

REHABILITATION ACTIVITIES AND MENTAL HEALTH OF INMATES IN CORRECTIONAL CENTRES IN CROSS RIVER STATE, NIGERIA: A PREDICTIVE STUDY

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Abstract

The study examined the prediction of rehabilitation activities on mental health of inmates in correctional centres in Cross River State, Nigeria. Using a correlational design, the population was 1,087 inmates in six correctional centres in Cross River State. Sampling was done in multiple stage. 480 inmates were sampled with the aid of Taro Yamane sample determination formula. The instrument for the study was a structured questionnaire called Rehabilitation Activities and Mental Health Questionnaire (RAMHQ) with 60 items which was validated by experts. A trial test was conducted using Cronbach Alpha Reliability Estimate and the coefficient for the sub-scales ranged from .80 to .88. The Multiple regression analyses was employed to test the hypothesis at .05 level of significance with the aid of SPSS. Results revealed that, social rehabilitation activities, substance use disorder rehabilitation activities, recreational rehabilitation activities, vocational rehabilitation activities, health/wellbeing rehabilitation activities, emotional rehabilitation activities and behavioural modification activities jointly/significantly predict mental health of inmates in correctional centres in Cross River State, Nigeria. The study recommends among others that correctional centres should develop and implement social skills training programmes to enhance inmates' communication and interpersonal skills; encourage group therapy and support groups to foster positive relationships among inmates and provide opportunities for inmates to engage in community service and volunteer work to promote social responsibility.

Keywords; Rehabilitation Activities, Mental Health, Inmates, Correctional Centres, Cross River State

Introduction

Inmates in correctional centres often experience a high prevalence of mental health disorders due to various factors such as past traumas, substance use disorders, social marginalization and stress in incarceration environment. More so, in recent times, armed robbery, kidnapping, drug trafficking, fraud, traffic offence, rape, murder and theft have become more serious to tackle

as they have manifested with new methods and techniques. other nefarious activities like bombing, hijacking and life-threatening incidences are worrisome. These high rates of criminal behaviour and manifestation with new methods and techniques are of great concern to the society (Mayange, Emmanuel & Levi, 2022).

The prison environment itself is characterized by overcrowding, isolation, lack of autonomy, aggression, withdrawal, suicidal tendencies and sometimes violence, few facilities have adequate numbers of trained psychiatrists, psychologists, or social workers relative to their inmate populations. Instead of therapeutic interventions, disciplinary measures such as solitary confinement are often used, which may worsen psychological distress, all these necessitate the integration of comprehensive rehabilitation activities to cushion the effect of the mental health of inmates in these correctional centres (Orokpo & Sunday, 2023). The effect of poor mental health goes beyond the prison walls. Inmates struggling with unresolved psychological issues are less likely to engage in rehabilitation programmes and more likely to reoffend upon release. Thus, mental health care is not only a matter of wellness but also a critical factor in reducing recidivism and promoting safer environment. To address these observed needs, several measures must be prioritized. First, routine mental health care screening at the point of admission should be implemented to allow early detection. Second, the involvement of qualified mental health professionals must be expanded within correctional health systems. Third, therapeutic programmes such as group counselling, anger management, and addiction recovery should replace punitive approaches to behavioural issues. Fourth, correctional officers require training to identify and respond appropriately to inmates' mental health concerns. Finally, support must continue beyond release to ensure continuity of care and successful reintegration into the society. The mental health of inmates is a central component of their wellness and rehabilitation. Correctional centres must evolve from being mere detention facilities into institutions of reform that address the holistic needs of those in custody. By prioritizing mental health care and wellness, societies can foster true rehabilitation, reduce reoffending, and uphold the dignity of individuals behind bars.

Globally, rates of criminal tendencies are estimated at an average of 50% and, unlike recorded crime rates in the general population, rates of recidivism appear to be on the rise. USA's rates of recidivism are estimated to be about two-thirds, which is higher than the global average. As a result of this, crimes by past convicts alone account for a significant share of the current and impending crimes. Studies show that there is a correlation between criminal behaviour and the offenders mental state, which is important in understanding the high rates of recidivism (Krasenberg & Wouterse, 2019). Thus, imprisonment plays a vital role in curbing crime and insecurity in any nation, as well as correcting deviant behaviour among law breakers. However, the psychological and social (mental health) harm resulting from incarceration among prisoners, is an area of concern (Völker & Psych, 2016).

The unfortunate situation here is that, the rehabilitation programmes such as health system, basic literacy education, counselling activities, religious programmes, skill acquisition and agricultural programmes of prison inmates in Nigeria and many African nations has remained a mirage. An observation of the Custodial Centres of Nigeria Correctional Services, Cross River State Command systems indicate a gloomy picture of weakness in performance (Anyogo, 2024). Surprisingly, the penal institution is underfunded and the small allocation for inmates'

rehabilitation are sometimes diverted and embezzled by corrupt prison administrators, while offenders are left in crowded cells where they daily deteriorate socially, morally, physically, psychologically and intellectually. Despite Nigeria's progress on democratic, economic and political reforms, Nigeria's Correctional Services are yet to make appreciable impact on the welfare of the inmates. A recurring debate within contemporary academic circles, criminologists, health workers and prison experts, is to ensure an appropriate health template for proper prison administration that will reflect its objectives. Even though crime and other vices need to be deterred, it should be to the extent that inmates rehabilitation should be adequately taken care of during and after imprisonment; it is therefore needful to be logical and rational in terms of rehabilitation programmes delivery while in custody (Orokpo, Sunday & Neji, 2024). Treatment and special protection of the rights of incarcerated people in prisons are advocated for under the Sustainable Development Goals (SDG) (3,4,5,6, 8,10 and 16) which stress, we will "leave no one behind. Despite the SDGs and these international guidelines, conditions pertaining to the ill treatment of young people in criminal justice systems across the world continue to warrant attention, with systemic abuse of detained young people, detention of young people with adults, and deplorable conditions continuing to be observed.

Therefore, mental health is a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community. It has intrinsic and instrumental value and is integral to our well-being. Mental health encompasses our emotional, psychological, and social well-being. It affects how we think, feel, and act, and influences how we handle stress, relate to others, and make choices. Good mental health is crucial for overall health and quality of life, and it's important to prioritize self-care and seek help when needed. Good mental health is when you feel you can manage day to day stresses, work productively, use your abilities and contribute to society. Good mental health is a key part of feeling happy with life, being connected to other people and having a sense of meaning (Forry, Ashaba & Rukundo, 2019).

In a report by the World Health Organization (WHO, 2021), depression is listed among the leading causes of disability worldwide, especially among young adults. Mental health is particularly a problem for prison and jail inmates, of whom a majority are young male adults. The identification of mental illness in a prisoner can happen at different stages for different individuals before or during time in custody, including where: the police are called if a person in a mental health crisis behaves in a way that worries or affects others; an acutely mentally ill person in the process of being prosecuted is held on remand because no mental health bed is available in the community; a person is suitable for a community order that includes a requirement for mental health treatment but that treatment is not available and the sentencer decides on prison instead; a person arrives in prison with a mental illness recognised in the community but of which the prison service is unaware; a person was unaware of having a mental illness, or was aware of it but concealed it from others; or someone becomes mentally ill in prison (House of Commons, 2021).

Although no population group is immune to mental health disorders, some population groups maybe at higher risks of developing mental health disorders. The prison populations may be among the high-risk group of population for developing mental health disorders. In reality inmates were found to have higher levels of mental health disorders than the general population

(Forry, Ashaba & Rukundo, 2019). The high prevalence of mental health disorders in the prison population could be attributed to pre-prison situations and/or to the prison environment. On the one hand, individuals with mental health disorders have higher chances of incarcerations for they are more likely to break the law (Museve, Charles-Helm & Peter, 2020). On the other hand, the prison environment characterized by overcrowding, violence, isolations, among others could increase the probability of inmates developing mental health disorders (Ministry of Health National Mental Health Strategy, 2022; Museve, Charles-Helm & Peter, 2020; Habtamu, 2020).

The impacts of prison on the mental health of inmates and on their family members are theoretically ambiguous, making this an interesting empirical question. On the one hand, prisons can help improve mental health if prisoners are able to obtain better access to health care than they could otherwise afford, given their average lower incomes and less formal employment. Prisons can also help inmates stay drug-free, which can improve their mental health (Sunday, Beshel & Chidozie, 2025). On the other hand, the lack of freedom, poor incarceration conditions (example overcrowding, poor hygiene and nutrition) and increased (threat of) violence in prison can adversely affect inmate mental health. Further, beyond the inmates themselves, the potential effects of prison on inmate mental health can spill over to the health of close family members through increased trauma, stigma, and financial hardship when the partner, parent or child serves prison time. That said, prisons can also remove a potential negative influence from the lives of their family members (Bhuller, Khoury & Loken, 2023). Lack of such understanding could have dire consequences. Inmates with mental health disorders are at higher risk of suicide, self-harm violence, victimization, premature death and reoffending (Museve, Charles-Helm & Peter, 2020; Fazel, Hayes, Bartellas, Clerici & Trestman, 2016). Besides, the Ministry of Health considers the inadequate services in prisons, particularly the mental health service, as important factor that increased the risk of mental health disorders in prisons (Ministry of Health National Mental Health Strategy, 2022).

However, the prison system's primary objective is to rehabilitate offenders, empowering them to reintegrate into society upon release. Thus, the harsh realities of incarceration often exacerbate mental health issues, undermining rehabilitation efforts. Effective social rehabilitation and mental health support could be crucial for inmates' successful reintegration. Social rehabilitation programmes aim to address these challenges through various strategies, including counselling and therapy. Research has demonstrated that individual and group counselling sessions help inmates cope with emotional distress and develop coping mechanisms. Education and vocational training also play a critical role in enhancing self-esteem and employability, reducing recidivism rates (Haney, 2023).

The prevalence of substance use disorders and mental health issues among inmates is a pressing concern within the criminal justice system. Research indicates that approximately 75% of inmates struggle with substance use disorders, while 50% experience mental health issues. This alarming comorbidity underscores the need for effective rehabilitation programmes addressing both concerns. Substance use disorders and mental health issues often co-occur, exacerbating symptoms and increasing recidivism rates. Depression, anxiety, and post-traumatic stress disorder (PTSD) are common mental health conditions among inmates struggling with substance use disorders. Integrated treatment programmes, combining substance use disorders

and mental health interventions, have shown promising results (Lamb & Weinreb, 2015). Cognitive-behavioral therapy (CBT) is an effective approach in reducing substance use and mental health symptoms. Medication-assisted treatment (MAT) has also proven successful in addressing opioid use disorders. Peer support groups foster social support and community among inmates, promoting rehabilitation.

Imprisonment could have devastating effects on mental health, triggering or exacerbating anxiety, depression, and post-traumatic stress disorder (PTSD) due to the restrictive environment, lack of autonomy, and social isolation. However, recreational activities have been shown to promote mental health and well-being among inmates. Research consistently demonstrates that participation in recreational programmes reduces symptoms of anxiety and depression, improves mood, and enhances overall mental health. Physical exercise, a key component of recreational rehabilitation, has been found to alleviate symptoms of anxiety and depression while improving mood. Creative therapies, such as art, music, and writing, provide an outlet for emotional expression and coping. Social recreation, including team sports and group games, fosters social skills and communication among inmates. Mindfulness programmes, incorporating meditation and yoga, reduce stress and improve emotional regulation (Angell & Patterson, 2017; Ross & Fabiano, 2017).

Custodial sentence may exacerbate mental health issues, including anxiety, depression, and post-traumatic stress disorder (PTSD). Vocational/career counselling plays a vital role in promoting mental health and rehabilitation among inmates. Research has consistently shown that employment and educational opportunities reduce recidivism rates, improve mental health outcomes, and enhance overall well-being. Effective vocational/career counselling addresses inmates' specific needs, fostering a sense of purpose and motivation. Job training and placement services provide inmates with practical skills, increasing their employability upon release. Educational programs and certification opportunities further enhance inmates' prospects, leading to improved self-esteem and motivation. Vocational/career counselling also addresses mental health concerns, alleviating symptoms of anxiety and depression (Harris, 2016). By providing ongoing support and counselling, corrections facilities can foster a sense of purpose and motivation among inmates (Kulig, 2017). The benefits of vocational/career counselling are numerous: reduced recidivism rates, improved mental health outcomes, increased self-esteem, and enhanced employability.

Also, the intersection of physical and mental health is essential for inmates' overall well-being. Health/wellness rehabilitation programmes address the complex interplay between physical health, mental health, and substance use disorders, promoting holistic rehabilitation. Research demonstrates that health/wellness programmes reduce recidivism rates, improve mental health outcomes, and enhance overall quality of life. Effective programmes provide medical care, nutrition and fitness, education and substance use disorder treatment. Mental health concerns are addressed through counselling, therapy, mindfulness, and relaxation techniques. The benefits of health/wellness rehabilitation are multifaceted. Improved physical and mental health reduces recidivism rates. Health/wellness programmes alleviate symptoms of anxiety and depression, enhancing overall well-being. Social support groups foster community and social connections, crucial for rehabilitation. (Kropp, 2015; Hiller, 2017).

Further, emotional rehabilitation is a fundamental aspect of inmate rehabilitation, addressing the complex emotional needs that underlie mental health issues. Incarceration can exacerbate emotional distress, triggering or intensifying anxiety, depression, and post-traumatic stress disorder (PTSD). Effective emotional rehabilitation programmes promote emotional regulation, coping skills, and overall mental well-being. Cognitive-behavioural therapy (CBT) is a valuable approach, helping inmates identify and manage negative thought patterns. Mindfulness-based interventions enhance emotional regulation and reduce stress. Emotional intelligence training develops self-awareness, empathy, and social skills. Group therapy fosters social support and community among inmates, crucial for rehabilitation (Landrum, 2022). Similarly, behaviour modification counselling offers a transformative approach to addressing these issues, promoting positive change and rehabilitation (Landrum, 2022). This evidence-based approach integrates cognitive-behavioral therapy (CBT), positive behavioral supports (PBS), social learning theory, and mindfulness-based interventions to foster emotional regulation, coping skills, and pro-social behavior. CBT, a cornerstone of behavioral modification counselling, identifies and challenges negative thought patterns. Positive behavioural support reinforces positive behaviour and reduces problem behaviour. Social learning theory encourages observation, imitation, and reinforcement of pro-social behaviour. Mindfulness-based interventions enhance emotional regulation and reduce stress (Samuelson, 2017). It is against this background that the researcher wishes to find out the prediction of rehabilitation activities on mental health of inmates in correctional centres in Cross River State, Nigeria.

The purpose of this study was to find out the prediction of rehabilitation activities on mental health of inmates in correctional centres in Cross River State, Nigeria.

The research question raised was to what extent do social rehabilitation activities, substance use disorder rehabilitation activities, recreational rehabilitation activities, vocational/career rehabilitation activities, health/wellbeing rehabilitation activities, emotional rehabilitation activities and behaviour modification activities jointly predict mental health of inmates in correctional centres?

The hypothesis that guided this study was social rehabilitation activities, substance use disorder rehabilitation activities, recreational rehabilitation activities, vocational rehabilitation activities, health/wellbeing rehabilitation activities, emotional rehabilitation activities and behavioural modification activities do not jointly predict mental health of inmates in correctional centres.

Methodology

Correlational design was adopted for this study. A correlational research design investigates relationships between variables without the researcher controlling or manipulating any of them. Sunday, Obambon and Udemba (2023) averred that a correlation reflects the strength and/or direction of the relationship between two (or more) variables. The direction of a correlation can be either positive or negative.

The population of this study was made up of all inmates in correctional centres in Cross River State. The data obtained from the State Headquarters of Correctional Centres, Calabar as at

November 2026 showed that there are 1,087 inmates in correctional centres in Cross River State. This study employs a stratified sampling method to draw the correctional centres and respondents. Stratified sampling is a technique that involves dividing the correctional centres in Cross River State into strata based on location called senatorial district and randomly select a subset of correctional centres from each stratum. Finally, simple random sampling technique was used to select the inmates through hat and draw method in the six correctional centres in Cross River State. This approach enabled the researcher to capture the diversity of experience and perspective across the different zones. The study ensured that within the selected centres, inmates were randomly selected using the random sampling technique, this involved selection of specific number of inmates from each correctional centres and also ensured a mix of male and female inmates. The researcher sampled 480(44.15%) inmates randomly selected across correctional centres in Cross River State, Nigeria. All the inmates selected served as both unit of observation and unit of analysis.

The Rehabilitation Activities and Mental Health Questionnaire (RAMHQ) with 60 items was used to collect data. Section A with three items elicited information on inmate's sex, age, number of years under incarceration while section B with 57 items provided information on rehabilitation activities (42 items) and mental health of inmates (15 items). Section B of the instrument was modified with a Likert type 4-point rating scale of Strongly Agree (SA), Agree (A), Disagree (D) and Strongly Disagree (SD) with weight 4,3,2 and 1 for all positively worded items and weight 1,2,3 and 4 for all negatively worded items respectively.

In order to determine the validity of the instrument, the instrument after being developed by the researcher was presented to three experts in the field of Guidance and Counselling and Measurement and Evaluation for vetting and editing of the research items. Out of 70 items that was presented to them, 13 was removed while 57 was modified and adopted for use. With this, the instrument was duly content and face validated.

To ensure the reliability of the instrument a trial test was carried out using it on 60 inmates that formed an equivalent population to the study population in Kpirikpiri correctional centre, Abakaliki in Ebonyi State. The responses were coded and prepared on a spread sheet while Cronbach Alpha Reliability Estimate was used to determine the coefficient for the sub-scales. According to Sunday (2025), the results showed that the reliability coefficient was between .80 and .88 establishing that the instrument was consistent.

The descriptive statistics was used to answer research question, while multiple regression analysis was used to test the research null hypothesis. The decision was to reject the null hypothesis if the calculated f-value is greater than the p-value and vice versa.

Data Analysis

The research question raised was, to what extent do social rehabilitation activities, substance use disorder rehabilitation activities, recreational rehabilitation activities, vocational/career rehabilitation activities, health/wellbeing rehabilitation activities, emotional rehabilitation activities and behaviour modification activities jointly predict mental health of inmates in correctional centres?

TABLE 1: Regression analysis of prediction of rehabilitation activities on mental health of inmates in correctional centres in Cross River State, Nigeria

R – value = .900	Adj R – square = .807
R – square = .810	Std. Error = 2.56993

The results in Table 1 showed a regression coefficient (R) of .900 and a coefficient of determination (R²) of .810. This means that about 81.0% of the total variation in mental health of inmates in correctional centres was attributed to the variation in rehabilitation activities (social rehabilitation activities, Substance use disorder rehabilitation activities, recreational rehabilitation activities, vocational rehabilitation activities, health/wellness rehabilitation activities, emotional rehabilitation activities and behaviour modification) while 19.0% was attributed to other variables extraneous in this study.

The hypothesis stated was, social rehabilitation activities, substance use disorder rehabilitation activities, recreational rehabilitation activities, vocational rehabilitation activities, health/wellbeing rehabilitation activities, emotional rehabilitation activities and behavioural modification activities do not jointly predict mental health of inmates in correctional centres.

Table 2: Multiple Regression of social rehabilitation activities, substance use disorder rehabilitation activities, recreational rehabilitation activities, vocational rehabilitation activities, health/wellbeing rehabilitation activities, emotional rehabilitation activities and behavioural modification activities do not jointly predict mental health of inmates in correctional centres.

Source of variation	Sum of squares	Df	Mean square	F – value	P – value
Regression	12865.936	7	1837.181	278.291*	.000
Residual	3024.890	458	6.605		
Total	15890.826	465			

*Significant at .05 level, $P < .05$

Table 2 showed the multiple regression analysis used to test rehabilitation activities (social rehabilitation activities, substance use disorder rehabilitation activities, recreational rehabilitation activities, vocational rehabilitation activities, health/wellness rehabilitation activities, emotional rehabilitation activities and behaviour modification) as independent variable and mental health of inmates in correctional centres as dependent variable. The F-ratio was used to test the overall influence. The result of analysis of variance in the regression output produced the computed F-value of 278.291; $p = .000$ which is statistically significant at .05 probability level with 7:458 degrees of freedom. As a result, the null hypothesis was rejected. This means that social rehabilitation activities, substance use disorder rehabilitation activities, recreational rehabilitation activities, vocational rehabilitation activities, health/wellness

rehabilitation activities, emotional rehabilitation activities and behaviour modification significantly predict mental health of inmates in correctional centres.

To find the relative contribution of the individual rehabilitation activities variables (social rehabilitation activities, substance use disorder rehabilitation activities, recreational rehabilitation activities, vocational rehabilitation activities, wellness rehabilitation activities, emotional rehabilitation activities and behaviour modification) to the variation in mental health of inmates in correctional centres in Cross River State, Nigeria, a test of regression weight was carried out and the results are presented in Table 3.

TABLE 3: Regression weight of rehabilitation activities on mental health of inmates in correctional centres in Cross River State, Nigeria.

Predictor variable	B	Std. err	Beta	t-value	P – value	Rank
Constant	-.520	1.109		-.469	.639	
Social rehabilitation activities	-.220	.130	-.091	-1.699	.090	7th
Substance use disorder reha act	.925	.155	.404	5.978*	.000	3rd
Recreational rehabilitation act	1.597	.099	.751	16.064*	.000	1st
Vocational rehabilitation act	.276	.157	.114	1.756*	.080	6th
Health/wellness rehabili. act	.239	.131	.099	1.824	.069	5th
Emotional rehabilitation act	.721	.150	.302	4.816*	.000	4 th
Behaviour modification	-1.106	.101	-.528	-10.948*	.000	2nd

*Significant at .05 level, $P < .05$

Table 3 shows that the calculated t-values for substance use disorder rehabilitation activities ($t = 5.978$, $p = .000$), recreational rehabilitation activities ($t = 16.064$, $p = .000$), emotional rehabilitation activities ($t = 4.816$, $p = .000$) and behaviour modification ($t = -10.948$, $p = .000$) were significant at .05 level of significance while social rehabilitation activities ($t = -1.699$, $p = .090$), vocational rehabilitation activities ($t = 1.756$, $p = .080$), health/wellness rehabilitation activities ($t = 1.824$, $p = .069$) and regression constant ($t = -.469$, $p = .639$) were not significant at .05 level of significance. Similarly, the results in Table 3 showed that recreational rehabilitation activities ($t = 16.064$, $p < .05$) was the strongest predictor of the variance in mental health of inmates in correctional centres in Cross River State, Nigeria; followed by behaviour modification ($t = -10.948$, $p < .05$), substance use disorder rehabilitation activities ($t = 5.978$, $p < .05$), emotional rehabilitation activities ($t = 4.816$, $p < .05$) in the Multiple Regression model while health/wellness rehabilitation activities ($t = 1.824$, $p > .05$), vocational rehabilitation activities ($t = 1.756$, $p > .05$), social rehabilitation activities ($t = -1.699$, $p > .05$) and regression constant ($t = -.469$, $p > .05$) were the weakest predictors of the variance in mental health of inmates in correctional centres in the Multiple Regression model. The multiple regression equation is $y = -.520 + -.220x_1 + 0.925x_2 + 1.597x_3 + 0.276x_4 + 0.239x_5 + 0.721x_6 + -1.106x_7$.

Discussion of findings

The result of the hypothesis revealed that social rehabilitation, substance use disorder rehabilitation, recreational rehabilitation, vocational rehabilitation, health/wellbeing rehabilitation, emotional rehabilitation and behaviour modification significantly predict mental health of inmates in correctional centres. This result suggested that a comprehensive rehabilitation programmes that incorporates multiple components can have a significant impact on the mental health and well-being of incarcerated individuals.

The joint prediction of mental health outcomes by these rehabilitation activities underscores the importance of a comprehensive approach to rehabilitation. By addressing the multiple needs of inmates, correctional centres can promote mental health, reduce recidivism, and support successful reintegration into society. This finding has significant implications for correctional centres in Cross River State, Nigeria, and beyond. It highlights the need for policymakers and correctional administrators to prioritize rehabilitation programmes that address the complex needs of inmates. By investing in comprehensive rehabilitation programmes, correctional centres can play a critical role in promoting mental health, reducing recidivism, and supporting successful reintegration into society.

This result aligned with Ameh (2023) and Sunday et al (2025) who examined the personal-social rehabilitation counselling and social reintegration readiness among near-discharged inmates in correctional centres in Kogi State, Nigeria. and found that health, social, and recreational rehabilitation contributed some percentages in explaining the variances in social reintegration readiness among near discharged inmates in Correctional Centres in Kogi State. This suggest that that health of the inmates be given utmost priority in order to maximize their fitness as well as keep them mentally, psychologically and socially fit for the responsibilities that will help their re-integration in the society

This result is also in collaboration with Ubong (2023), who in a study on the effect of cognitive and behaviour therapies on prison and post-prison inmates' psychological adjustment, in Afokang Prison, Cross River State, Nigeria and found that there was significant differences in psychological adjustment between inmates treated with behavioural therapy and those not treated at all. This notwithstanding, prison inmates treated with cognitive therapy did not differ significantly from their counterparts treated with behavioural therapy in their psychological adjustment. It was also discovered that inmates subjected to any form of therapy differed significantly from those who did not pass through any form of therapy in their psychological adjustment. It was therefore concluded that behavioural and cognitive therapies significantly influence prison inmates positively in their psychological adjustment (particularly after imprisonment).

In conclusion, the finding that social rehabilitation activities, substance use disorder rehabilitation activities, recreational rehabilitation activities, vocational/career rehabilitation activities, health/wellness rehabilitation activities, emotional rehabilitation activities, and behaviour modification rehabilitation activities jointly predict mental health of inmates in correctional centres in Cross River State, Nigeria, emphasizes the importance of a holistic approach to rehabilitation. By providing inmates with access to a range of rehabilitation

activities, correctional centres can promote mental health, reduce recidivism, and support successful reintegration into society.

Conclusion

The finding underscores the critical importance of a multifaceted approach to rehabilitation. This result highlights the significance of providing inmates with access to a range of rehabilitation activities that cater to their diverse needs. By offering individualized and comprehensive rehabilitation programmes, correctional centres can empower inmates with the skills, knowledge, and support necessary to achieve successful rehabilitation and reintegration into society.

The individual prediction of mental health outcomes by each rehabilitation activity emphasizes the need for correctional centres to prioritize a broad range of programmes and services. Social rehabilitation activities can foster positive relationships and social skills, while substance use disorder rehabilitation activities can address addiction issues. Recreational rehabilitation activities can promote physical and mental well-being, and vocational rehabilitation activities can equip inmates with skills and training to secure employment. Moreover, wellness rehabilitation activities can focus on physical and mental health, emotional rehabilitation activities can help inmates manage emotions and develop emotional intelligence, and behaviour modification rehabilitation activities can aim to change maladaptive behaviour and promote positive habits. The joint prediction of mental health outcomes by these rehabilitation activities underscores the importance of a comprehensive approach to rehabilitation. By addressing the multiple needs of inmates, correctional centres can promote mental health, reduce recidivism, and support successful reintegration into society.

Recommendations

Based on the findings, the following recommendations were made; the government should:

1. Develop and implement social skills training programmes to enhance inmates' communication and interpersonal skills; encourage group therapy and support groups to foster positive relationships among inmates and provide opportunities for inmates to engage in community service and volunteer work to promote social responsibility.
2. Offer evidence-based substance use disorder treatment programmes, such as cognitive-behavioural therapy and medication-assisted treatment; Provide access to support groups, such as Narcotics Anonymous, to promote peer support and accountability and develop relapse prevention plans to help inmates maintain sobriety upon release.
3. Develop and implement recreational programmes, such as sports and exercise, to promote physical and mental well-being; Provide access to creative therapies, such as art and music, to promote self-expression and stress reduction and encourage inmates to participate in recreational activities to reduce stress and anxiety.
4. Offer vocational training programmes to equip inmates with skills and knowledge necessary for employment upon release; Provide job placement services and resume-building assistance to support inmates' transition into the workforce and encourage inmates to develop a career plan and provide support to achieve their career goals.

5. Provide access to physical health services, including medical screenings and health education; offer mental health services, including individual therapy and counselling and encourage inmates to prioritize their physical and mental health through healthy habits and self-care.

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