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ATTITUDES TOWARD ELDERLY INMATES IN CORRECTIONAL FACILITIES

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Abstract:

Objective: Psychological well-being and mental health of elderly inmates are investigated by international organization, committees and researchers. One of the main factors that influence their quality of life, daily mood and well-being is interpersonal relationship. Numerous empirical data confirm the importance of interpersonal relationship and attitudes toward aging. An attitude can be defined as an evaluation of a stimulus as reflected in our cognitive, emotional and behavioral responses to the problem (Fiske &Taylor, 1991). In the field of geriatric psychology, research has focused on the problem of interpersonal relationship between elderly people and workers in prison environment.

Prison officers are responsible for the safety and security of the prison facility (Bezerra et al., 2016), for supporting offender rehabilitation efforts and for managing organizational demands (Schaufeli & Peeters, 2000). Despite their importance to the running of the prison system, the health and wellbeing of prison officers remains poor.

Hypotheses:

H0: There isn't any correlation between the social support inmates have, and their quality of life H1: The more social support correlate the higher level of inmates' quality of life

Methods: The systematic review of research and policy papers, articles that published on interpersonal relationship between elderly inmates and officers in correctional facilities, also effective programs outcomes were conducted. The main symptoms of the problem were measured with special checklist and questionnaires.

Results: The elderly inmates experience emotional instability; tendency to self-accusations; anxiety-depressive response; low tolerance for frustration; mistrust and heightened criticism of others; intra and interpersonal conflict.

A systematic approach in psychological work with elderly prisoners, also officers allows for the transition from a symptomatic to a personality-oriented level of psychological impact. Psychological emotional support can renew their hope on life, influence positive outcomes of the support program. According to the results of repeated psychological research, the patient's condition was characterized by positive dynamics: the level of psychological distress and the intensity of psychological distress significantly decreased, the general internality of the personality increased, as well as the subjective assessment of personal well-being.

Conclusion: It is necessary to focus the attention of specialists on the advisability of using psycho-educational programs in a prison environment, providing information about the aging dynamically. Such programs, used at the initial stages of work with patients, contribute to the creation of motivation for personal psychotherapy and significantly increase its effectiveness.

Keywords:

interpersonal relationship, elderly inmates, prison environment, correctional officers psychological-emotional support program

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Introduction

Giving and receiving social support is one of the important issues of the individual and community lives. Such support is often exchanged within families, learning and working environment, communities, between colleagues and other relationships. Researchers and policy-makers think that offenders need help and support from family, relatives, friends, also formal institutions- criminal justice agencies, correctional facilities, prison officers, social welfare services. Especially elderly inmates are the vulnerable group members who need more care and attention. This is because they experience multiple chronic physical and mental health conditions and physical disabilities at relatively young prisoners (ICRC, 2016). They also have suffered stress, or trauma over their lifetimes, have a previous experience of drug using and addiction, homelessness, and limited access to social welfare programs and education (Ron H.Aday, 2003).

Mental health can be influenced by feelings of isolation in the prisons. Compared to younger prisoners, older inmates have fewer regular visitors and fewer connections and interpersonal relationships (B.A.Williams et al., 2010). Correctional officers meet this population every day, and they are part of this interpersonal relationship, too. Health and well-being of prison officers remains poor. Armstrong, Griffin and other authors mentioned that between 30 to 50 percent of prison officers report moderate to high levels of workplace stress (Armstrong& Griffin, 2004; Butler et al., 2019; Kinman et al., 2016; Lambert & Hogan, 2018; Steiner & Wooldredge, 2015). Rates of burnout, post-traumatic stress disorder, alcohol use are more common in prison officers than the general population (Boudouka et al., 2013, Gould et al., 2013, Jaegers et al., 2019, Bierie, 2012). Furthermore, they experience poor physical health, decreased life and work satisfaction (Finney et al. 2013).

In this article, the interpersonal relationship problem between officers and elderly inmates was examined. Giving instrumental or expressive support to the elderly inmates by the institution, correctional officers was examined in this research via literature analyzing and survey results.

Firstly the problem was explored based on previous literature materials, then the survey questions were used by inmates, and officers. Based on statistics and figures those got from survey procedures, conclusion part of the paper was prepared, and conclude by discussing what kind of social emotional support techniques officers can use to build effective relationships with older inmates.

Literature review

The previous findings mentioned the weak mental and physical health, poor well-being of elderly inmates. House of Common Justice Committee's V report of session 2013-2014 considered older prisoners. Based on that material, and authors' examines the following table was used:

Table 1. Proportion of prisoners over 60 with most prominent chronic physical health disorders.

Disorders	Fazel, et al: 2001	Hayes, et al: 2012	
		60-64	65-69
cardiovascular	35%	51%	55%

musculoskeletal	24%	51%	66%
respiratory	15%	27%	36%
Psychiatric disorders	45%	54%	39%

Data source: Older prisoner, V report of session 2013-2014, House of Common Justice Committee, 2013.

Older adults experience psychological trauma directly related to their imprisonment. Crawley E. mentioned elderly prisoners' anxious, depressed or psychologically traumatized emotional state by incarceration (Crawley E., Sparks A., 2006). Lack of social support, family members' and relatives fewer visits and poor communication increase their depressed mood, fatigue, worrying and uncertainty about future.

Indicators of aging attitudes are affective, cognitive, and behavioral components.

The concept of social support proposed by Cullen (1994) was used in this research. Cullen identified three main dimensions in the social support definition: the community, the social network and intimate and confiding associations (Cullen, 1994). The author differentiated instrumental and expressive support. Instrumental support refers food, money, housing, and services; while expressive support means sharing sentiments, discussing concerns and problems, or giving attention (Cullen, Colvin et al., 2002).

Different researches on inmates lend insight to the importance of social support in prisons. Inmates report the need for safety, structure, support, emotional feedback, social stimulation, activity and other issues (Youngki W.et al.,2015). They often desire "support and structure" (instrumental support), "emotional feedback" (expressive support) within the correctional facilities, too (Youngki W.et al.,2015).

Since Cullen (1994) mentioned an importance of social support for criminal justice, some researchers have begun to investigate interpersonal relationships in the prisons (Youngki W.et al.,2015). Meanwhile relationship between family ties and inmate behavior has long been overlooked by researchers (Bales &Mears, 2008; Cochran &Mears, 2013). Visits, furloughs, receiving calls, and letters by family members and relatives can be differed as an expressive support tool. Bales and colleagues (2008) mentioned that more frequent visitation while incarcerated is related to the reduction of recidivism upon release.

Cognitive component of attitudes means beliefs, stereotypes, and perceptions about older adults and the aging process. Some beliefs regarding aging and cognition are negative, when some of them are positive. For example, while old age might be associated with growth or maintenance some aspects of functioning, such as those associated with expressive behavior or wisdom (Handbook of the psychology of aging, 2006). Attitudes are also reflected in behaviors toward older adults. Finding from literature analyzing mentioned stereotypes, also younger adults' patronizing talk with older individuals. Such patronizing talk is characterized by demeaning emotional tone, clarification strategies, controlling or disapproving messages (Handbook of the psychology of aging, 2006). Aging related attitudes also influence in other important social contexts. Behavioral components can be different due to cultural moments. Aging attitudes shape dependence-related behaviors in older adults; such behaviors may not always be reactions to the external environment. They may reflect selective processes designed to foster control and conserve resources (Handbook of the psychology of aging, 2006).

The concept of stereotype threat was invoked by Steele and colleagues (2002) that explain the effects of negative stereotypes on performance. Authors mentioned that situational cues activate these thoughts, which may negatively impact performance due to some issues, including anxiety, arousal, and decreased effort.

By exploring the subjective experiences of prison officers when interacting with prisoners, I aim to better understand how these interactions may interact with the health and wellbeing of prison officers. As such the current study will examine interactions between prison officers and prisoners as reported in the existing literature. Owen (1983) in the USA explored prison culture and relationship with 35 prison officers, Liebling and colleagues (1999) in England studied this problem with 17 prison officers using semi structured interviews, Cianchi in Australia explored investigated the same problem in 2009, Lemmergard and Muhr (2012) focused on emotional labour and professional identity problem of correctional officers in Denmark, Ibsen (2013) chose an ethnography to get information about informal favours as social control by prison officers in Norway, Worley (2016) used auto- ethnography in the two prisons of the USA, Ricciardelli and Perry (2016) used semi-structured interviews with 42 officers in Canada, Halsey and Deegan (2017) explored this problem in Australia.

An exploratory research that realized in Italy, differentiated factors that negatively affect the psychological well-being of correctional officers (Viotti, 2016). The author stressed that managing relationships with prisoners was the most stressful part of a prison officer's job. That research brought to light an interesting aspects little considered until 2016: for the interviewees, the closeness with the inmates means, most of all, being in contact with their suffering and their desperation caused by their state as detainees and worsened by the inability of the Italian penitentiary system to guarantee conditions of dignity in the detention experience (Viotti, 2016). Moreover, feelings of guilt and powerlessness, due to the impossibility of helping the inmates are also highlighted as part of the COs' stress experience in previous works of literature.

The smooth functioning of the prison, and the wellbeing of staff and prisoners alike, is influenced by multiple inter and intrapersonal factors, yet few have sought to directly explore these interpersonal interactions and the health of prison officers (Davinia R., 2021).

Prison officers' wellbeing, therefore, can be understood as a dynamic balance between an individual's available resources and the challenges they face (Dodge et al., 2012; Trounson & Pfeifer, 2016). In accordance with the literature concerning social factors, two categories were observed which describe elements of stress related to relationships between COs (correctional officers) and their peers and superiors.

Carnevale and colleagues (2018) strongly emphasized that different aspects of the prison environment lead to a lack of job satisfaction (Testoni I. et al., 2021).

The literature reports that prisoners' mental health affect the mental health of prison staff. Role conflicts, environmental conditions, lack of family and relatives support, stressful events put elderly inmates' mental health at risk, meanwhile the officers are faced with these difficulties in their daily lives.

Methods

200 elderly prisoners and 21 officers were involved the research from different prison regimes of Azerbaijan correctional facilities between 2019-2020. Elderly inmates were asked survey questionnaire and measurement tool to rate their quality of life domains using 5-point Likert type scale (from 0-not at all to 5-very much). Officers were experienced to rate their social

emotional skills, and stress coping reactions using questionnaires in August 2021. The statistical issues, regression, also correlation between variables, were analyzed by using SPSS program versions.

Each of them was asked their permission to participate in the survey based on ethical codes.

Results and conclusion

Independent variables: age, prison experience, family support (short and long term visits, telephone calls) and prison environment factors, as an officers and inmates attitude.

Dependent variables: quality of life indicator

Age of the prisoners was defined 63,6±4,22 (Mean:63,60; Std. Deviation:4,22; median:63; Min.55; Max.84; Skewness 1,512; Kurtosis 5,025).

Prison experience: Majority of the participants didn't have any previous prison experience, it was their first arrest, respectively 119 (59,5%) and 81(40,5%).

The first question about family members' connection was "how often do you get family support?". More than 75% of participants declare getting family and relatives' support regularly. The next questions were about short and long term visits, and observed with fluctuation. When 58,5% of them state regularly short term visits, only 10% of the elderly inmates' family members visited them for a long term (3days).

The officers' and inmates' attitude and their influence to interpersonal relationship was determined as an independent variable.

These figures were described in the following table:

Get family support	Regularly	151	75,5%	Total
	sometimes	47	23,5%	
	never	2	1,0%	100%
Short term visits	Regularly	117	58,5%	
	sometimes	80	40,0%	
	never	3	1,5%	100%
Long term visits	Regularly	20	10,0%	
	sometimes	127	63,5%	
	never	53	26,5%	100%

 Table 2. Family and relatives support

Table 3.	Officers	and	inmates	attitude
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Consider your age	sometimes	125	62,5%	Total
	never	75	37,5%	100%
Officers' attitude	high	120	60,0%	
	normal	78	39,0%	
	low	2	1,0%	100%
Inmates' attitude	high	129	64,5%	
	normal	71	35,5%	
	low	-	-	100%

Dependent variable: QOL (quality of life) indicators.

Quality of life indicators were measured QOL questionnaire that was made based on WHO QOL measurement scale. The figure 1 presents the answers' distribution about quality of life.

Figure 1. Answer distribution (%)



Majority of the participant (81,5%) rate their QOL poor, only 2,5% of them mentioned their quality of life well, while 14% of them didn't have any idea about it, they assessed neither good or poor (*Mean 2, 17; Median 2; Std.deviation 0,482; variance 0.232; min.1; max.4; skewness 1,789; kurtosis 4,346*). Test of normality (Kolmogrov-Smirnov) values were *0,473; df=200; p<0,005*.

One-sample test values (considering test value=4) t=-53,700; df=199; p<0,005; $d=t/\sqrt{N}=3,79$. This figure let us continue discussion, because of normal distribution (Kolmogrov-Smirnov), and d values.

The effect of increasing age and quality of life

Considering age factor, we can divide the participants 2 groups: >60, <60 years.

H₀: there isn't any correlation between aging and quality of life indicators.

H₁: the increasing age factor has an impact on quality of life prisoners.

Independent t-test for equality of variance and means (F=24,322; df=198, t=-5,808; p<0,005), so we can mention that H₀ rejected. The increasing age factor has an impact on elderly inmates' quality of life indicators. The correlation between two factors was detected by Pearson correlation test (r=-0,359, p<0,005). There is a negative correlation between these factors, and it is statistical significant figure.

To measure the reason and conclusion between increasing age and QOL, had chosen Durbin-Watson regression test (*r square*= 0, 129; adjusted *r square*= 0, 125, Durbin Watson coefficient was 1, 128). The r square and adjusted r square were close to each others, and Durbin Watson coefficient was low than {1,5 - 2,5} so the regression between them was statistically significant (*F*=29,3; p<0,005).

The effect of prison experience and quality of life

The participants were divided two groups, who had previous prison experience, had arrested before, and the second group members whose imprisonment was the first time. The quality of life indicators between them wasn't statistically significant, so H₀ (the previous imprisonment has an impact on QOL of elderly inmates) wasn't rejected (t=0,37; df=198; p=0,714). Based on ANOVA test results, sum of squares between groups was 0,031; total 46,22; $\eta^2 = 0,0006$ (F=0,135; p=0,714).

The figures let us to say that having any previous prison experience doesn't influence elderly inmates' current comprehension quality of life.

The family support and quality of life

The survey items about interpersonal relationships with family members and relatives, let us to mention that more than 75% of participants got family members and relatives support, more than 50% of them regularly had short term visits, but only 10% had long term visits with their family. If divide them 3 groups, and compare their QOL indicators, there wasn't any statistically significant coefficient ($\chi^2 = 2,724$; *df=2; p=0.256*). In this situation H₀ wasn't rejected, so it was failed to reject. Also Spearman's correlation coefficient was (*r=-0,116; p=0,10*); this figures let us to say that there isn't any correlations between these factors.

This coefficient was detected between short term visits frequency and QOL indicators ($\chi^2 = 5,509$; *df=2*; *p*=0.064). Also Spearman's correlation coefficient was negative (*r*=-0,139; *p*=0,050); this figures let us to say that there is week correlations between these factors.

Correctional facilities environmental factor and QOL

The next independent variables that influence elderly prisoners QOL are correctional facility accommodation, officers and other prisoners' attitude. So the survey items that assess officers' and administration attitude to them were determined.

 $H_0\!\!:$ the correctional environmental factor and personal relationship in the prison doesn't have an impact on the elderly inmates' QOL

 H_1 : the correctional environmental factor and personal relationship in the prison have an impact on the elderly inmates' QOL

The statistical figures let us to continue this discussion and determine relationship between these factors ($\chi^2 = 13,857$; *df*=1; *p*=0.000). Spearman's correlation coefficient was positive, and this figure was statistically significant (*r*=0,264; *p*<0,005).

The next question (*how you rate workers' attitude*) about relationship in prison and QOL of inmates was measured by Kruskal Wallis Test ($\chi^2 = 18, 167; df=2; p=0.000$), and Spearman's correlation coefficient was positive, and this figure was statistically significant (*r*=0,301; *p*<0,005)

The other prisoners' attitude and its impact on elderly prisoners' QOL was measured by Kruskal Wallis Test ($\chi^2 = 3,185$; *df*=1; *p*=0.074), and Spearman's correlation coefficient was positive, and this figure wasn't statistically significant (*r*=0,127; *p*=0.074).

Based on this statistical measurement H_0 was rejected and H_1 (the correctional environmental factor and personal relationship in the prison have an impact on the elderly inmates' QOL) approved. However this is appropriated for officers' approach, this hypothesis wasn't proved statistically for prisoners' attitude factor.

Considering the officers' impact to the aging population in the prison, the next step of study was to check the officers' social emotional skills.

On August 20-21, 2021, a seminar-training on "Development of social and emotional skills, creation of a supportive environment" was organized with 21 young officers who started their new service in the Penitentiary Service. At the same seminar, officers conducted a "Social Emotional Skills Self-Assessment Questionnaire". The questionnaire consists of 5 sections: self-awareness, self-regulation, social awareness, social management and responsible decision-making, 5 questions for each section, a total of 25 questions.

Self-awareness ($12,62\pm3,2$; min.0, max.15), self-regulation ($12,43\pm2,7$; min.4, max.15), social-awareness ($10,76\pm2,07$; min.4, max.15), social management ($12,43\pm3,1$; min.2, max.15), and responsible decision-making ($12,19\pm3,5$; min.1, max.15) scores fluctuated between 0-15.

The strong positive correlation was determined between questionnaire sections, and it was statistically significant result.

Self-awareness and self-regulation (*r*=0,71; *p*<0,01);

Self-awareness and social-awareness (*r*=0,71; *p*<0,01);

Self-awareness and social management (*r*=0,81; *p*<0,01);

Self-awareness and responsible decision-making (*r*=0,69; *p*<0,01);

Self-regulation and social management (*r*=0,76; *p*<0,01);

Self-regulation and responsible decision-making (*r*=0,77; *p*<0,01);

The aging process has an impact on elderly inmates' QOL, although they don't have any previous prison experience, they QOL indicators changed negatively. The relationship and communication have an impact on the aging prison population, however, the interpersonal relationship in the prison influenced their daily mood and quality of life more than personal relationship with family members, and relatives. Officers' attitude and their approach was one of the strong influential factors on elderly offenders. At the same time, officers self-awareness, self-regulation, social management and responsible decision-making skills were interrelated each others.

Limitation of the study

Since the attendance at the study was voluntary, not all the staff and the elderly prisoners made themselves available to participate in interviews. This is the first limitation, as more participation was expected.

Another limitation is due to variables, during the research limited numbers of variables were chosen and checked correlation between these factors. Based on these data, in the future, the qualitative study could be realized related to subjective attitude of participants. In addition, we could pay attention to socio demographic and professional information about participants to hypothesis correlations with the categories that are identified by this research.

The next limitation of this work's due to gender, so only male prisoners were involved, for future officers and female elderly inmates' attitude can be focused, too.

Considering this project as a first local experiment, in the future, we would like to expand this kind of survey to other prisons of regions with more participants.

Implications and future directions: Despite these limitations, this study is one of the first step to our understanding of the aging male prisoners and factors influence their QOL (quality of life). This research gives literature analysis about elderly inmates, their QOL, interpersonal relationship with family members and relatives, also with the workers and officers in the correctional facilities. The statistical part of the study testifies dependent and independent variables, correlation and regression between them, also social-emotional skills of officers. For future directions, considering limitation of the study the other variables need to be measured, and support program details could be explored.

Conflicts of Interest: The authors declare that there is no conflict of interest.

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