bed in the country (Makou, Skosana and Hopkins; 2017). The centre "is one of the largest centres in South Africa and has experienced changes in direction [in terms of] the detention and treatment of inmates within the system and the challenges facing the Department of Correctional Services over the past few decades, especially those of overcrowding and related problems as in most South African correctional centres" (Makou, Skosana and Hopkins; 2017).

4.5 Sampling

4.5.1 Sampling method

Sampling is essential in a research study of this nature as it is vital to procure appropriate research participants from whom data can be elicited to address the research questions. This study employed a non-probability sampling method because the subjects selected and their perceptions were explored based on the judgment of the researcher. This sampling technique looks for participants whose views and contributions will serve the purpose of the study. The data elicited from these participants should thus address the research questions and reveal in-depth knowledge concerning the research topic.

In order to address the research aim which was to explore the effects of overcrowding on inmates in a correctional centre, participants who were selected were currently incarcerated Medium B inmates living in overcrowded conditions and who were attending a rehabilitation programme.

4.5.2 Purposive sampling inclusion criteria

A purposive, non-probability sampling technique was employed. This type of sampling involves the selection of participants with a specific purpose in mind (Palys, 2008). By utilising the purposive sampling method, participants who attended rehabilitation programmes were deemed suitable for the study while those who did not were excluded.

The selected participants were also chosen based on particular characteristics of the inmate population that were of interest. Thus the participants who were selected were male Medium B inmates who were attending rehabilitation programmes at the time of the study, as well as correctional services officers and officials who were working in the Medium B facility and who would best enable the researcher to explore the impact of overcrowding on this category of inmates.

4.5.3 Sample size

The research employed fifteen participants:

- ten (10) Medium B Section B4 inmates who were attending rehabilitation classes and were incarcerated at the correctional centre under study.
- Five (5) correctional service staff members: 1 psychologist, 1 social worker, 1 correctional intervention officer, 1 educator or teacher, and 1 correctional officer.

The inmate participants were recommended by the social worker and they all attended rehabilitation programmes ranging among the following: one session with the psychologist, assistance with substance abuse, attendance of the Cross Roads and New Beginnings initiatives, involvement in restorative justice and anger management programmes, enrolment in educational programmes (ABET/tertiary education), engagement in religious programmes, and HIV/AIDS programmes.

The reason for selecting the particular cohort of prison staff for the study was because the researcher desired to obtain objective, in-depth perspectives of professionals to determine their understanding and perceptions of overcrowding in the correctional centre under study in the quest to determine how this phenomenon affected the inmates.

4.6 Recruitment Strategy and Ethical Considerations

The first stage of conducting a study in a social/educational context is to gain authorised access to the research site. The researcher therefore first applied for ethical clearance from the University of KwaZulu-Natal Ethics Committee. A gatekeeper's letter was also requested and eventually procured from the Department of Correctional Services (DCS) to conduct the study in the study facility. Provisional ethical clearance was submitted to the Department of Correctional Services as confirmation that the University had approved the study (Appendix C). Gatekeepers' authorisation was important for full ethical clearance.

According to Neuman (2004:441) “gatekeepers are those formal and informal authorities who control access to a site” (cited in Ngubane, 2016). After receiving full ethical clearance had been granted by the University of KwaZulu-Natal, the researcher then contacted Mr B. L. Nkomo, Manager Security and Facilities (who was the internal guide assigned to assist her) and requested a meeting with the inmates who would be available and willing to participate in the study. With Mr Nkomo’s guidance, the researcher had the opportunity to speak to inmates from Medium B Section B4 and to explain the aim of the study, the objectives, what it entailed and how many participants were needed. The inmates were also assured that the study would abide by all ethical principles and that their confidentiality would be maintained at all times. The inmates and officials who had been approached were eager to participate in the study and volunteered to do so.

Before commencing the interviews, the researcher made sure that each participant understood the informed consent letter before signing it and she explained to them that the interviews were going to be recorded with their consent. The participants were given a chance to ask any questions for clarity before the interviews began. The semi-structured interviews were conducted at the selected facility during March 2018. Each interview lasted about 45 minutes, and three interviewees were interviewed in a day.

4.7 Data Collection Instrument and Method

4.7.1 Research instrument

“Research instruments are measuring tools designed to obtain data on a topic of interest from research subjects (for example, questionnaires or scales)” (Silverman, 2000:61). It is therefore essential that an appropriate research instrument is used for a particular study as its use determines the reliability and validity of the study. The following instruments were used in this study to collect the required data:

- Primary data collection:
 - semi structured interviews with selected incarcerated inmates and professional staff members
 - observation
- Secondary data collection:
 - books, articles, journals
 - public sources (government statistics reports)

- commercial sources (newspaper articles)

Both primary and secondary data collection methods were used as this increased the validity of the study. This process was also deemed appropriate as the strong point of each technique could complement others by neutralising some of the disadvantages of certain methods. Thus various scholarly articles based on a similar study approach and samples and journalistic reports were triangulated and correlated with the interview data to ensure reliability and validity. It must be noted at this point that the findings based on the data could not be generalised to the entire inmate population of the facility under study or to correctional centres across South Africa due to the nature of the case study design and the relatively small scope of the study.

However, triangulation was employed to validate the data. Triangulation is “defined as the mixing of data or methods so that diverse viewpoints or stand points cast light upon a topic” (Olsen, 2004:8). “This is a way of assuring the validity of research through the use of a variety of methods to collect data on the same topic, which involves different types of samples as well as methods of data collection. However, the purpose of triangulation is not necessarily to cross-validate data but rather to capture different dimensions of the same phenomenon” (Ibid).

The study employed one-on-one semi-structured interviews to procure the required data from the study participants. Interviews are “planned, prearranged interactions between two or more people where one is responsible for asking questions pertaining to a particular theme or topic of formal interest and the other(s) is/are responsible for responding to the questions” (Lankshear & Knobel, 2004:194 cited in Mkhize, 2012).

According to Capeskin (1996), when using interviews as a data collection tool interviewers get the chance to:

- generate contact about an event from an inside perspective;
- find out more about the interviewee’s thoughts, feelings and experiences and the opinion he/she holds about a topic;
- achieve a high response rate;
- obtain both verbal and non-verbal responses;
- ask follow-up questions on matters that can arise during the interview for clarity or for more details on specific issues.

4.7.1.1 Semi-structured interviews

“Conducting a semi-structured interview is a method of enquiry that combines a predetermined set of open-ended questions (i.e., questions that prompt discussion) with the opportunity for the interviewer to explore particular themes” (Boyce & Neale 2006:6). This method of data collection was useful as it provided the elicitation of detailed information about the inmates’ views, feelings, experiences and perceptions about the issue of overcrowding in the facility under study. This study used this form of interviewing as the primary data collection tool as the study required in-depth understanding of the participants’ experiences and views. Moreover, the semi-structured interviews accorded the participants an opportunity to express themselves in their own words and to share their experiences openly and frankly without fear of intimidation or coercion. It also provided them with a platform to narrate their experiences in an environment where they felt comfortable and safe. Considering the context in which the interviews were conducted, this was the preferred method of data collection as in group discussions some people might not have spoken freely about their feelings and experiences because they might have feared being judged or intimidated by the other inmates.

However, this method had certain limitations. According to Denscombe (2007), semi-structured interviews require a high level of trust between the participant and the interviewer as they are expected to disclose thoughts, feelings and experiences that are very private. It was noted that the *interviewer effect* could play a role in this method. Denscombe (2007:198) defines the interviewer effect as “how people’s responses tend to differ depending on how they perceive the interviewer”.

This scholar further propagates that factors such as “sex [gender], age and ethnic origins of the interviewer have a bearing on the amount of information people are willing to divulge and their honesty about what they reveal”. A qualitative research design assists researchers in accessing the thoughts and feelings of participants, and this in turn elicits in-depth understanding of the meaning that people assign to their experiences. According to Sibisi (2016), interview narratives and notes of observations of the participants’ behaviour should therefore be meticulously recorded and transcribed. The transcriptions should also be carefully reviewed to ensure that all the data have been captured correctly and in an unbiased manner. These requirements were meticulously adhered to by the researcher.

4.7.1.2 Secondary data

The term secondary data is defined as “data that were collected by someone else for another primary purpose” (Bernard & Ryan, 2010). The use of secondary data is time saving and cost efficient. It also gives the researcher access to a data generating population that may otherwise be impossible to census. “Secondary data research thus involves re-analysing, interpreting, or reviewing past data” (Ibid.).

The researcher’s role in secondary data collection is to find a correlation between earlier data and his/her current research. This study made use of other scholars’ work to support the data and findings that were obtained during the current study. Cognisance was taken of the limitations of this process; for example, the data procured by other researchers might not be fully appropriate for the purpose of the current study due to differences in the sample such as age group, ethnicity, background and educational level of the participants.

4.7.1.3 Observation

During the time the researcher was collecting the data, a search was conducted in the centre by members of the Emergency Support Team (EST) and the SAPS. I was informed that such cell searches occurred randomly. It was observed that the manner in which the contents of the cells were tossed as the search teams were looking for anything that was not allowed in the centre was ruthless and without mercy. Before the search commenced, the inmates were escorted section by section from their cells to the main dining room where they were secured.

What was most shocking was the quantities of contraband that were found in the cells and the places where these items had been hidden: inside deodorant containers, Bibles, plastic sandals, toothpaste containers – the creativity of the inmates seemed limitless.

At the end of the search about 8 kg of dagga, 13 cellular phones, R1 230 in cash, and 34 sharp objects that could be used to penetrate the skin had been found.

4.7.2 Data collection

4.7.2.1 Recording and storage

Each interview was recorded with the prior consent of the participants (Appendix A). The interviews were conducted in both English and IsiZulu depending on which language the participant was more comfortable with.

For this purpose the interview schedule was presented in both English and in IsiZulu (Appendix B). After permission had been granted to conduct the study by all the relevant gatekeepers (Appendix C) and the UKZN (Appendix D), the researcher contacted the internal guide assigned to help her and started scheduling the interviews. Participation in the study was voluntary and each participant signed an informed consent form (Appendix A).

4.7.2.2 Informed consent

It is viewed as exploitative to gather data without the knowledge of participants and their willingness to participate in a study (Kumar, 2011). This means that requesting participants' informed consent is probably the most well-known strategy in research. According to Simons and Usher (2000), informed consent helps participants not to experience any form of coercion or deception and provides them with an understanding of "the process by which the data is [sic] to be collected, the intended outcome of the research process, the use of the research, and as individual or groups, having the capacity and competence to consent" (cited in Mkhize, 2012).

The consent procedure was followed in this research as all the participants were competent enough to give their consent. Before commencing the interview, the purpose of the study was explained to the participants and they were informed of the data collection procedure and the instrument that would be used. They were also aware that the interviews would be recorded, that the recordings would be stored securely at the University, and that only the researcher and supervisor would have access to them.

The participants were also told that they could withdraw from participating in the study if they became uncomfortable during any point of the interview. They were also requested to express any concern or raise any questions that they might have during the interviews. The researcher guaranteed the participants that they would remain anonymous during the data collection process and in the reporting of the research data and findings, as the information they would provide would be utilised for research purposes only. They were thus guaranteed that pseudonyms would be used to protect their respective identities.

4.7.3 Structure of the interviews

4.7.3.1 Pre-interview phase

Before the interviews commenced, the researcher introduced herself to each of the participants and voiced her appreciation for their agreement to be part of the study. The researcher further

clarified ethical issues such as the right to withdraw if the participant did not feel comfortable, the use of pseudonyms, and the confidential nature of their participation to make sure that each participant fully understood their rights.

The participants were also given clarity about the storage of the data in a secure filing cabinet for five years before the recordings would be destroyed as required by the policy of data storage at UKZN. This phase took no longer than 5 minutes for each participant. Once the participant had fully understood the research process and the nature of their informed consent, and after all the questions had been answered, the participant then signed the consent form.

4.7.3.2 Interview phase

When the interview commenced, each participant was asked which language he preferred. Viable and accurate data were obtained by means of an audio-recorder. The narratives were transcribed into English and emerging codes were categorised into different themes as they emerged from the data. Field notes that were jotted down in a journal during the interviews recorded non-verbal cues that couldn't be captured by audio-recording, such as impressions, behaviour and the environmental context (Silverman, 2000). These field notes were found useful in the interpretation of the data as they reminded the researcher of cues and signals that could be picked up during the interviews. The researcher was very attentive during the interviews and used different conversational styles such as listening, prompting and briefly commenting to encourage the participants to continue talking. Paraphrasing the responses of the participants was employed to show them that the researcher was paying attention. The researcher also made use of eye contact, reading body language and nodding during the interviews to prompt more information from the participants.

Observational information was essential in the primary data collection phase as the researcher could always go back to the field notes to check the data (Silverman, 2000).

4.7.3.3 Termination phase

Before each interview was concluded, the participants were given a chance to ask any questions or to add any information that they thought was relevant to the study.

The participants were also assured that, at the completion of the study, a copy of the thesis would be given to Mr Nkomo and made available to them. The researcher then thanked the participants for their participation.

4.7.3.4 Storage of data

According to the Protection of Personal Information Act of South Africa (2013), the data that were collected will be secured in the University's library in a cabinet and in a computer file that is protected by password for a minimum period of five years before disposal.

4.8 Ethical Considerations

4.8.1 What do ethical considerations entail?

Due to the requirement to adhere to ethical standards when conducting research, numerous expert affiliations and organisations have adopted codes and strategies that outline moral conduct and that guide analysts (Dich, McKee & Porter, 2013). These codes address issues such as genuineness, objectivity, confidentiality, non-segregation, and numerous others. Simons and Usher (2000) explain that "ethical issues can be viewed as imminent in any act of the knowledge production" and they proclaim that "ethical issues are related to issues of rightness and justifiability, especially as they concern relations with others or consequences for others" (cited in Mkhize, 2012). These codes are necessary as they give essential guidelines to the researcher.

However, during a study the researcher will be faced with additional issues that may not have been envisioned and this will require basic leadership with respect to the specialist, keeping in mind the end goal to maintain a strategic distance from unfortunate behaviour (Dich, McKee & Porter, 2013). In the current study, the researcher was fully aware of the sensitivity of the topic and the vulnerability of the participants, which is why ethical requirements were rigorously adhered to. As was alluded to earlier, informed consent forms (Appendix A) were issued to and signed by the participants before the commencement of the interviews. Moreover, during the interviews a psychologist who had been authorised by the Department of Correctional Services was present to assist if any participant experienced trauma.

As indicated by Bryman and Bell (2007), the following ten points refer to the most essential principles associated with ethical considerations in a study:

1. Research participants should not be subjected to harm in any way whatsoever.
2. Respect for the dignity of research participants should be prioritised.
3. Full consent should be obtained from the participants prior to the study.

4. The protection of the privacy of research participants has to be ensured.
5. Adequate level of confidentiality of the research data should be ensured.
6. Anonymity of individuals and organisations participating in the research has to be ensured.
7. Any deception or exaggeration about the aims and objectives of the research must be avoided.
8. Affiliations in any form with sources of funding, as well as any possible conflicts of interests, have to be declared.
9. Any type of communication in relation to the research should be done with honesty and transparency.
10. Any type of misleading information, as well as the representation of primary data findings in a biased way, must be avoided.

The paragraphs below outline how this study abided by these ethical considerations.

4.8.2 Methods to ensure trustworthiness

Trustworthiness in qualitative research is what quantitative researchers refer to as validity and reliability. Because instruments used in qualitative research cannot measure the metrics of validity and reliability, trustworthiness is used to ensure that the research measures what it is supposed to measure (Anney, Hume & Coll, 2012) and to ensure that the findings of the study are “credible, transferable, confirmable and dependable” (Manganye, 2012:67). The four key criteria of trustworthiness are explained below:

- **Credibility:** The goal is to demonstrate that the research study was conducted in a manner that ensured that the participants were accurately identified and described (Anney et al., 2012) and confirms how confident the researcher can be about the accuracy of the findings. For Manganye (2016), the main question is: *“How do you know that your findings are true and accurate?”*
- **Transferability:** When the findings of a study are generalised, a qualitative researcher must explain reasons for this (Anney et al., 2012). However, if the findings cannot be generalised for various reasons, the researcher should also explain why the findings are

applicable to another context. A qualitative researcher can therefore use different sources and provide thick descriptions to enhance the study’s validity and transferability to related contexts, circumstances and situations. Therefore, by triangulating the primary and secondary data, the findings of the current study could be compared with those of other studies that had been conducted in correctional centres. However, the small sample size and the fact that only one prison in South Africa was used suggest that future studies should explore the phenomenon of overcrowding on a more extensive scale in order to generalize any findings pertaining to this phenomenon.

- **Confirmability:** This term refers to the degree of neutrality of a research study’s findings. Butch (2005:85) argues that to obtain confirmability, “the researcher tries to capture some elements of objectivity in the research study”. The qualitative criterion can then be addressed “by asking whether the data can assist in confirming the general findings and lead to the implication” (p. 85). This can only be achieved if the findings are based on the responses given by the participants and are not influenced by a personal motive of the researcher.
- **Dependability:** According to Annel (2012:6), dependability refers to “the stability of findings over time which involves participants valuating the findings, the interpretations and recommendations of the study to make sure that they are all supported by the data received from the informants of the study”.

Table 4.4 below shows how trustworthiness was ensured in this study.

Table 4.4: Summary of how trustworthiness was applied in this study

| | CREDIBILITY | TRANSFERABILITY | CONFIRMABILITY | DEPENDABILITY |
|-----------|--|---|---|---|
| RESEACHER | Clear criteria for the inclusion of the participants needed for the study were outlined. | Different methods of data collection (primary and secondary data) were employed including descriptive data, field notes and observations. | The researcher was not biased and carefully used probing questions to address the research questions for no other or personal motive. | The researcher used all the raw data that had been collected, including data from case study and field notes. |

| | | | | |
|---------------------|--|--|---|--|
| PARTICIPANTS | The subjects were selected based on particular characteristics that rendered them suitable for answering the research questions. The participants were not known to the researcher and were identified by a neutral official in the correctional facility. | The participants were diverse in terms of race, education, background and crimes committed. | Ethical considerations were strictly adhered to (Appendices D & C) | Participants will be provided with copy of the research. |
| RESEARCH INSTRUMENT | A non-probability sampling technique was applied in the selection of the participants (section 4.4.1) . | In-depth one-on-one interviews were conducted to collect the primary data. An interview schedule to address the research questions was employed, but it contained open-ended questions to allow for further in-depth probing (Chapter Five) . | The research questions were semi structured (section 5.2) . | A comprehensive discussion illuminating the research design as well as its implementation was presented. |
| DATA ANALYSIS | Data were analysed using the thematic analysis technique (Chapter Five) . | The data analysis method was followed as described in section 4.1 . | An audit trail was used by providing a rationale for the themes that emerged (section 5.4) . | An inquiry audit was used to examine if the collected and analysed data and the results were consistent. |

4.9 Conclusion

This chapter was designed to explain the methodology that was used to achieve the aim of the study. Justification for using the qualitative study design was offered and the data collection process was elucidated. The instruments that were employed to collect the data in order to address the objectives of the study and to answer the research questions were described. This chapter also highlighted the nature of this study and outlined the profile of the correctional centre that was selected as the study site. The ethical considerations and the methods to ensure trustworthiness were also presented.

CHAPTER FIVE

DATA ANALYSIS AND DISCUSSION

5.1. Introduction

The previous chapter presented a comprehensive outline of the research approach and the methodology that was adopted to conduct this study. This chapter presents and analysis of the data and a discussion of the findings that emerged from the data that were collected in March 2017. The chapter is divided into two sections. Section A entails the demographic information of the participants and section B discusses the themes that emerged from the data during the analysis process. In order to make sense of the data that were collected by means of semi-structured one-on-one interviews, the researcher analysed the data using the thematic analysis method. During the interviews, the researcher noted similar data patterns by paraphrasing the common experiences that were narrated by the inmates. In this way the researcher was able to identify patterns that emerged from previous studies and to compare these findings with those of the current study. All the common patterns were then grouped together for analysis and discussion.

Once the patterns had been grouped together, the next step was to create themes that emerged during the interviews to form a comprehensive depiction of the inmates' shared experiences. The data were first transcribed into English text as the interviews had been recorded and grouped into themes by combining similar topics into categories. The themes were then coded to answer the research questions as outlined in Chapter One. The following themes emerged from the data:

- Imprisonment as an objective for rehabilitation.
- Rehabilitation programmes for inmates.
- Inmates' perceptions of correctional officials' involvement in rehabilitation programmes.
- Perceptions of overcrowding and the implementation of rehabilitation programmes.
- Overcrowding and the scarcity of resources.
- The effects of overcrowding on inmates.
- Recommendations for improving the effectiveness of rehabilitation programmes.

Pseudonyms are used to refer to the participants.

SECTION A

5.2 Biographic Information of the Participants

5.2.1 Age

Of the ten inmate participants, eight were between the ages of 20–35 (Table 5.1). The majority of the participants fell in the youth category. This finding is supported by the DCS (2005:50-51), which found that “the youth in South Africa have over the years been marginalised. This combined with the slow growth in the job market has contributed to the creation of a large pool of young people of South Africa who are at risk [of criminal behaviour]”. Research suggests that once a young person has been incarcerated, he/she will spend a significant portion of his/her life in correctional centres. Western (2002) states that one in every three youths who were once incarcerated will be arrested again in less than three years after release, resulting in an increase in recidivism and overcrowded correctional centres.

Research also shows that a certain sub-group of youths who have been arrested experience negative outcomes after being released. According to Western (2002:2), this group of youths is characterised by “diminished income in comparison with their non-incarcerated peers [and] suffer earnings losses of between 10% and 30% for up to 10 years after their release”. Given this negative outcome, it is not surprising that 43% of the recidivism population comprises youths who have no interest in rehabilitation programmes; instead, they want to earn an income like their non-incarcerated peers (Western, 2002). In the current study, only one of the participants came from a rich family while the rest were from disadvantaged backgrounds. Manganye (2016) suggests that potential offender characteristics include being a black young man from a disadvantaged community/home environment.

Table 5.1: Age distribution of participants

| Age group | Number |
|------------------|---------------|
| 20-25 | 2 |
| 26-30 | 5 |
| 31-35 | 1 |
| 36-40 | 2 |
| Total | 10 |

5.2.3 Educational level

Of the ten participants, seven had a high school education with a Grade 12 (National Senior Certificate) qualification. Of the seven participants who had a NSC, three indicated that they had completed their Grade 12 while they were incarcerated with the help of Mrs Dlamini. This suggests that, because of the opportunities provided by the DCS in correctional centres, more inmates may now complete their formal schooling whilst incarcerated. According to Mhanga and Wolela (2015), the number of inmates registering for Grade 12 in correctional centres is increasing. For example, in 2014 the pass rate for inmates in this facility increased by 10% from 58.8% to 68.9% (Ibid). Even though a number of inmates had not received formal education prior to incarceration, the educational programmes as part of rehabilitation in correctional centres that are offered have helped many inmates overlook the negative effect of overcrowding as they managed to focus on getting educated. “South Africa’s correctional centres are overcrowded, expensive and broken, but education programmes can fix many of its problems. [Thus] upgrading education would bring fiscal, social and correctional benefits” (Davis, Bozick, Steele, Saunders & Miles, 2013).

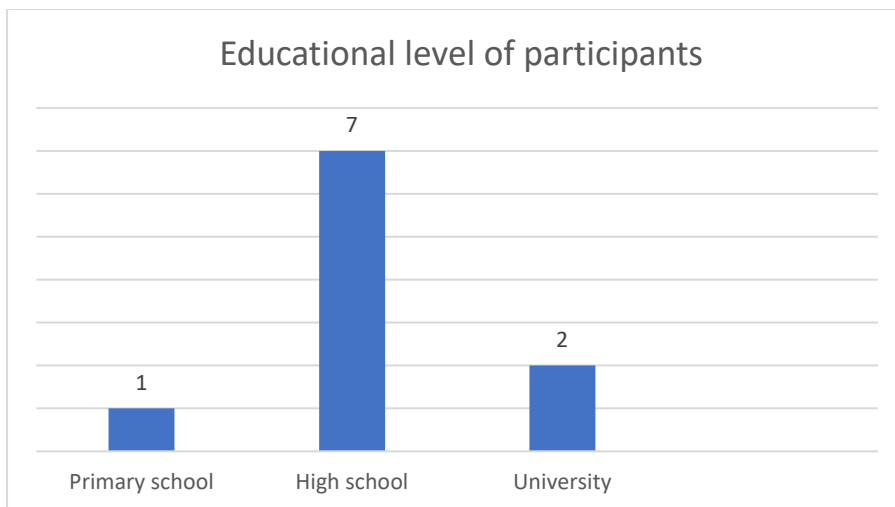


Figure 5.1: Educational level of participants

Source: Author

5.2.4 Number of years sentenced

All the participants were serving a sentence of more than ten years, which means that they committed serious or violent crimes.

The SAPS National Crime Statistics (2014) confirm that the majority of the crimes that result in sentences of more than ten years were aggressive crimes such as murder, attempted murder, sexual offences, trafficking in persons for sexual purposes, and robbery with aggravating circumstances.



Figure 5.2: Total number of years sentenced

Source: Author

The race and gender of the participants are not included in the biographical details as the study did not attempt to explore any comparative data in terms of these two categories.

5.3 Biographic Information of the Correctional Officials

Correctional officers are the most significant people in the lives of inmates as they spend most of their time with them. According to Matetola (2012:136), “they have an influence on either improving or lessening the success of the different types of rehabilitation programmes that an inmate is expected to attend”. The latter scholar further states that “correctional officers worldwide are trained in two separate methods that fluctuate between punitive and promoting rehabilitation”. Their duty is to make sure that security within the centre is maintained at all times and they are also responsible for implementing rehabilitation programmes for offenders.

The following correctional officials were included in this study:

Participant 1: A female Social Worker in her middle age who attained her Master’s Degree in Social Work. She had been working at the centre for 15 years as a social worker.

Participant 2: A middle-aged female who held a Master's Degree in Psychology from the University of KwaZulu-Natal. She was married and had been in full-time service with the DCS for 20 years.

Participant 3: Middle-aged female who had been working for the DCS for ten years. She held a degree in Geography and Environmental Studies and a Postgraduate Certificate in Education.

Participant 4: An elderly gentleman who had been working as a correctional intervention officer for 40 years. His highest qualification was Grade 12.

Participant 5: A male in his prime who held a degree in Correctional Services. He had seven years' experience in the field of correctional services.

The biographic information of the staff shows that three correctional officials were females and two officers were males. The researcher also noted that the majority of the correctional officers who worked among the inmates were males, whereas female staff members were generally working in the offices in administration. The main reason for this may be that Medium B inmates are characterised as dangerous criminals and that females might be in fear of them. The long years of experience that the correctional officials had is an indication of their commitment and dedication and their love for what they were doing.

SECTION B

5.3 Emerging Themes

5.3.1 Imprisonment as an objective for rehabilitation

All the participants reported that the centre provided rehabilitation programmes which ranged from programmes that were rendered by the social worker to programmes that were offered by a psychologist or programmes such as Cross Roads and New Beginnings. Programmes were offered in restorative justice, anger management, education (ABET/tertiary education), religion and HIV/AIDS programmes. Eight of the participants bemoaned the fact that these programmes lacked skills training and development. For instance, 36-year-old Xolani, who had been imprisoned for twelve years, stated:

“We do have rehabilitation programmes but we don't have skills [training]. All these programmes we are attending help us as individuals, but when you get released, your anger management two weeks' course won't help you get a job.”

Musa added:

“We are lacking skills that we can use to make a living after being released.

Philani, who had been transferred from another correctional centre, had this to say:

“At [mentioned the centre] we had so many skills to choose from as part of our rehabilitation. I am a holder of a three certificates. I have a certificate in plumbing, carpentry and electricity. I know when I get released I will be able to use my skills to make a living.”

These empirical findings are consistent with those of Ngubane (2011), whose study revealed that one of the main reasons for the high rate of recidivism is that most offenders, when they get released from correctional centres, can't find employment or the means to make a living, so they end up falling back on criminal activities. Providing offenders with skills not only helps them, but it also decreases prison overcrowding.

According to Jacobs (2003:4), individuals who are released from prison “remain unprepared for reintegration into society. They often have no skills and lack a family support system. Their lack of preparation for successful reintegration into society places them at risk to become [sic] repeat offenders.”

Mr Steyn, who had been working at the centre for 40 years, commented as follows:

“I have seen so many inmates who were doing good while incarcerated. [But they] come back a few months after being released and when I ask them why they committed criminal activities again, they will say that trying to get employment after being incarcerated is hard. As much as they don't want too, they have to survive and this is the only way they know how.”

Thoba, who was a re-offender, commented as follows:

“Life after I was released in 2015 was bad; I tried looking for employment with my matric but nothing. Due to financial crisis at home my younger sister was forced to drop out of 'varsity and I couldn't let that happen, so I went back to housebreaking to secure money for my sister's tuition until I got arrested again. I am not proud of what I did but I had to for her future. Now she's doing her internship and Honours in Pharmacy. I couldn't be happier.”

According to Thinane (2010:52), ex-offenders “face enormous obstacles trying to reconnect with society and getting a job”. The majority of these ex-offenders “have substance abuse problems, limited work experience, limited education and physical and mental health problems”. In order to successfully reintegrate them into society, education is necessary “as it creates more job opportunities, stability, commitment and responsibility. Providing assistance to ex-offenders in obtaining employment reduces the likelihood of recidivism.”

Sanele supported this statement by stating:

“The best way to reduce crime is to rehabilitate offenders by providing tertiary education and job training.”

Kevin, a 24-year-old ex-student from the UKZN, stated:

“Before I was arrested I was doing my 2nd year at Howard College and when I got inside I wanted to continue with my studies, but no one paid attention to my request. I decided to write a request to the University to continue with my studies whilst incarcerated, but they told me that they didn’t provide distance learning and that I should try UNISA. I applied through UNISA and got accepted but the problem was funding.”

Philani blamed poor further education and training opportunities in the correctional centre by saying:

“Some of us are over qualified for the courses that are offered here, which are ABET courses. There’s really nothing we can do to enhance our education and skills.”

Sbonga said:

“...we need to keep busy in order to avoid falling back into criminal activities. These two-week programmes are not enough.”

Miss Dube had been a social worker at the centre for fifteen years. She was responsible for allocating offenders to programmes that were appropriate for the crimes they committed. For instance, an offender that was incarcerated for physical abuse would be placed on the anger management programme. She facilitated a number of programmes, from one-on-one sessions to group sessions. These programmes would include anger management, substance abuse, and so on.

Miss Dube mentioned that there were so many factors that affected the effectiveness of the rehabilitation programmes, but that the most important one was the lack of attendance.

She added:

“You allocate an offender to classes that he should attend but some of them won’t come to these classes.”

Bonga, an inmate, commented as follows about programme attendance:

“Rehabilitation programmes are for those individuals who want to get rehabilitated because we are not forced to attend them.”

A study by Thinane (2010) also found that “the reason for recidivism is largely due to rehabilitation programmes which are not compulsory”.

Miss Dube also stated:

“My sessions are sometimes lively, sometimes silent that I would have to fill them. There are offenders that are always excited about the programmes and the activities we are doing that day, but then you will find those who are only there for the certificate just so they can qualify for parole.”

Mrs Naidoo, a psychologist who had been working in the centre for twenty years, stated:

“... [this] centre has the ability to take inmates from a point of hopelessness to a belief that an impact can be made by giving them responsibilities and showing them how their responsibilities affect others.”

5.3.2 Rehabilitation programmes for inmates

Correctional officials that are employed by the DCS to render rehabilitation services generally include social workers, psychologists, educators, correctional officers and religious leaders (Manganye, 2016). During the interviews that were conducted for this study, the researcher found that all the participants were aware of all the rehabilitation programmes offered at the correctional centre.

Philani stated:

“The social worker and the psychologist are always available to help us”.

Kevin also said:

“During the first few days of being incarcerated all inmates are supposed to attend the orientation which basically tells us about the programmes that are available in the centre and their importance.”

A study by Thinane (2010:11-15) revealed that the rehabilitation programmes that are provided in South African correctional centres for all the offenders that have been sentenced are available to them 24 hours a day. “Some of these services include psychologists, attending social worker sessions, religious care, education and training programmes and sport, recreation and art culture”. All the participants indicated that the programmes that they attended were part of their sentencing, and that it was up to the individual if he wanted to do more programmes as they found them “useful for survival purposes” inside the centre and also when they would be released.

Manganye (2016:85) stated that “missing the orientation programme can mean missing foundational aspects of rehabilitation which can include a comprehensive health assessment, orientation of how the rehabilitation programmes’ oath is to be upheld, holistic needs assessment of outcomes, [and the] classification and development of a sentence plan”. The Offender Rehabilitation Path (ORP) is a course that helps offenders from the day of admission to the last stage of preparing an offender for release, and up to the day they leave the facility.

Musa stated:

“Even though I got a heavy sentence that didn’t stop me from furthering my studies because I know that one day when I’m released this qualification is going to open a lot of doors for me.”

Sanele added:

“Rehabilitation has given me a second chance in life to change my wrong doings and be a law-abiding citizen. For a very long time I suffered from anger issues. I used to beat everyone up who got in my way, even if it was an accident. Being incarcerated changed my life for the better, as Miss Dube introduced me to anger management classes. After completing my programme I saw so much change in me, I can now control my anger and act accordingly without using violence. I am not perfect but I am better than what I was when I was arrested.”

Masondo reported the following:

“I didn’t know how much these programmes have changed me until my family and friends told me. They are visiting me more often now that they see the change in me.”

These findings support those of Host (2005), who believes that the first step to rehabilitation is when offenders acknowledge their mistakes, which puts them in a position to become accountable for their crimes. The second step is to “try and turn former inmates into productive citizens so that they become functional members of society and at the same time reduce the crime rate” (Host, 2005:30).

Kevin, who was going to be released on parole in six months’ time, mentioned how his next goal was to ask for forgiveness from the victims and their families.

He stated:

“I know apologising won’t take away the pain I caused them, but I am just praying they will find it in their hearts to forgive me and see that I have changed.”

Manganye (2016) indicates how restorative justice is an important part of the rehabilitation of an offender. Restorative justice emphasises that victims who suffered loss should be helped by providing psychological assistance. Herbig and Hesselink (2013:31) further add that the main aim of restorative justice is “to build peace in victimised communities”.

Bonga commented as follows:

“I am very grateful for all the guidance I received during the rehabilitation programmes that were recommended for me. I am now able to recognize another human being and give them the respect they deserve.”

In this context, Mpilo revealed the following:

“...rehabilitation to me is like bringing a car for panel beating so that it can be the best.”

5.3.3 Inmates’ perceptions of correctional officials’ involvement in rehabilitation programmes

The inmates had different views on correctional officers’ involvement in their potential for rehabilitation and their involvement in rehabilitation programmes.

Sanele said:

“Based on the personal experience I had with some of the correctional officials, in particular Miss Dube [a social worker] and Mrs Dlamini (an educator), [I can say] they are the people who always believe in me and whenever I needed assistance with anything they will help me where they can. But sometimes make their jobs very hard as some offenders are very stubborn. But they never gave up on us.”

Bonga commented as follows:

“They are good people who always encourage us to be better citizens. They are human beings too, who sometimes wake up on the wrong side of the bed, but as offenders we have learned to give them space.”

Musa, who had made two suicide attempts, had this to say:

“The first few weeks in the centre was hell; I tried committing suicide twice. On the second attempt one officer told me that the first step of surviving imprisonment is accepting that I will be incarcerated for nine years and make the most of it by educating myself.”

These findings support those of Gideon (2000), who argues that positive treatment and motivation coming from correctional officers is key to the successful rehabilitation of offenders.

Not all offenders had positive feedback, as some negative comments were also made.

Mpilo had this to say:

“Some officers still treat us as prisoners and not offenders. They don’t see the importance of rehabilitation; they believe in punishing us.”

Philani said the following:

“Sometimes the correctional officers treat and talk to us as kids. They don’t listen to complaints. So many times I have heard a correctional officer telling an inmate that this is not a hotel where you get everything you want.”

Kevin added:

“An inmate died in our cell after complaining of having asthma attacks for four hours. The officials said there were no beds [available] in the hospital and we suggested he

should be taken to the government hospital, but they said they didn't have time for that. He passed on around 7 pm and he was only fetched the following day at 11:30 am. We slept with a dead body in the cell the whole night and that was very traumatising for me.”

Mrs Naidoo mentioned that many inmates told her how badly the correctional officers treated them.

She said:

“...the majority of these offenders don't report these officers because they are scared of being oppressed by them.”

Based on the findings presented above, it is clear that the inmates had both negative and positive perceptions about correctional officials' involvement in their desire for rehabilitation. Those who had positive perceptions indicated that they were constantly motivated by the correctional officials. However, the negative feedback exposed bad attitudes of and treatment from correctional officers who were perceived as being unnecessarily harsh.

5.3.4 Overcrowding and the implementation of rehabilitation programmes

During the interviews, all the participants indicated that as much as rehabilitation played a huge role to their lives during incarceration, there were challenges that negatively affected their rehabilitation progress. One of the major barriers was overcrowding and its accompanying deviant behavioural patterns that were readily acquired by most inmates. The offenders provided insightful comments in this regard.

Nathi said:

“Overcrowding will never end because the government is not doing anything to address the issue. This is a major challenge as it affects offenders in so many ways.”

Philani had this to say:

“It's hard to focus on getting rehabilitated when you have a group of guys in your cell who constantly tell you that you are wasting your time with 'stupid' classes. Offenders who are taking rehabilitation programmes should be in separate cells.”

Muntingh's (2006) study also showed that being confined in a restricted environment that is characterised by overcrowding is a breeding ground for the acquisition of criminal behaviour and a place where illegal mechanisms for survival become common.

Mr Steyn offered the following comment:

“Correctional officers are overworked, which affects their quality of work and the implementation of new policies pertaining to rehabilitation. We don't have enough staff to handle this number of inmates and we sometimes lock them in their cells longer than they are supposed to be there, because we are understaffed. And this restricts them from participating in rehabilitation programmes.”

Mrs Dlamini addressed this issue as follows:

“Overcrowding puts such a huge strain on us as we don't have enough resources to provide for all the offenders. Even now I have a list of more than 70 offenders who want to study but due to overcrowding we are full, and being the only educator in the centre makes it even harder to take more students into the programme.”

Mr Khumu added:

“A combination of strain on the officers, reduced access to educational and training programmes, and lack of mental health and substance abuse treatment services reduce the likelihood that incarceration will actually work to tackle the cause of offending behaviour.”

Bonga added:

“Inadequate resources leads to inadequate provision of mandatory and optional skills, and this leads to high rates of recidivism.”

5.3.5 Overcrowding and the scarcity of resources

Most participants indicated that, due to overcrowding, they were struggling to obtain access to the resources they needed. These resources they referred to were:

5.3.5.1 Uniforms

Musa had this to say:

“Because of the number of offenders inside the centre, we struggle to get useful resources.”

Kevin, with disappointment and hopelessness etched on his face, said:

“You will be surprised when I tell you that in all the seven years since my arrest, I was only given a uniform once. So basically, thanks to the DCS, I have been wearing the same clothes for the past seven years”.

Masondo added:

“When incarcerated we are supposed to be given two uniforms, vests, underwear, a pair of shoes, socks and pajamas, but because of overcrowding getting a uniform once when arrested is a privilege.”

Musa stated the following:

“Overcrowding suppresses us; some inmates still don’t have a uniform and wear the clothes they were arrested in”.

5.3.5.2 Beds and blankets

All the participants complained about the shortage of beds and blankets.

Nathi had this to say:

“...in my cell there are 62 of us but only 40 have beds; the other 14 sleep on the floor.”

Sbonga added:

“I have been using the same blanket I got five years ago when I got arrested. Till today I haven’t received another one.”

Mpilo, who was arrested in June 2017, said:

“When I was arrested I was placed in a cell without any blanket or sheet. I was told by the correctional officer that there weren’t any. I stayed for two days without any blanket during the winter season.”

According to Correctional Services Act No. 111 of 1998 section 10, “offenders must be provided with clothes that can stand the climatic conditions of that time. Failure to do so may lead to diseases related to the influenza virus which can lead to an unhealthy offender population. An unhealthy offender population hampers the programmes aimed at rehabilitation” (Muthaphuli, 2008:145).

Philani had this to say:

“A shortage of blankets leads to many illnesses including influenza, pneumonia, and arthritis. We get sick very often. Some of us are even immune to flu now, that’s how often we have had it.”

5.3.5.3 Toiletries

All the offenders complained about the scarcity of toiletries.

Xolani commented as follows:

“We don’t get toiletries here; we only get toothpaste, a toothbrush, two toilet paper rolls and soap once a month.”

Musa added:

“You will find that before the month ends you have run out of these products, especially toilet paper. We end up using newspaper.”

Mpilo had this to say:

“Some of us have skin problems. I have eczema and I use specific soap and lotion that my family used to bring me. But the centre no longer allows those products because some offenders have been caught smuggling drugs by putting them inside lotion containers and a bar of soap. I am now suffering as my eczema is getting worse.”

These findings support those of Manganye (2016), whose study revealed that the unavailability of resources can lead to two things. The first one is “the frustration or unpleasantness of being limited or denied limited resources”, and the other fact is that “competition and conflict over limited resources often lead to aggression and violence.”

2.3.5.4 Food

Food is always an issue in any facility where large numbers of people are accommodated, and the correctional centre under study was no exception.

Masondo commented as follows when questioned about the food situation:

“The quality of the food in the centre is terrible. Not only does it taste bad, but it’s also nutritionally inadequate.”

Mpilo added:

“During the first week of being incarcerated, I suffered from food poisoning because of the food in here. Eventually I got used to it and now it doesn’t make me sick anymore.”

Sanele had this to say:

“The food in here is of poor quality. It is either watery or it has too much oil. Most of the time the food is not enough for everyone, resulting in a number of inmates going hungry.”

Philani commented as follows:

“We are treated like animals and get served spoiled food.”

Mr Steyn stated:

“I have witnessed a lot of transformations in the DCS ever since I started working here 40 years ago. The downturn in the quality food can be blamed on the large trend towards industrialisation. Not so long ago correctional centres were preparing food fresh from scratch, using ingredients grown at the centre by the inmates.”

These findings corroborate those of Merten (2015:3), who states that “incarcerated people are at risk of chronic diseases, but rather than using food services to help control both health problems and the costs of medical treatment, correctional centres exacerbate illnesses by serving and selling unhealthy food.”

Mrs Naidoo added the following:

“The menu is characterised by food that is high in cholesterol, saturated fat, and too low in fibre and other nutrients. All these factors put the inmates at risk of getting heart disease.”

Mrs Dlamini said the following:

“When these inmates have contracted these chronic diseases, they require a special nutritious diet; instead they are made worse by menus with too much fat and a lack of essential nutrients from fresh fruit, vegetables and whole grains.”

Sbonga stated:

“Even when the menu fits nutritional guidelines on paper, it’s always prepared in ways that will make it less healthy. The so-called catering company that cooks for us fries the ingredients and [the food] ends up literally soaked in oil.”

5.3.6 The effects of overcrowding on offenders

Many participants voiced their frustration about the challenges they personally experienced based on overcrowding in the correctional centre. Most alluded to the fact that the overcrowded conditions made them live like animals and, as a result of this treatment, they had no option but to behave like animals.

They indicated that overcrowding contributed to the formation of gangs for protection and they also learnt survival tricks that are mostly illegal (Maganye, 2016:94).

Thoba stated:

“There are more than forty of us in one cell sharing one shower, basin and toilet. We have to wake up at 4 am to queue for the shower so we can be done in time for breakfast.”

Nathi added:

“The showers and toilets are always dirty and we are hardly given detergents to keep them clean.”

Masondo said:

“We get all sorts of infections. Every inmate here suffers from fungal infections of the skin because of the showers and wearing closed shoes every day doesn’t make it any better.”

Shabangu commented as follows:

“The majority of the inmates have Tuberculosis (TB) or they had it; reason is because of overcrowding we are housed with inmates who have TB and all sorts of infectious diseases. They have even started giving inmates TB medication to prevent them from getting it.”

Kenan and Manda (2014) revealed similar data, and they argue that many crowded correctional centres lack adequate medical care, thus causing some inmates to die whether or not they are on death row or not.

Xolani recalled the death of a friend:

“A friend of mine was sick and had been going to the hospital, but they always gave him painkillers. In two months he went from a size 36 to a 30. After being admitted to public hospital, they found out he had stage 3 cancer and he passed away within two weeks.”

One amongst many issues is the increase of HIV/AIDS infections in correctional centres. According to Kenan and Manda (2014), the increase in the incidences of HIV/AIDS shows that the new cases are contracted within the centres. “This is because sex – both consensual and non-consensual sex – between men occurs inside the correctional centre” (Ibid.).

The sleeping arrangements in the facility also leave much to be desired, because the number of inmates that are cramped into the space far exceeds the allocated living space. In most correctional centres, inmates spend the first few months or years sleeping on the passage floor without any mattresses. “When these inmates are released from their cells every morning, they do not have the energy to do anything else and spend the entire day trying to catch up on sleep. Clearly, these prisoners cannot effectively participate in any reformation or rehabilitation programmes. Rather, it could well be that these harsh prison conditions will make such inmates grow bitter, which might increase the rate of recidivism” (Kenan & Manda (2014:33).

The current study revealed that inmates experienced a similar plight.

Kevin stated:

“It’s very hard to go to the toilet at night as we have inmates sleeping in the passage on the floor and with the lights off you will end up stepping on people’s heads, which causes a huge conflict.”

Philani commented:

“Living with so many frustrated people who are always stepping on each other’s toes, you just never know what to expect. You need to be always in defense mode.”

According to Kenan and Manda (2014:39), “assault is driven by overcrowding [and this] makes adequate supervision of daily prison life nearly impossible, both inside the cells and in the wider prison environment”. Moreover, overcrowded correctional centres have less supervision as warders are asked to monitor two to three times the number of inmates they can adequately control. He further adds that “the influx of inmates and [the] subsequent decline in supervision have flipped the balance of power and placed inmates largely in control of each other.”

Inmates are locked in their cells for long periods and there are few opportunities for structured activities, and thus boredom takes over. According to a survey that was conducted by Guerrero (2012), “sharing cells generate [sic] anxiety in inmates, and has more negative than positive effects and it increases [a high] level of conflict”. Guerrero thus suggests that sharing a cell generates anxiety amongst inmates and that loneliness and a lack of intimacy during imprisonment create anxiety which, in turn, creates aggressiveness and non-consensual sex.

When evaluating the data, the researcher realised that the findings of this study correlated with those of UNODC (2011:11, 12), which states:

“Overcrowding impacts also on the quality of nutrition, sanitation, prisoner activities, health services and the care for vulnerable groups. It affects the physical and mental well-being of all prisoners, generates prisoner tension and violence, exacerbates existing mental and physical health problems, increases the risk of transmission of communicable diseases, and poses immense management challenges.”

5.4 Recommendations on improving the effectiveness of rehabilitation programmes

The inmates and the staff were asked to suggest what they thought should be done to make rehabilitation in correctional centres effective even though there is overcrowding. The following suggestions were offered by the participants:

- Rehabilitation programmes should be compulsory for all inmates.
- Develop rehabilitation programmes that will give the inmates skills they can use when they are released.
- The DCS should better train the officers on how to treat inmates.
- Provide financial assistance to inmates who want to study at UNISA.
- Accommodate offenders in cells based on the crimes they committed; for example, a rapist should not be sharing a cell with a shoplifter.

5.5 Conclusion

This chapter presented the interview data and revealed the findings by discussing and analysing various themes that emerged from topics that were identified within the data. The study explored the effects overcrowding has on inmates in the correctional centre under study and how this impacted their potential for rehabilitation. Overcrowding was found to affect not only the rehabilitation process, but also the living conditions of inmates and the distribution of resources. It was also revealed that inmates used violence and theft to cope with overcrowding. The inmates suggested that the DCS should intervene by addressing the issue of overcrowding because being kept in these conditions only makes their situation and thus their behaviour worse. The findings are discussed in more depth in Chapter Six.

CHAPTER SIX

CONCLUSION AND RECOMMENDATIONS

6.1 Introduction

The main purpose of this study was to investigate the effects that overcrowding has on the rehabilitation potential of inmates. The study site was a large correctional facility in the Durban area in the KwaZulu-Natal province. To achieve this aim, the objectives had to be achieved by addressing the research questions. After the data had been collected and analysed, the researcher was able to draw significant conclusions. This chapter presents these conclusions and recommendations are offered based on the findings.

6.2 General Conclusions

Guided by the objectives and research questions, data were collected and analysed. This process facilitated an illumination of the heart of the problem of overcrowding from which general conclusions could be drawn. With reference to the research site under study, the objectives were to:

- explore the causes of overcrowding;
- investigate the effects of overcrowding on the prevalent conditions in the facility;
- determine the impact of overcrowding on the rehabilitation potential of the inmates; and to
- explore strategies that can enhance the rehabilitation potential of the inmates in the overcrowded correctional centre.

6.2.1 Causes of overcrowding in the correctional centre

The findings suggest that a number of factors caused the overcrowded conditions in the correctional centre. Overcrowding in the facility was not only evident upon mere visual observation, but the participants testified to the fact that overcrowding was so severe that the congestion in the cells spilled over into the passages and numerous inmates slept on the floor. This strongly suggests that the Criminal Justice System (CJS) sends more people to the centre than the space allows. The literature review corroborated the view of the participants that the CJS is unable to curb overcrowding for various reasons.

For example, it was revealed that a lack of proper investigations by the police and failure to gather enough evidence result in cases being postponed, with a subsequent uncurbed increase in the number of trial-awaiting detainees. An official participant corroborated this finding, as he related that Medium A block (for detainees) was the most overcrowded block in the facility and that some of the trial-awaiting detainees were incarcerated even though they were eligible for bail. It was stated that some inmates had been granted bail but they could not afford to pay these relatively large amounts.

The study also revealed that the high crime rate is a major contributing factor to overcrowding. The literature revealed that various approaches to policing, prosecuting and sentencing such as the “get tough on crime” laws and the “war on drugs” initiative could be linked to increasingly high crime rates and a consequent overcrowding of correctional facilities.

Another factor that is highlighted in the literature as a driver of overcrowding is that offenders are sentenced for periods of less than two years for less severe crimes. Short-term incarceration does more bad than good as it has the potential to impact offenders’ lives negatively: they may lose their jobs, accommodation and support from the community and they become less employable as they have a criminal record. The main purpose of short-term incarceration is to contain the population growth in correctional centres, but not only has this practice been ineffective in maintaining overcrowding, but it has also contributed to recidivism.

6.2.2 Effects of overcrowding on the conditions in the correctional centre

This research study found that overcrowding is a cause of various issues in correctional centres including poor health, scarcity of resources and violence. In the centre under study, inmates live in crowded conditions where congestion results in an adverse living environment that is not conducive to rehabilitation. The participants testified that cells that are designed to accommodate nineteen inmates often accommodate as many as forty-sixty inmates. Triple bunk beds are not enough so many sleep on the floor and even in the passages. In these crowded conditions, almost fifty inmates share one shower, one basin and one toilet, which inarguably causes infectious diseases as hygiene is severely compromised. TB is a disease that is commonly contracted by inmates inside the centre due to overcrowding. Inmates with severe infectious diseases such as HIV/AIDS are not isolated or accommodated in separate cells due to a lack of space, and this puts healthy cell mates at risk of contracting these diseases.

The participants mentioned that inmates who shared a cell with an individual with TB were given treatment for TB to prevent them from contracting the disease, but this is a practice that is arguably no guarantee for a sustainable healthy environment for inmates. The findings also revealed that violence is linked with overcrowding, particularly because the participants acknowledged that there were not enough correctional officers to curb the eruption of violence among inmates. Overcrowding in a correctional centre makes adequate supervision almost impossible, particularly if a correctional officer has to monitor five times the number of inmates that he/she can reasonably be expected to control. The correctional officers stated that the official ratio of officer to offender was 1:19, but that seven officials in one section often had to monitor five hundred to six hundred inmates.

The research also found that placing more men in the same cell not only creates harsh living conditions that perpetuate the notion of violence, but it also enhances the power and impact of gangs. An inmate reported that because of overcrowding, they were locked up in their cells most of the time and that was when assaults erupted and criminal behaviour was instigated. It is against this backdrop that the officials strongly believed that their safety was compromised. There was a strong suggestion that the DCS did not consider the safety of its officers because their requests for the appointment of more officers to monitor inmates had been ignored.

6.2.3 Impact of overcrowding on the rehabilitation process

This study found that, due to overcrowding, the rehabilitation potential of inmates was compromised. The inmates indicated that because of overcrowding, they didn't have access to rehabilitation programmes regardless of the fact that they had been informed on arrival at the facility that such programmes were available to all inmates. For example, the centre has only one educator and she can only assist a limited number of students per year, leaving the other inmates to fend for themselves. The issue of a lack of nutritious meals was also raised. It was stated that the catering company provided unhealthy, fat induced meals that lacked nutrients and fibre. The food also often ran out when large numbers of inmates had to be fed, leaving some inmates with no choice but to eat only dry bread and to drink tea.

This finding suggests that there is lack of communication between the centre administration and the catering company, as the latter may prepare food for a pre-allocated number of inmates, whereas more than that number may habitually be accommodated in certain blocks. This is a serious omission as it impinges on the basic human rights of inmates. The participants were aware of their rights but were unable to do anything about it.

For example, they stated that the DCS was mandated to attend to the special culinary requirements of all inmates, but that it failed to do so. The participants also revealed that inmates were locked in their cells for periods longer than prescribed and that they thus did not get time to exercise in fresh air, which in turn exposed them to severe health risks.

Moreover, the participants admitted that they did not get opportunities to participate in activities such as sports and other physical exercise. The closest thing they had to playing sport was when they played soccer in the passages, and naturally not everyone could participate in such an enclosed, congested environment. The participants bemoaned the lack of exercise and agreed that exercising releases stress and facilitates a healthy body and mind. Clearly, the closed environment and the lack of exercise impacted the inmates' potential for rehabilitation negatively.

6.2.4 Strategies that can enhance rehabilitation potential in an overcrowded correctional centre

The inmates and the staff were asked to suggest what they thought should be done to make rehabilitation in the correctional centre possible regardless of the overcrowded conditions. The following suggestions were offered by the participants:

- Rehabilitation programmes should be compulsory for all inmates.
- Rehabilitation programmes that are skills-based should be developed so that inmates are employable or can start their own enterprises when they are released.
- The DCS should train the officers on how to treat inmates.
- Inmates who want to study through UNISA should be given financial assistance.
- Offenders should be accommodated in cells based on the crimes they committed; for example, a rapist should not be sharing a cell with a shoplifter.

The study also revealed that the rehabilitation potential of inmates can be enhanced if more officials and officers are employed to monitor the inmates in order to ensure that violence and gangsterism are curbed. A lack of officials clearly impacts inmates' ability to successfully participate in rehabilitation programmes in a sustainable manner and also exacerbates the eruption of violence which threatens the safety of inmates who want a better life for themselves after their incarceration. It was strongly suggested that rehabilitation potential can be enhanced if programmes are made compulsory for all inmates and particularly if skills-based programmes are designed to capacitate them.

This is not a pipe dream, as the biographical data revealed that the participants were educated at a relatively high level and that they possessed the potential for gainful employment. However, the study found that after being released, offenders struggle to procure employment and thus resort to crime to provide for themselves. Some of the officials believed that the DCS should provide training programmes for officers regarding rehabilitation matters, as they agreed that some officers are arrogant and demonstrate unfriendliness towards inmates. It was also suggested that some officers misuse their authority and abuse the inmates physically, emotionally or by taking away their privileges. It is the duty of the DCS to train correctional service officers as they are pivotal in the process of rehabilitating offenders. Moreover, the appropriate classification and accommodation of inmates according to the crimes they committed is essential as appropriate placement will prevent the acquisition of more dire criminal behaviours by many inmates.

6.3 Limitations of the Study

During the execution of this study, the researcher faced two major challenges. The first challenge was the procurement of the gatekeeper's letter of authorisation and ethical clearance. The problem seemed insurmountable at first as the DCS wanted ethical clearance from the UKZN before authorising the study, while the UKZN wanted the gatekeeper's letter before giving the researcher ethical clearance to conduct the study. The issue was resolved as the University gave the student provisional ethical clearance which was submitted to the DCS.

Another challenge was that the researcher was not allowed to take pictures inside the correctional centre as evidence of the overcrowded conditions in which the inmates lived. However, anecdotal and participant evidence was sufficient to illustrate the reality of the overcrowded conditions in the centre under study. A limitation of the study that impacts the generalisability of the findings is its relatively small scope, and therefore the researcher acknowledges that the results cannot be generalised to the population from which the sample was drawn. However, to ensure the validity of the study, triangulation of the data was used. According to Leedy and Ormrod (2005, cited in Sibisi, 2016:70), triangulation is the process according to which "interview data are compared with observation data and the data obtained through the literature review".

As this process was followed diligently throughout the data analysis process, it is the researcher's contention that the findings of this study will contribute to the body of knowledge pertaining to overcrowded correctional centres, and that the DCS should take cognisance of the suggestions pertaining to the issues that impacted the inmates' potential for rehabilitation in the centre under study. Moreover, the findings may also give direction and impetus to future studies in the quest to resolve the issue of overcrowding in correctional facilities in general.

6.4 Recommendations

After carefully considering the findings of this study, the following recommendations are offered:

- **Education and skills development for correctional service officers.** There is an unquestionable need for the training of correctional officers at the study site. The participants expressed a need for the officers to be educated on the issue of human rights in correctional centres. Such training will capacitate officers to facilitate the rehabilitation of inmates as they spend most of their time with them.

Only through appropriate training will correctional officers be equipped with the required knowledge and skills to perform their duties on the basis of respect for the human rights and dignity of the inmates. Most importantly, learning interpersonal communication skills will assist officers in establishing positive relations with the inmates, thereby lowering tension and resolving situations without using force. This is referred to as dynamic security as is propagated under Rule 76 (1)(C) of the United Nations Standard Minimum Rules for the Treatment of Prisoners (or the Nelson Mandela Rules) (2008).

- **Employing more correctional officers.** There is an urgent need for the DCS to employ more trained correctional officers and officials. By hiring more staff, the ratio of officer to inmate will decrease, thus making it possible for officers to supervise inmates efficiently.

It is no secret that correctional officers have a stressful job and sometimes work under stressful conditions. Therefore, to improve work commitment and to avoid ill health, resources and job satisfaction should be provided for all employees.

Benefits such as remuneration packages should be reviewed and monthly or annual awards with incentives will enhance morale and organisational commitment.

- **Providing skills development rehabilitation programmes for inmates.** There is a great need for skills development programmes that will enhance the employability of both short- and long-term inmates. It was alluded that once offenders have been released, they struggle to obtain employment and thus revert to reoffending. Skills such as carpentry, electrical technology, plumbing and panel beating will enable and sustain inmates in the world of work outside the correctional facility.
- **Alternative sentencing for minor offenses.** Sentencing an offender can take many forms and, in order to reduce overcrowding, alternative sentences for minor offences should be implemented. The judiciary should acknowledge that imprisonment is not always a solution to resolving criminal behaviour, as in many instances it seems to exacerbate this tendency. Alternative sentences could include fines, suspended sentences, welfare and community services, probation, and restitution. Alternative sentences should address the needs of first-time offenders who should be guided to admit their guilt and show willingness to repair the damage caused by the crime. For instance, many youths commit crimes that are not severe and they could be supported to become worthy citizens. The findings clearly demonstrated that incarceration is not a solution that curbs the criminal tendencies of first-time petty crime offenders.

6.5 Recommendations for future research

Based on the findings and scope of this study, it is recommended that future studies should broaden their scope to include more correctional study sites and larger inmate and official samples. Correctional centres in various provinces could also be investigated for comparative purposes. However, studies should continuously focus on the following issues to determine whether the system of correctional services has improved, whether certain gaps still exist, and whether human rights are continuously infringed:

- The perceptions of ex-offenders on the effectiveness of rehabilitation programmes, or the lack thereof;
- The impact of incarceration on the families and friends of offenders;

- The implication of Correctional Services Act No. 111 of 1998 for the rehabilitation of offenders while they are incarcerated in correctional centres; and
- Strategies that can be implemented to tackle the issue of overcrowding and its accompanying problems in correctional centres.

6.6 Conclusion

Correctional centres should be places where criminals and offenders are incarcerated with the intention of guiding them towards rehabilitation so that they can re-enter society as worthy and gainfully employed citizens. However, inmates are victimised on a daily basis because of the overcrowded conditions they live in and the lack of compassion and empathy on the side of the officers that are mandated to monitor their behaviour. This study has contributed to scholarly knowledge in the correctional services field by confirming that overcrowding in correctional centres does not only affect the health and safety of the inmates, but that it also hinders inmates' potential for rehabilitation. It is therefore clear that policies and procedures need to be amended to address and eventually curb overcrowding in correctional centres and to implement effective rehabilitation programmes. The persistent high levels of recidivism that characterise efforts to rehabilitate offenders remain a threat to not only to the Department of Correctional Services, but to the county as a whole.

The development of this country is strongly dependent on successfully combating crime by rehabilitating offenders. There is a need for further research to determine measures that could be employed in correctional centres to enhance the ease the rehabilitation journey of inmates and to make this process more effective.

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APPENDIX A in English

INFORMED CONSENT LETTER

Dear participant

Title: *The impact of correctional centre overcrowding on rehabilitation of offenders: A case study of Durban Westville Correctional Centre*

Principal Researcher and Contact Information

Initials and Surname: Ms Nkosi

Cell no: 081 790 1644

Email: businkosi18@gmail.com

Purpose of the study:

I am a student at University of KwaZulu-Natal major in Criminology. I am conducting a research project as part of my Criminology Master's thesis. I am working closely with my supervisor Miss Maweni, who will be the main contact person for this project. I would like to know if you would be willing to take part in a research study on the impact prison overcrowding has on rehabilitation of offenders. The project is part of the researcher's interest on exploring offenders perceptions on prison overcrowding and to determine the effect it has on them and the rehabilitation process.

Procedures:

You will be asked in an individual in-depth interview with the researcher. You will be asked questions related to prison overcrowding. Your opinions regarding prison overcrowding will be highly required. **Take note of the following:**

Confidentiality:

All the information you provide will be strictly confidential, and your name will not be mentioned. Instead you will be regarded as the respondents/informants. It is guaranteed that your true identification will be treated as highly confidential and in any part of the research your name, surname or any clue that would be traced back to you will not be mentioned/used. Any information given by you cannot be used against you, and the data collected will only be used for purpose of this study only. The data will be stored in secure storage and destroyed after 5 years.

Note about Voluntary Nature of Participation, duration of the interview and Statement about Compensation:

Your participation is voluntary. You may refuse to participate or may discontinue your participation at any time during the interview. You will not be refused/denied if you decide to discontinue at any time of the interview. You will not be reprimanded for taking such an action. Note that participating, not to participate, or stop participating in the research is your voluntary choice. The duration time for the interview will be about 45 minutes to 60 minutes. The researcher will not be able to compensate you for your time. The research is purely for academic purposes only, and therefore no financial gain involved.

Willingness to be interviewed

If you are willing to be interviewed, please indicate (by ticking as applicable) whether or not you are willing to allow the interview to be recorded by the following equipment:

| Equipment | Willing | Not willing |
|------------------|----------------|--------------------|
| Audio equipment | | |

Information about this study:

You will be given the opportunity to ask, and to have answered, all your questions about this research by e-mailing or calling the principal researcher, whose contact information is listed at the top of this letter. All inquiries are confidential. If you have questions regarding your rights as a research participant or if problems arise, which you do not feel you can discuss with the Primary Investigator, please contact the researcher’s supervisor Miss Maweni at 031 260 3846 email: Maweniv@ukzn.ac.za and University HSSREC, Ms. Phumelele Ximba: [0312603587](tel:0312603587), [email:ximbap@ukzn.ac.za](mailto:ximbap@ukzn.ac.za)

Thank you for your interest/contribution to the study.

DECLARATION

I..... (Full name(s) of participant) hereby confirm that I understand the contents of this document and the nature of the research project, and I consent to participating in the research project.

I understand that I have freedom to withdraw from the project at any time, should I so wish.

SIGNATURE OF PARTICIPANT

DATE

.....

.....

APPENDIX A in IsiZulu

INCWADI YOKUGUNYAZA UKUBA INGXENYE YOPHENYO

Isihloko socwaningo:

“The impact of correctional centre overcrowding on rehabilitation of offender: A case study of the Durban Westville Correctional Centre”.

Imininingwane yomphenyi:

Initials and surname: Ms N.P Nkosi

Cell phone number: 081 790 1644

Email: businkosi18@gmail.com

Isizathu saloluphenyo:

Ngingumfundi waseNyuvesi yaKwaZulu Natal ngenza iziqu zeMastesr kwi Criminology nginesifiso sokwenza uphenyo njengengxenywe yezifundo zami. Ngisebenzisana ngokusondelana nomphathi wami uNksz Maweni okuyena ozoba ibamba kuloluphenyo. Ngingathanda ukwazi uma ungathanda ukuba ingxenywe yaloluphenyo olukhuluma mayelana nenkinga yokugcwala emajele nokuthi iziphazamisa kanjani izinhlelo zokuhlomelelisa izimilo.

Uhlelo lophenyo:

Uphenyo luzokwenziwa ngokuthi ubuzwe imibuzo kwinhlolekhono ngasese nomphenyi. Imibuzo ozobuzwa yona izobe imayelana nokugcwala emajele. Umbono wakho mayelana naloluphenyo luzothathwa njengoneqhaza.

Ukungadalulwa kwemininingwane yakho:

Lonke ulwazi ozosinika lona luzobe luyimfihlo, imininingwane yakho engeke idalulwe. Kuyisiqiniseko ukuthi igama kanye nesibongo sakho nayo yonke eminye imininingwane okungakwazi kubuyiselwe ekuvezeni kwako anengeke anengeke kudalulwe. Lonke ulwazi

olutholakele kuloluphenyo luzobekwa endaweni ephephile, emva kweminyaka emihlanu luzolahlwa.

Awuphoqiwe ukuzibandakanya kuloluphenyo, ubude benhlokhono kanye nenzuzo:

Ukuzibandakanya kwakho kuloluphenyo akunampoqo, unganqaba ukuzibandakanya noma umise inhlokholo ingasiphi isikhathi. Angeke unqatshelwe noma ujeziswe ngesenzo sakho. Inhlokhono izothatha phakathi kwemizuzu engamashumi amane nanhlanu (45min) kuya kwiHORA. Umphenyi angeke akukhokhele ngokuzibandakanya kwakho kuloluphenyo, loluphenyo lumayelana nenhloso yemfundo kuphela, ngakhoke ayikho inzuzo yemali etholakalayo.

Ukuvuma kwenza inhlokhono.

Sicela ukhethe ngezansi ukuth uyavuma noma cha ukuthi uqoshwe.

| Equipment | Willing | Not willing |
|------------------|----------------|--------------------|
| Audio equipment | | |

Imininingwane ngaloluphenyo:

Uzonikwa ithuba lokuthi ubuze futhi uphendulwe ngalohlelo, yonke imibuzo yakho mayelana naloluphenyo ungayithumela kulemininingwane ebhalwe ekhasini lokuqala. Zonke izikhalazo zakho ziyimfihlo, uma unemibuzo noma ufuna amalungelo akho njengomsisi wophenyo noma unezinkinga ongathandi ukuzidingida nomphenyi, ungaxhumana nomphathi kulemininingwane:

Miss Maweni at 031 260 3846 email: Maweniv@ukzn.ac.za noma University HSSREC, Ms. Phumelele Ximba: 0312603587, email:ximbap@ukzn.ac.za

Siyabonga ugqozi nelukululu lakho.

ISICELO

Mina..... (amagama aphelele)

Nginyaqondisisa inhloso yaloluphenyo, ngakho ngiyavuma ukuba ingxenye yalo.

Giyazwisisa ukuthi ngibalo ilungelo lokuyeka phakathi nophenyo uma ngabe ngifisa.

ISIGNESHA

.....

USUKU

.....

APPENDIX B in English

INTERVIEW SCHEDULE

Name: Nozibusiso Nkosi

Project title: *“The impact of correctional centre overcrowding on rehabilitation of offenders: A case study of Durban Westville Correctional Centre”*

The following are interview questions:

1. How long have you been in prison?
2. What is your understanding of the correctional centres?
3. What do you think about the rehabilitation programmes for inmates?
4. Is everyone able to attend the rehabilitation programmes, please explain?
5. How would you describe your experience in prison?
6. Tell me what you think about prison overcrowding?
7. How does overcrowding affect scarcity of resources?
8. Can you describe the conditions offenders live under because of overcrowding?
9. How does this affect you and the other inmates?
10. What are some ways that you and/ other inmates use to deal with the issue of overcrowding?

APPENDIX B in IsiZulu

INTREVIEW SCHEDULE

Igama: Nozibusiso Nkosi

Ishloko socwaningo: *“The impact of correctional centre overcrowding on rehabilitation of offenders: A case study of Durban Westville Correctional Centre”*

IMIBUZO

1. Usuboshwe iminyaka emingaki?
2. Kokwazi kwakho yini umsebenzi wamajele?
3. Uthini umbono wakho mayelana nezinhlelo zokuhlomelelisa izimilo zeziboshwa?
4. Ngabe zonke iziboshwa ziyakwazi ukuba zingenelele kulezi zinhlelo zokuhlomelelisa izimilo?
5. Ungayichaza kanjani impilo yasejele kumuntu ongakaze aboshwe?
6. Uthini umcabango wakho ngokugcwala kwamajele?
7. Ukugcwala kwamajele kukuphazamisa kanjani ukutholakala kwezimpahla?
8. Ungasichaza kabanzi isimo ijele esikuso esidalwa ukugcwala kweziboshwa?
9. Isimo samajele esidalwa ukugcwala kweziboshwa kukuphatha kanjani?
10. Yiziphi ezinye izindlela ezisetshenziswa iziboshwa ukuze zikwazi ukubhekana nesimo sokugcwala emajele?