

# The Study on Effects and Efficiency of Cognitive Behavioral Treatment among Prisoners in India

<sup>1</sup>B. Leelesh Sundaram, <sup>2</sup>Niranjana.K

**ABSTRACT**--As a result of pressing recommendations made by NGOs and Human rights commission, the reforms taken by the legislature and executive abiding to the interventions of judiciary has led to implementation of cognitive behavioural treatments of prisoners as a step of reformation, which appears to be a suitable one in theory since prisoners have distorted cognitions. Various studies have put forth that cognitive behavioural treatments often has certain adverse effects for which categorized treatments are given. However research has failed to note these effects of cognitive behavioural treatment in the case of prisoners. Thus in this case it becomes mandatory to recognise the existence of effects of Cognitive behavioural treatment. At the same time rate of habitual offenders show a steady inclination in spite of reformation through cognitive behavioural treatment, which gives scope for ambiguity with relation efficiency of the current reformation practice. Hence this research is carried out to identify the effects of cognitive behavioural treatment among prisoners and its efficiency. By the virtue of non probability convenience sampling method with a sample size of and using statistical tools such as chi square and correlations it could be found out that prisoner undergoing cognitive behavioural treatments are subjected to deterrent effects arising out of frustration and anxiety which may include stress, depression and mood swings etc and also have deterrent flashbacks of the crimes or actions committed in past. The study helps in finding out that cognitive behavioural treatments lack efficiency. The recommendation put forth by this study is that Prisons should adopt performance and management techniques which are similar to the New York Police Department's COMPSTAT method for tracking the progress and promoting the safety of prisoners, which would thereby promote hygiene factors as laid down under the Herzberg – Two factor theory

**Key words**--prison, reformation, cognitive behavioural treatment, effects, India

## I. INTRODUCTION

In India, in the recent decade one can vividly identify the growing trend of commerce, arts, science and technology which have created a significant impact in the lives of citizens (Vanitha *et al.*, 2017). In this trend it is easy to identify the steady and significant development in characteristic behaviour of individual, where an

---

<sup>1</sup>4th Year, Saveetha School of Law, Saveetha Institute of Medical and Technical Sciences, SIMATS, Saveetha University, leelesh03@gmail.com, ph. no. 9092289877

<sup>2</sup>Asst. Prof. Saveetha School of Law, Saveetha Institute of Medical and Technical Sciences, SIMATS, Saveetha University, niranjanak.ssl@saveetha.com

individual has become more situationally aware and responsible. But on the contrary, there is also a steady rise in the number of offenders and those entering into the prison.

A prison is a place of confinement for a person guilty of an offence that shall be punished with imprisonment(Smith, 2014). The prison administration and system in India has been the subject of debate and discussion in India(Diaz, 1979). The Indian prison once caught the glare of global limelight as a result of their poor hygienic conditions , very low overall standards and habitual offenders(Nagla, 1989). With the pressing recommendations and efforts of the Human Rights group and various committees, the states were at a threshold to change the conditions of prisons and to curb the growth of habitual offenders(Nagla, 1989; Mooganuret *al.*, 2012). At the same time as a result of the bloom in therapeutic jurisprudence in India in the recent decades, reformation of offenders and convicts became a part of prison administration. Thus due to various amendments in the Prison Act and Prison Manual, the current decade prison has become a place of reformation and a place with equitable living standards(Holt, 1977).

As a part of reformation the Indian states have adopted various practices namely providing legal aid, education, sanitation, counselling and mediation(Tak, no date). Out of which the most common and universal method followed in all the prisons across India is counselling through cognitive behavioural treatment.

One of the most notable and common characteristics of a criminal offender is distorted cognition, misconception of fact, justifiability, behavioural distortion, ignorance and inevitable provocation apart from vendetta or intention. These characteristics may be seen through disrespect, lack of realisation and recidivism etc.... the most suitable treatment for individuals with the above said characteristics is cognitive behavioural treatment(Curley, Smout and Denson, 2019).

Cognitive behavioural treatment or therapy is a treatment offered to distorted minds that have negative thoughts and beliefs regarding self or the surroundings or both. In this treatment these negative patterns are converted into positive patterns by relating the negative with the reality through self interventions. This form of treatment is used in cases of obsessive compulsive disorders, depression and post traumatic stress disorders(Salomonsson *et al.*, 2019).

When this treatment is used over the cases suffering due to a variety of disorders mentioned above it is quiet candid to find that the patients face adverse effects, which are treated separately(Salomonsson *et al.*, 2019; Yin, Li and Zhou, 2019). But in the case of offenders or prisoners research has failed to note the effects faced by the prisoners as a result of cognitive behavioural treatment. In the current scope of law focusing on protection of overall well-being of individuals, it becomes mandatory to recognise the existence of effects of Cognitive behavioural treatment and its efficiency, since the rate of habitual offenders show a steady inclination in spite of reformation through cognitive behavioural treatment. Therefore this research **aims** to identify the effects of cognitive behavioural treatment among prisoners and its efficiency.

## II. Objectives

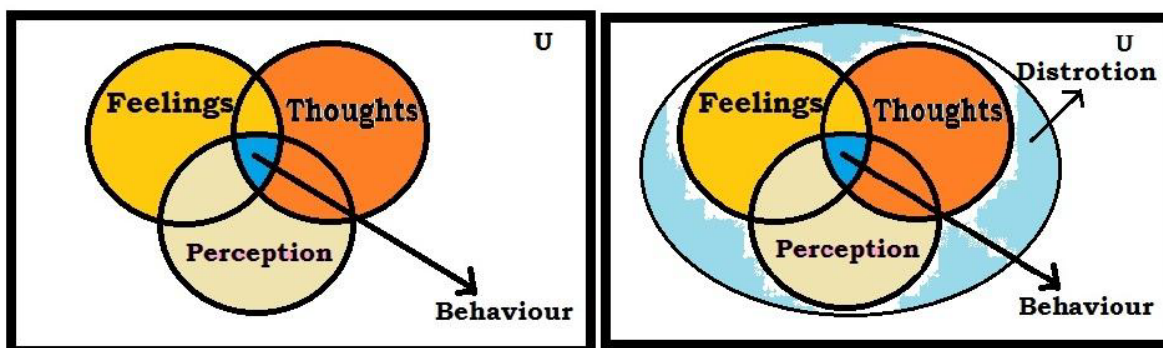
1. To know if there is any prevalence of adverse effects of cognitive behavioural treatment among prisoners.
  - to estimate if there is any difference in prevalence of adverse effects of cognitive behavioural treatment among prisoners. and gender

2. To identify various adverse effects of cognitive behavioural treatment among prisoners.
  - to determine if prisoners undergoing cognitive behavioural treatment are likely to show symptoms of frustration
  - to determine if prisoners undergoing cognitive behavioural treatment are likely to show symptoms of anxiety
  - to determine if prisoners undergoing cognitive behavioural treatment are likely to show symptoms of delusion of past(deterrent flashbacks)
3. To analyse the efficiency of the cognitive behaviour treatment
  - to determine if prisoners undergoing cognitive behavioural treatment show signs of recidivism
4. To compare the efficiencies of prisoners reformation in global context
5. To give effective recommendations for prisoner reformation

### III. REVIEW OF LITERATURE

#### *Design and Treatment through cognitive behavioural treatments*

Cognitive behavioral therapy, objective arranged psychotherapy treatment that takes a hands-on, viable way to deal with critical thinking(Turan, 2017). It will probably change examples of reasoning or conduct that are behind individuals' troubles, thus change the manner in which they feel. It is utilized to help treat a wide scope of issues in an individual's life(Turan, 2017; Abak and Güzel, 2019). Cognitive behavioral therapy can be thought of as a mix of psychotherapy and behavioral therapy. Cognitive-behavioral therapy acts to enable the individual to comprehend this are what's happening(Kadden, 1995). It encourages the person in question to step outside their programmed contemplations and test them out.



**Figure1:** depicting the difference of behavior of a normal individual and offender

Cognitive-behavioral therapy contrasts from numerous different sorts of psychotherapies since sessions have a structure, instead of the individual speaking openly about whatever rings a bell. Toward the start of the therapy, the client meets the therapist to depict explicit issues and to set objectives they need to move in the direction of(Watson and McMullen, 2005).

#### **IV. STEPS INVOLVED IN COGNITIVE BEHAVIOURAL TREATMENT**

***Step1: Distinguish upsetting circumstances or conditions in your life***

These may incorporate such issues as an ailment, separate, despondency, outrage or manifestations of a mental health issue. The offender and therapist may invest some energy choosing what issues and objectives that need to concentrate on.

***Step2: Become mindful of the offender/prisoner contemplations, feelings and convictions about these issues***

When the prisoner has distinguished the issues to take a shot at, therapist will urge him to share the contemplations about them. This may incorporate seeing what the prisoner educate him concerning an encounter (self-talk), translation of the importance of a circumstance, and convictions about himself, other individuals and occasions.

***Step3: Recognize negative or wrong reasoning***

To assist the prisoner with perceiving examples of reasoning and conduct that might be adding to his concern, therapist may request that him focus on his physical, passionate and social reactions in various circumstances.

***Step4: Reshape negative or wrong reasoning***

therapist will probably urge him to solicit yourself whether his view from a circumstance depends on reality or on an erroneous

***Step4: Impression of what's happening***

This progression can be troublesome. prisoner may have long-standing perspectives about his life and yourself. With practice, accommodating reasoning and personal conduct standards will turn into a habit and won't require as a lot of exertion.(Chen, 2016)

#### **V. INDIAN JUDICIARY'S INTERVENTION**

On account of Mohammed Giasuddin v. Province of Andhra Pradesh, A.I.R. 1977 S.C.1926, justice Krishna Iyer held that, Crime is a neurotic distortion that the criminal can commonly be reclaimed that the state needs to rehabilitates as opposed to avenge(Mooganur et al., 2012). The sub-culture that prompts hostile to social conduct must be countered not by undue remorselessness however by re-culturation for which transformation is fundamental. The judgment underlined on the Gandhian methodology of regarding wrongdoers as patients and remedial job of discipline. The Supreme Court subsequent to considering all the conditions of the appealing party coordinated that the sentence ought to be diminished to year and a half. The court additionally coordinated, protected parole discharge like clockwork for at any rate seven days interspersing the all out prison term and task of reasonable mental cum-manual work and installment of wages in jail(Mooganur et al., 2012; Guin, 2015). The

litigant was requested to pay fine of Rs. 1200/- to be made over to the casualty of trickiness under Section 357 of the Cr.P.C.

Further in *Sunil Batra v. Delhi Administration*, A.I.R. 1980 S.C.1579, it was noticed that Even the act of independent repression and isolation was profoundly debilitated by courts at numerous examples. The court unmistakably brought up that the prison specialists can't make prisoners to isolation and hard work. As to guarantee the prison rehearses the Supreme Court right now coordinated the area justices and sessions judges to visit prisons in their ward and bear the cost of powerful open doors for ventilating lawful complaints. They were to make speedy enquiries and make reasonable medicinal move. Accordingly the idea of legal policing was perceived by the Supreme Court through this judgment(Sarkar and Gupta, 2015).

In *Supdt. Focal Jail New Delhi v. Charulatha Joshi and another*, A.I.R. 1999 S.C. 1379, The Court held the confined right to meet the prisoners subject to their readiness to go to the equivalent. The opportunity of press individual to meet an under preliminary prisoner won't be indistinguishable that of the prisoner condemned to death. Incomparable Court commented that the privilege to meet a prisoner won't become an elite right as on account of life convict and it ought to be chosen justifies relying upon each case(Trivedi, 1987).

The Supreme Court distinguished nine significant issues burdened upon the prison framework, specifically, packing, delay in preliminary, torment and abuse, disregard of wellbeing and cleanliness, deficient nourishment and insufficient attire, prison indecencies, lack in correspondence, streamlining of prison visits and the board of outside prisons. Among this, an undesirable living reason inside the prison was distinguished by the Court as a serious issue, on account of *Ramamurthy v. Territory of Karnataka*, (1997) S.C.C. (Cri) 386(Neier and Rothman, 1991).

On account of *P. Bharathi v. Association Territory of Pondicherry and Others*, 2007 Cri. L. J. 1413, The severe encounters of the prisoners were made through a letter by one of the prisoners P. Bharathi of focal Prison, Puducherry to one of the Honorable Judges of Supreme Court. The letter was requested to be treated as a writ appeal. It discussed the poor clean condition and support inside the prison and furthermore limitations on the visit by family members of the prisoner. There was no can office inside the phone to answer the call nature during evening time. Two plastic pails with cover was accommodated this reason during evening time and in the following day morning, the basins containing excreta are made to be cleaned by the detainees of the phone on turn premise. This was made according to the current prison rules and the specialists acknowledged that the guidelines require an extreme change to fall in accordance with present day prerequisites. This judgment will assist with understanding the inconsistencies in state enactments just as the requirement for a unified legitimate system in directing the prison affairs(Bhushan, 1970).

## VI. STATEMENT OF PROBLEM AND RESEARCH QUESTIONS

The reforms taken by the legislature and executive abiding to the interventions of judiciary has led to implementation of cognitive behavioural treatments of prisoners as a step of reformation. Various studies have put forth that cognitive behavioural treatments often has certain adverse effects for which categorized treatments are given. However research has failed to note these effects of cognitive behavioural treatment in the case of prisoners. Thus in this case it becomes mandatory to recognise the existence of effects of Cognitive behavioural treatment. At

the same time rate of habitual offenders show a steady inclination in spite of reformation through cognitive behavioural treatment when compared to the global scenario where reformation of prisoners is followed, which gives an ambiguity with relation efficiency of the current reformation practice. Therefore this research is carried out with two research questions namely,

**R1:** whether there are and what are adverse effects of cognitive Behavioural treatment of Prisoners in India?

**R2:** whether the cognitive Behavioural treatment of Prisoners in India is efficient?

## **VII. HYPOTHESIS**

**H<sub>0</sub>:** The cognitive behavioural treatment of prisoners lack adverse effects and is efficient in India.

**H<sub>1</sub>:** The cognitive behavioural treatment of prisoners has adverse effects and is not efficient in India.

## **VIII. RESEARCH METHODOLOGY AND MATERIALS**

The purpose of carrying out this study is to identify the effects of cognitive behavioural treatments and its efficiency among prisoners. This is an indicative study and as the researcher intends to understand and identify in the effects of cognitive behavioural treatments among prisoners and its efficiency the study is divided into 2 categories –

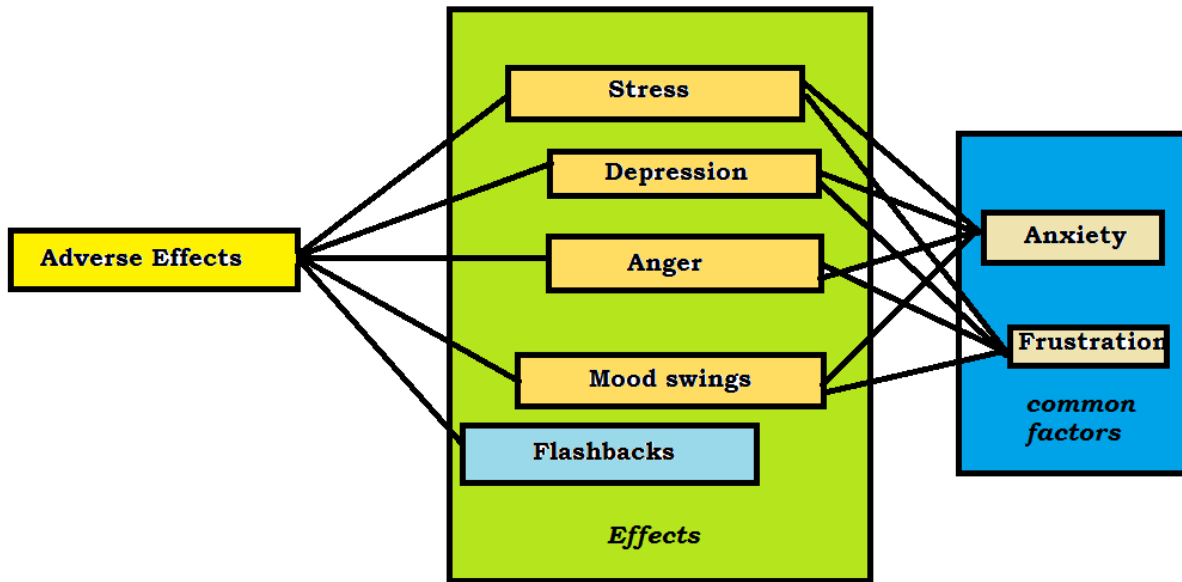
1. Effects of cognitive behavioural treatments among prisoners

A. Frustration and anxiety

B. deterrent flashbacks

2. Efficiency of cognitive behavioural treatment in prison reformation

The above two categories are intended to fulfill the research gap mentioned above. There are various proven adverse effects of cognitive behavioural treatments which include mood swings, flashbacks, depression, stress, anger etc. when a careful understanding of these side or adverse effects is taken into account. The most common factors that results in these factors is frustration and anxiety. On the other hand flashbacks are independent, as a result the first parameter(1a & 1b) is taken into account(explained in figure2), which would help in identifying the existence of adverse effects.



**Figure 2:** Explaining the common factors resulting in adverse effects and the independent effects

Efficiency of any work would be identified through the aim of the intended work. The aim of reformation through cognitive social treatment is to reduce the rate of habitual offenders and reform the individuals to lead a sustainable social life.

The study includes both qualitative as well as quantitative method, which includes analytic method. Present study is based on Primary as well as Secondary sources of data, where the Primary information are collected by conducting interviews with prisoners and Secondary Sources collected through literature of N.G.O. reports, Government Reports, Websites, Research Articles, Newspapers. The Variable used can be classified into two types namely, Independent variable as gender of prisoner and Dependent variable namely, Opinion on frustration and anxiety as effect of cognitive behavioural treatment among prisoners, Opinion on deterrent flashbacks as an effect of cognitive behavioural treatment among prisoners and Opinion on signs of recidivism in prisoners undergoing cognitive behavioural treatment.

The study is carried out with the help of non probability convenience sampling method, where 703 respondents are male, 853 respondents are females and 90 respondents belong to other community. In this study to determine the validity and the determine the study results chi- square analysis method is used. when the pearson value of 'Asymp. Sig' value is less than 0.05, the alternate hypothesis is considered and when the pearson value 'Asymp. Sig' value is greater than 0.05, the null hypothesis is accepted. For the determining the hypothesis the variables are cross tabulated.

## IX. SAMPLE SIZE AND FREQUENCY

**Table1:** Description of frequency and percentiles

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	male	703	42.7	42.7	42.7
	female	853	51.8	51.8	94.5
	others	90	5.5	5.5	100.0
	Total	1646	100.0	100.0	

## X. CONCEPT ANALYSIS AND RESULTS

### 1. Effects of cognitive behavioural treatments among prisoners

#### a. Frustration and anxiety

**H<sub>0</sub>:** The prisoners undergoing cognitive behavioural treatments do not face frustration and anxiety as a result of the treatment.

**H<sub>1</sub>:** The prisoners undergoing cognitive behavioural treatments face frustration and anxiety as a result of the treatment.

**Table 2:** Opinion on frustration and anxiety as effect of cognitive behavioural treatment among prisoners

		Opinion on frustration and anxiety as effect of cognitive behavioural treatment among prisoners		
		yes	no	Total
Gender	male	443	260	703
	female	499	354	853



	others	47	43	90
Total		1079	567	1646

**Table 3:**Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	16.586 <sup>a</sup>	2	.066
Likelihood Ratio	16.319	2	.066
Linear-by-Linear Association	15.518	1	.012

The asymptotic significance value of pearson chi square is greater than 0.05, which proves that there is no relationship between the independent and dependent variable. As a result, proving to the fact that, all respondents unanimously agree that frustration and anxiety are commonly seen in prisoners undergoing cognitive behavioural treatments. Since there is no such relationship between the 2 variables,the null hypothesis is rejected.

***b. deterrent flashbacks***

**H<sub>0</sub>:** The prisoners undergoing cognitive behavioural treatments do not have deterrent flashbacks as a result of the treatment.

**H<sub>1</sub>:** The prisoners undergoing cognitive behavioural treatments have deterrent flashbacks as a result of the treatment.

**Table 4:** Opinion on deterrent flashbacks as an effect of cognitive behavioural treatment among prisoners

		Opinion on deterrent flashbacks as an effect of cognitive behavioural treatment among prisoners			Total
		yes	no	maybe	
Gender	male	305	206	192	703
	female	223	427	203	853
	others	31	46	13	90
Total		559	679	408	1646

**Table 5 :Chi-Square Tests**

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	82.262 <sup>a</sup>	4	.000
Likelihood Ratio	84.316	4	.000
Linear-by-Linear Association	1.621	1	.203
N of Valid Cases	1646		

The asymptotic significance value of pearson chi square is greater than 0.05, which proves that there is no relationship between the independent and dependent variable. As a result, proving to the fact that, all respondents unanimously agree that prisoners undergoing cognitive behavioural treatment have deterrent flashback, in relation to the offence committed by them. Since there is no such relationship between the 2 variables, the null hypothesis is rejected.

**2. Efficiency of Cognitive Behavioural Treatment**

**H<sub>0</sub>:** The prisoners undergoing cognitive behavioural treatments do not show signs of recidivism

**H<sub>1</sub>:** The prisoners undergoing cognitive behavioural treatments do show signs of recidivism

**Table 6:**Opinion on signs of recidivism in prisoners undergoing cognitive behavioural treatment

		Opinion on signs of recidivism in prisoners undergoing cognitive behavioural treatment		Total
		yes	no	
. Gender	male	373	330	703
	female	431	422	853
	others	54	36	90
Total		840	806	1646

**Table 7 :** Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)

Pearson Chi-Square	5.625 <sup>a</sup>	2	.060
Likelihood Ratio	5.649	2	.059
Linear-by-Linear Association	5.185	1	.023
N of Valid Cases	1646		

The asymptotic significance value of pearson chi square is greater than 0.05, which proves that there is no relationship between the independent and dependent variable. As a result, proving to the fact that, all respondents unanimously agree that prisoners undergoing cognitive behavioural treatment show signs of recidivism. Since there is no such relationship between the 2 variables, the null hypothesis is rejected.

## XI. DISCUSSIONS

From the current study it is found out that The prisoners undergoing cognitive behavioural treatments face frustration and anxiety as a result of the treatment. The prisoners undergoing cognitive behavioural treatments have deterrent flashbacks as a result of the treatment. The prisoners undergoing cognitive behavioural treatments do show signs of recidivism. The above said findings could be asserted briefly because there is no contrasting opinion between the respondents, which could be ascertained from the inference of having no relationship between variables.

The results are derived using parameters such as Frustration and anxiety,deterrent flashbacks and Efficiency of Cognitive BehaviouralTreatment. These parameters are identified using a categorised analysis performed above, which help in statistically identifying the prevalence of effects and the efficiency.

This study is influenced by various factors which include, situational awareness and acquaintance of facts because these factors are environmental elements and events with respect to time or space, which affects the comprehension of their meaning, and the projection of individual attitude.

When the current study is compared with global scenario the situation is that Inside Britain, jail change was led by the Quakers, and specifically, Elizabeth Fry during the Victorian Age(Chen, 2016; Karamalidou, 2017b). Elizabeth Fry visited jails and recommended fundamental human rights for detainees, for example, protection and showing detainees an exchange. Fry was especially worried about ladies' privileges. Parliament, coming to understand that a critical piece of detainees had come to execute wrongdoings because of psychological instability, passed the County Asylums Act (1808). This made it workable for Justice of the Peace in every territory to fabricate and run their own poor person asylums(Karamalidou, 2017)

Since the 1960s the jail populace in the US has risen relentlessly, in any occasion, during periods where the crime percentage has fallen. This is mostly a result of noteworthy changes in condemning practices due to a reprobation of tolerant arrangements in the late sixties and mid seventies and statements that rehabilitative purposes don't work. As an outcome condemning commissions began to build up least just as greatest condemning rules, which have diminished the carefulness of parole specialists and furthermore lessened parole supervision of discharged detainees. Another factor that additional to the expansion of imprisonments was the Reagan organization's "War On Drugs" during the 1980s. This War expanded money spent on cutting down the amount of unlawful medications in the United States. Therefore, cure captures expanded and detainment facilities turned out to be progressively logically swarmed(Federal Research Division Library of Congress and Hudson, 2013).

By 2010, the United States had a bigger number of detainees than some other country and a more noteworthy level of its populace was in jail than in some other country on the planet. "Mass detainment" turned into a genuine social and money related issue, as every one of the 2.3 million American detainees costs a normal of about \$25,000 each year(Munochiveyi, 2014; DeHart, Shapiro and Clone, 2018). Recidivism stayed high, and valuable projects were consistently cut during the downturn of 2009–2010. In 2011, the U.S. Incomparable Court in *Brown v. Plata* kept up the arrival of thousands of California detainees in light of California's failure to give unavoidably commanded degrees of healthcare(Munochiveyi, 2014).

Europe

After war changes focused on the requirement for the state to tailor discipline to the individual sentenced criminal(Morris and Rothman, 1995). In 1965, Sweden ordered another criminal code accentuating non-institutional options in contrast to discipline including restrictive sentences, probation for first-time guilty parties and the more broad utilization of fines. The utilization of probation caused a sensational decrease in the number ladies carrying out long haul punishments: in France the number tumbled from 5,231 out of 1946 to 1,121 out of 1980. Probation spread to most European nations however the degree of reconnaissance fluctuates. In the Netherlands, strict and altruistic gatherings are answerable for a significant part of the trial care(Committee on Causes and Consequences of High Rates of Incarceration et al., 2014). The Dutch government puts vigorously in remedial staff, having 3,100 for 4,500 detainees in 1959(Gavrielides, 2007). (comparison listed in Table5).

**Table8:** Explains the global comparison

Country	Reformation Practice	Application
United Kingdom	ensuring Hygiene social reformation Cognitive behavioural treatment	attitude reconstruction counselling education
Europe	Penal reformation Hygiene	Legal aid Counselling

	Social reformation Cognitive behaviour treatment	Education Occupation Social communications
<b>United States</b>	Hygiene Social reformation Cognitive behaviour treatment Penal reformation	Legal aid Counselling Education Occupation Social communications
<b>France</b>	Penal Reformation	

The current study put forth the recommendation as combination therapies need to be used for reformation and social communication practices must be included in the process of reformation.

## **XII. FINDINGS**

1. The prisoners undergoing cognitive behavioural treatments face frustration and anxiety as a result of the treatment.
2. The prisoners undergoing cognitive behavioural treatments have deterrent flashbacks as a result of the treatment.
3. The prisoners undergoing cognitive behavioural treatments do show signs of recidivism.

## **XIII. RECOMMENDATIONS**

1. Indian Prisons and jails should use performance and management techniques, which are similar to the New York Police Department's famous COMPSTAT to track progress in promoting the safety of prisoners, which would thereby promote hygiene factors as laid down under the Herzberg – Two factor theory
2. Embracing the notion that the individuals in prison are our neighbors, the children of our community and deserving of our concern.
3. Combination therapies need to be used for reformation and social communication practices must be included in the process of reformation.

## **XIV. CONCLUSION**

Based on the above inferences and findings it could be stated that The prisoners undergoing cognitive behavioural treatments face frustration and anxiety as a result of the treatment. The prisoners undergoing cognitive behavioural treatments have deterrent flashbacks as a result of the treatment. These factors prove that prisoner undergoing cognitive behavioural treatments are subjected to deterrent effects arising out of frustration and anxiety

which may include stress, depression and mood swings etc and also have deterrent flashbacks of the crimes or actions committed in past. The study helps in finding out that cognitive behavioural treatments lack efficiency. Thus the study concludes as the cognitive behavioural treatment of prisoners has adverse effects and is not efficient in India.

## REFERENCES

1. Abak, E. and Güzel, H. (2019) 'Cognitive Behavioral Therapy in Choking Phobia: Case Report', *Journal of Cognitive-Behavioral Psychotherapy and Research*, p. 1. doi: 10.5455/jcbpr.26078.
2. Bhushan, V. (1970) *Prison Administration in India: With Special Reference to Uttar Pradesh*. Delhi : S. Chand.
3. Chen, D. D. (2016) *Stress Management and Prevention: Applications to Daily Life*. Routledge.
4. Committee on Causes and Consequences of High Rates of Incarceration *et al.* (2014) *The Growth of Incarceration in the United States: Exploring Causes and Consequences*. National Academies Press.
5. Curley, S., Smout, M. F. and Denson, L. A. (2019) 'Does Behavioural Activation Lack Credibility Among Those Who Need It Most? A Comparison of Responses to Rationales for Behavioural Activation and Schema Therapy', *Behavioural and Cognitive Psychotherapy*, pp. 493–498. doi: 10.1017/s135246581800067x.
6. DeHart, D., Shapiro, C. and Clone, S. (2018) "'The Pill Line Is Longer Than the Chow Line": The Impact of Incarceration on Prisoners and Their Families', *The Prison Journal*, pp. 188–212. doi: 10.1177/0032885517753159.
7. Diaz, S. M. (1979) 'Prison Administration in India', *Indian Journal of Public Administration*, pp. 120–148. doi: 10.1177/0019556119790106.
8. Federal Research Division Library of Congress and Hudson, R. A. (2013) *The Sociology and Psychology of Terrorism: Who Becomes a Terrorist and Why? : a Report*. Createspace Independent Pub.
9. Gavrielides, T. (2007) *Restorative Justice Theory and Practice: Addressing the Discrepancy*. Criminal Justice Press.
10. Guin, S. (2015) 'Prison Personnel and HIV: Views and Experiences', *Prison Inmates Living with HIV in India*, pp. 81–93. doi: 10.1007/978-3-319-15566-1\_5.
11. Holt, N. (1977) 'Prison Management in the Next Decade', *The Prison Journal*, pp. 16–30. doi: 10.1177/003288557705700203.
12. Kadden, R. (1995) *Cognitive-behavioral Coping Skills Therapy Manual: A Clinical Research Guide for Therapists Treating Individuals with Alcohol Abuse and Dependence*. DIANE Publishing.
13. Karamalidou, A. (2017a) 'Human Rights in Dutch Prisons: Prisoners' Views', *Embedding Human Rights in Prison*, pp. 151–187. doi: 10.1057/978-1-137-58502-8\_6.
14. Karamalidou, A. (2017b) 'Human Rights in English Prisons: Prisoners' Views', *Embedding Human Rights in Prison*, pp. 115–150. doi: 10.1057/978-1-137-58502-8\_5.
15. Mooganur, V. V. *et al.* (2012) 'A Study of Prison System in India', *International Journal of Scientific*

- Research*, pp. 487–490. doi: 10.15373/22778179/july2014/153.
16. Morris, N. and Rothman, D. J. (1995) *The Oxford History of the Prison: The Practice of Punishment in Western Society*. Oxford University Press, USA.
  17. Munochiveyi, M. B. (2014) 'Introduction: Suffering for the Nation: The Prison as a Site of Struggle during Zimbabwe's Liberation War', *Prisoners of Rhodesia*, pp. 1–25. doi: 10.1057/9781137482730\_1.
  18. Nagla, B. K. (1989) 'Prison Administration in India', *Indian Journal of Public Administration*, pp. 1011–1021. doi: 10.1177/0019556119890414.
  19. Neier, A. and Rothman, D. J. (1991) *Prison Conditions in India*. Human Rights Watch.
  20. Salomonsson, S. *et al.* (2019) 'Predictors of outcome in guided self-help cognitive behavioural therapy for common mental disorders in primary care', *Cognitive behaviour therapy*, pp. 1–20.
  21. Sarkar, S. and Gupta, S. (2015) 'A case study on prison conditions for young children of imprisoned mothers in a selected prison of Uttar Pradesh, India', *Indian Journal of Psychiatric Nursing*, p. 38. doi: 10.4103/2231-1505.260569.
  22. Smith, P. S. (2014) 'When the Innocent are Punished: Prison, Society and the Effects of Imprisonment', *When the Innocent are Punished*, pp. 227–233. doi: 10.1057/9781137414298\_17.
  23. Tak, P. (no date) 'Legal Aid: A Boon for the Indian Legal System', *SSRN Electronic Journal*. doi: 10.2139/ssrn.2013233.
  24. Trivedi, B. V. (1987) *Prison administration in India: model-prison programmes in U.P.*
  25. Turan, Ö. (2017) 'Family Physicians May Benefit From Cognitive Behavioral Therapy Skills in Primary Care Setting', *Journal of Cognitive-Behavioral Psychotherapy and Research*, p. 1. doi: 10.5455/jcbpr.263212.
  26. Vanitha, D. *et al.* (2017) 'Recent Trends in the Marketing Strategies of Life Insurance Corporation of India', *International Journal of Scientific Research and Management*. doi: 10.18535/ijstrm/v5i11.07.
  27. Watson, J. C. and McMullen, E. J. (2005) 'An Examination of Therapist and Client Behavior in High- and Low-Alliance Sessions In Cognitive-Behavioral Therapy and Process Experiential Therapy', *Psychotherapy: Theory, Research, Practice, Training*, pp. 297–310. doi: 10.1037/0033-3204.42.3.297.
  28. Yin, M., Li, Z. and Zhou, C. (2019) 'Experience of stigma among family members of people with severe mental illness: A qualitative systematic review', *International journal of mental health nursing*. doi: 10.1111/inm.12668.
  29. Ratnikova, I.A., Gavrilova, N.N., Bayakyshova, K., Kosheleva, L.A., Belikova, O.A. Antagonistic activity of lactic acid bacteria in relation to mycobacterium tuberculosis (2018) *International Journal of Pharmaceutical Research*, 10 (4), pp. 734-737. <https://www.scopus.com/inward/record.uri?eid=2-s2.0-85059893432&partnerID=40&md5=c117ac625fc4b4fae7c60a7db3217901>
  30. Wen, K.L., Chang, K.H., & Shen, Y.C. (2019). The Evaluation of Automobile in Germany via Globalization Grey Relational Grade. *The SIJ Transactions on Computer Networks & Communication Engineering (CNCE)*, 7(1), 1-6.
  31. Rajesh, R., Jesus Sandal Vinibha, G., Kalaimathi, K., Kamalakkanni, P., & Kamatchi, V. (2019). NFC



Identification System for Fuel Management. *The SIJ Transactions on Computer Networks & Communication Engineering (CNCE)*, 7(4), 1-6

32. Kaliraj, S., Chandrasekar, N. Spectral recognition techniques and MLC of IRS P6 LISS III image for coastal landforms extraction along South West Coast of Tamilnadu, India (2012) *Bonfring Int J Adv Imag Process*, 2 (3), pp. 01-07.
33. Magesh, N.S., Chandrasekar, N., Kaliraj, S. A GIS based automated extraction tool for the analysis of basin morphometry (2012) *Bonfring International Journal of Industrial Engineering and Management Science*, 2 (1), pp. 32-35.