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# Prison as a Measure to Control Users of Illegal Drugs in Oman: A focused Ethnography

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#### **Abstract**

Illegal drug use is a rising problem that affects Omani youth. This research aimed to study a group of young Omani men who were imprisoned more than once for illegal drug use, focusing on exploring their lifestyle experiences inside and outside the prison and whether these contributed to their early relapse and re-imprisonment. This is the first study of its kind from Oman conducted in a prison setting.

**Methods:** 19 Omani males aged 18–35 years imprisoned in Oman Central Prison were recruited using purposive sampling. A focused ethnography was conducted over 8 months to explore drug-related experiences outside prison and during imprisonment. Face-to-face semi-structured interviews with the participants yielded detailed transcripts and field notes. These were thematically analyzed, and the results were compared with the existing literature.

**Results:** The participants' voices yielded new insights into the lives of young Omani men imprisoned for illegal drug use, including their sufferings and challenges in prison. These included: entry shock, timing and boredom, drug trafficking in prison, as well as physical and psychological health issues. Overall, imprisonment was reported to have negatively impacted the participants' health, personality, self-concept, emotions, attitudes, behavior, and life expectations. The participants reported how their efforts to reintegrate into the Omani community after release from prison were rebuffed due to stigmatization and rejection from society and family. They also experienced frequent unemployment, police surveillance, accommodation problems, and a lack of rehabilitation facilities. The immensity of the accumulated psychophysiological trauma contributed to their early relapse and reimprisonment.

**Conclusion:** This study concludes that imprisonment is largely ineffective in controlling drug use in Oman. Urgent action is required across multiple sectors to improve the lives and prospects of users of illegal drugs within and outside the prison to minimize factors contributing to early relapse.

**Keywords:** illegal drugs, drug users, Oman, addiction, Omani culture, prisoners, relapse, reimprisonment, qualitative research, ethnography

## **Background:**

In Oman, the rising illegal drug use is of great concern, despite which research in the area has been minimal. Few available studies assessed the use of illegal drugs that examine the factors contributing to drug use and why it remains a furtive activity (Al Adawi 2014). Oman's increasingly strict drug laws and the fear of imprisonment, for example, may deter addicted individuals from disclosing their drug use and seeking treatment. In addition, Islamic religious laws prohibit the use of intoxicants (Ali 2014). Thirdly the collective nature of Omani society values social conformity and has low tolerance for deviant behavior.



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Together they form significant barriers against the individual drug user seeking professional help for his rehabilitation. A rehabilitated person needs community support to prevent relapse, but society tends to see the ex-addict as the "other" and stigmatizes them. This increases the possibility of the newly rehabilitated person returning to his old drug-related environment and becoming readdicted.

Omani society has undergone extremely rapid and dramatic changes over the past fifty years which catapulted it from being a subsistence economy to a modern affluent one with great improvements in healthcare, technology, transportation, and standard of living (Al Adawi 2014). However, this has led to a massive increase in the population both due to high birth rates and the rapidly growing expatriate population. The economic globalization that started in the 1980s gave additional freedom to private businesses including less stringent controls on imports and exports. Thus, Oman became more vulnerable to smuggling, distribution, and easier availability of illegal drugs (Al Wahabi 2019). Oman's criminal laws were traditionally benign, but as the drug menace increased the government was forced to tighten its criminal laws against drug traffickers and users. At present any individual caught for drug-related crimes could face a minimum sentence of one to four years in prison for using drugs and up to life sentences, and in serious cases death penalty, for trafficking drugs (ROP 2015).

Scheduled psychoactive drugs obtained without a prescription in Oman attract imprisonment and fines (ROP 2015). Admitting to substance use in Oman is associated with admitting to criminal activity. In this context, the country has witnessed high rates of incarceration for substance possession, production, or trafficking (ROP 2015). The deterrent effect of the recently tightened laws is likely to be preventing many young Omanis from experimenting with illicit drugs. On the other hand, there is the question of how the fear of criminal conviction may prevent those who are already dependent on drugs to voluntarily seek treatment and rehabilitation. It is not easy to find a balance between the two.

Hence, this study aims to control the effect of imprisonment on users of illegal drugs in regards to control drug use in Oman.

## Methodology

This is a focused ethnography study, and participants, a total of 19, were selected from the Oman central prison records in 2018, using purposive sampling. A semi-structured interview research technique is used extensively for exploring Inclusion criteria included men aged from 18 to 40 years, those who have been convicted of using illegal drugs and not for any other crime, those who have multiple entries with a break of 6 months from the previous sentence, and those recently sentenced to prison for less than 6 months. The exclusion criteria were those who have committed other crimes along with using illegal drugs.

## Results

## Daily Life in Prison

This theme focuses on the participants' perceptions about their life in prison regarding their daily life in prison and the description of their subculture. Adjusting to the daily official routines of the prison was a major concern of all participants, who described these as mechanical, boring, and tough. Added to this was the challenge of understanding and adjusting to the power hierarchy that prevailed among their fellow prisoners which was enforced by threats and physical violence. For new entrants, the process of getting used to these unwritten rules could be a punishing experience, which included verbal threats to physical assaults. A third and most important factor was the participants' already present personal emotional burdens and physical distress from the time of their incarceration. These became accentuated by the tough



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conditions in the prison. The participants were unanimous in their opinion that imprisoning illegal drug users was ineffective, pointing to their recidivism history. A few even claimed they could easily obtain drugs in prison. The sub-themes are illustrated with participant quotes.

## **Adjusting to Prison Life**

Most participants reported experiencing physical withdrawal from the abrupt stoppage of their drugs. Among the other aggravating stimuli were the loud sounds from their fellow prisoners, loss of privacy, and feeling trapped amid unfriendly strangers. P2 who was in his second jail term said: 'The first days in prison are always hard for me even though I have been jailed before. I usually suffer from body pain, headache, and abdominal pain. I would live in a confused state, won't believe I am in jail, then there is the physical pain from stopping drugs...' (p2) New drug-user prisoners also found it tough to convince the prison guards of the reality of their physical symptoms.

## P1, recalled:

'It took me one week here to be seen by the doctor and get medicine for my pain. Since my arrival here, I have had pain all over my body and I have been feeling so tired and weak. But when I asked the police guard to take me to the clinic, they did not believe me at first."

The second distressful experience reported by the participants was the feeling of loss of physical freedom—of being locked into a small space close to often unfriendly strangers.

'... it took me a lot of time to get used to life and adjust myself here, however, I still can't accept all that I lost from my life — my freedom, my family, my relatives, and then good friends, Of course, I can admit that the first days are the hardest to deal with all these losses...'. (P 11)

Participants revealed experiencing shock, denial, intense emotional pain, guilt, anger, dread for the future, confusion, loss of identity, and a sense of rejection which worsened their withdrawal symptoms. Another source of emotional pain was being cut off from their loved ones.

"... It took me time to accept that I was in prison. All I think is about my life here and how many more days I must endure it. It is difficult to accept the loss of freedom, I can't do what I used to do daily. Although I try to get myself adjust to this new life of prison, I am still having pain and emotional hurt. I must admit that losing my family and my good friends is what makes me feel bad about myself here, but I must get over it and forget about it ...' (p5).

The Boredom of Being in Prison Eventually, entry-shock and initial adjustment problems would diminish. However, most participants perceived prison life as dictatorial life or military life in terms of rules and scheduling of tasks. Most disliked regimentation, not only the rules of the prison but imposed by their fellow prisoners as part of their subculture.

"...My daily life is like a regime... everything is dictated to us... the daily life in prison is the same for the rest of my sentence here, nothing changed since the day I came here, timing and scheduling are the routines of everything we do here.... (p9)".

Spending a day in prison counts in all aspects, the time passes very slowly, and anything you do is questioned and criticized by other prisoners. No privacy and daily activities are extremely limited here.

"... imagine waking up at the same time doing the same things seeing the same people and living in the same place for three years ... Living the same routine over and over I have lost the test of life .... nothing is interesting anymore there is no something to look forward because is this same monotonous life everyday ... (p10).



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Participants' Ways of Relieving Boredom for an hour every day the dormitory door is unlocked and the prisoners are permitted to walk within the confines of the walled open area. As everyone is allowed out together, this activity allows all to breathe fresh air and perform physical exercises. Every wing has its own walled outdoor space, limited to the prisoners of that wing.

'For me, I am obsessed with time, I have nothing to do except wait for the day of my release. I am bored here, when I think that the end of my sentence is getting closer, I feel time moving fast. But when remember that I will be released only next year, time moves very slowly....' (p4).

Some participants suggested that prisoners must be forced to work or to engage in some activity: 'From my experience, if work is compulsory here, we could do many things, I mean all the prisoners, so we would not be thinking about time.

''Spending the entire day doing nothing is really killing me and make the time crawl. In my opinion, boredom is the main thing that makes me count every hour without doing anything...' (p5).

Mental and Physical Health of the Participants in Prison

After the initial icebreaking they poured out their sufferings, which continued day after day, making it a challenge for me to continue to participate in these sessions with calmness. Each participant tried to form his bubble of isolation, as illustrated below:

"...I am alone in the middle of this prison crowd, this is how I can describe myself here, losing my freedom, and my privacy has affected me so badly, I feel that I am trapped in a big roller-coaster and I can't get myself out of it, my mind is destroyed because of lack of sleep, I can sleep only three-four hours per night because of all the noises.... (p19).

.... my mood swings are becoming worse here because of prison inmates .... in this small room I am living with prisoners who have mental issues .... There is a lot of misunderstanding and suspicion between prisoners, and this has caused more tension between us .... Therefore, all of us suffer from mental problems .... (p15).

## Subculture in Prison

Users of illegal drugs, unlike other criminals, may thus feel a bond with other users of illegal drugs, in the present or future. This sort of bond of common experience does not seem to exist between other criminals. In general prison culture can be defined as prisoners sharing their way of living in terms of routine and rules in prison. Participants seemed to view the prison community as a total culture. described prison as (p13):

'.... we all live the same life here; we obey and follow what is called prison rules and regulations and this is not by choice, I took time to learn and fit in these rules because I was still living in denial. I had to talk, behave and think like everyone here in the way that satisfies the prison community ...' (p12).

Participants were able to create their subculture in a prison that represents them. (P10) explains the divisions and groups:

"...we prisoners pretend to show the police that we live how they want us to live, but that is not the real life that we live here. The small wing that accommodates us has its way of living regardless of what is supposed to be seen in a bigger prison community.

Having a shared mode of communication meant that everyone within the drug user group could be understood and this created a strong subculture in the prison community. This has resulted in the creation of a drug users' network inside the prison that is like networks outside the prison.

Getting High in Prison



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Prison is supposed to provide a drug-free environment, particularly for those jailed for illegal drug use. However, participants of this study revealed that this was not the case. Although available drugs are not of a high quality, the prisoners use them to get high.

'I learned more about using drugs when I was here in prison, other prisoners have taught me how to get sick to get some medicines from the health clinic, when I mix these medications, they give a sense of getting high. For example, I have been prescribed a medication called Tryptizol [Amitriptyline] in small doses so what I do is to buy more from other prisoners to get a high dose, then I got addicted to this medicine after some time....' (p7).

'There is a medication we call it here among drug users "JK" [procyclidine, an antispasmodic] although we use this drug to get high it causes unpleasant reactions, so I was once given this drug in the tea [as punishment] because I had delayed transfer some money to the leader's friend outside the prison.'(p6).

The participants were discussing the availability of drugs in prison without any fear of the police guard who was sitting with us. They were talking freely maintaining eye contact, and few of them seemed to take it as a challenge to disclose this information. The police guard was smiling and looking at me, but he did not interfere, or deny any of what participants disclosed, after the interviews.

## Risks of Drug Deals in Prison

There were many occasions where drug dealers forced some of the participants to use drugs because they were found to be good targets for making money and facilitated their drug deals.

P3 was forced to use drugs in prison by other prisoners because he was visited by his family every two weeks and they were purchasing food and items for their son, unfortunately, that put him at risk. He mentioned that

'I was forced to use drugs in prison several times, the drug dealers knew that my family was wealthy, and I could get money and make transactions outside prison. I was threatened with abuse if I stopped buying drugs from them... (p11)

Any prisoner who is suspected of 'working with the police' is in danger of being labeled "traitor" and victimized:

'.... once I saw a prisoner who sustained severe injuries because he had told the police about the deals; I am always worried about my life here, but I can't quit drugs, my craving for drugs is more here although I could be at risk if the dealers lose trust in me...' (P 5).

## **Discussion**

Most participants experienced a shock of prison entry every time they were imprisoned regardless of the number of re-entries. Revisiting these memories was accompanied by congruent body language that indicated that the entry shock period was likely to have been the most difficult experience they went through in prison. Sometimes, participants may go through a period of confusion and denial. There would be associated negative psychological manifestations on the first days in prison including symptoms of desperation, confusion, anxiety, and fear. While participants agreed that this was mostly acute at the time of their first imprisonment, however, later entries into prison also elicited similar symptoms.

A qualitative study by Netrabukkana (2016) reported similar findings among users of illegal drugs in a Thailand prison. He argued that prisoners share experiences of emotional trauma during their first days of incarceration. These included feelings of regret, fear, anger, bargaining, and denial of the present. In addition, the majority of 190 Netrabukkana's (2016) participants experienced physical pain due to abrupt



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stopping of drugs; some experienced withdrawal symptoms on their first days in this study. The Thailand findings were consistent with the ground-breaking ideas of sociologist Donald Clemmer (1940). Clemmer highlighted the pain of imprisonment and described the process of socialization in prison, which molds the prisoners' minds, which he termed prisonization. His findings claimed that the prisoners undergo several stages to adapt and be part of the prison community. The participants of the present study also went through stages like of grieving (denial, bargaining, depression, and acceptance) during their imprisonment.

Multiple entries were cited by participants as a barrier to coping with time. Participants have gone through years of unsuccessful attempts to reintegrate into Omani society. The experience of the circle of re-entry has led them to expect the trend to continue. They see their future lives as repetitively moving back and forth between prison and society. For most people life is made worth living by expectations of meeting goals. My participants seem to have weakened their goal-making abilities, which has impacted the meaning life has for them. During the first imprisonment, prisoners had plenty of time utilized in planning and mind mapping about what to do when released from prison. Once they were freed, they tried putting these plans into action. But, once they were Outside, they faced social barriers, found no supportive networks, and found it difficult to get ready access to treatment. They returned to drugs to be imprisoned again without being able to put their plans into reality.

The findings are consistent with those of Love et al. (2018) based on their ethnographic study among young British drug users. Using Interpretative Phenomenological Analysis (IPA) to investigate patterns of recidivism, they found that drug use may have been a coping mechanism to manage the trauma of abused childhood. In the absence of supportive networks, their participants were found to relapse after rehabilitation and their 193 participants exhibited the familiar circle of relapse, which became increasingly difficult to break. In the present study, participants' supportive networks were not adequate after release, and repeat imprisonments might be hindering their recovery rather than aiding it. Carr et al (2016) found that repeat short-term imprisonment of users of illegal drugs was ineffective. The diminishing hope for change in their lives might be one of the reasons why drug-addicted prisoners may experience more difficulties in coping with time than prisoners who are not addicted to drugs.

This article identified four time-related patterns from my findings. First, newly incarcerated prisoners found it difficult to cope with the structured time in prison. Second, after becoming habituated to adopting prison routines, the task of coming to terms with the slow movement of time becomes easier. Third, after release, adapting to a new life in terms of utilizing time was difficult. Fourth was coping with repeat imprisonments and going through the circle of adapting again to prison life. These findings were consistent with the work of (Schinkel 2014) who explored the experiences of multiple short-term prison sentences. He suggested that repeated imprisonments contribute to change in the prisoner life adaptation.

There is a gap in the literature on the availability of drugs and the use of drugs in prison (Tomkins 2016). However, according to EMCDDA (2012) and (CASA 2010) there was an overrepresentation of users of illegal drugs in prison in many Western countries. There are 60% to 70% of prisoners who report using drugs either before or during imprisonment in some of these countries (CASA 2010; EMCDDA (2012). The findings of a comprehensive body of studies indicated that drug use is reported to be common in prison settings (EMCDDA 2012; Mjaland 2014, 2016). This was noted also from a review of 15 European countries, despite having drug treatment or rehabilitation in their prisons (EMCDDA 2012). Tompkins (2016) conducted an ethnographic study among thirty British ex-prisoners who were also users of illegal drugs and peddlers. These participants had served multiple prison terms for drug-related crimes and



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functioned as in-prison drug dealers and 'enforcers.' They revealed the details of two extensive drug networks in Northern England, which specialized in selling drugs to prisoners. They targeted prisoners who were in drug withdrawal or were craving drugs. They also tempt other prisoners into addiction by giving them free drugs initially. Secrecy and timely payments were strictly enforced through intimidation and physical violence by appointing prisoners known for their ruthlessness, known as 'enforcers.'

Participants of the study indicated that the leaders of drug dealers in prison were targeting prisoners who have frequent visitors assuming 198 that they are a good source of buying drugs and they can get financial support from their family. Participants of the study indicated that the leaders of drug gangs in prison often targeted prisoners who had frequent visitors, assuming that they would be good sources of drugs and would be able to receive financial support from their families. Some of the participants admitted to being forced to pay drug dealers for drugs and, if they protested, being exposed to physical abuse, much like (p17). There are conflicting opinions regarding the benefits and drawbacks of prisoners having access to drugs. Some studies support the use of drugs in prison to help prisoners cope with the pain of imprisonment (Keene 1997), while others suggest that the use of certain types of drugs reduces undesirable behaviors among prisoners (Kolind and Duke 2016; Hedrich et al. 2012). Other researchers have argued that taking drugs in prison encourages addictive behaviors and tempts even nonaddicted peers (Crewe 2005; Strang et al. 2006). The latter argument is supported by Tompkins's (2016) revelation that creating new addicts in prison is a business strategy adopted by drug networks. Some participants admitted to using drugs to control their addictive behaviors since they had access to drugs that could trigger these behaviors.

Participants suggested that having drug treatment in prison would rehabilitate them inside prison and after release. There was no deaddiction program available for participants, although they were treated for acute symptoms. Most participants experienced depression and mental illness; however, some were faking mental illness to get tranquilizer medicines to get high, and some used their prescribed medicines for drug deals. The findings of the studies carried out elsewhere on drug treatment could add strength to recommendations to establish drug treatment in Oman prisons. Drug treatment in prison or using drugs is supported in the literature, therefore many Western countries have established drug treatment programs in prison (Kolind and Duke 2016; Hedrich et al. 2012). These programs were found to help reduce addictive behavior and help in the rehabilitation of drug users in prison during and after imprisonment (Skretting 2014; Tomkins 2016; Mjaland 2016).

All participants expressed suffering or were diagnosed with mental illness. These traumatic emotions would be aggravated upon release from prison, thus representing a challenge for drug users who must manage stressful situations. Such factors relate to the role of the community, family attachments, and lack of support shown to trigger relapse. These factors relate to the community, family attachments, and lack of support which are shown to trigger relapse. Prisoners are also released from prison without any preparation to face their new life outside prison. Most prisoners are released without a proper basic support plan such as housing, employment, and financial support. No referral system supports former prisoners or continuing treatment as there is no drug treatment in Oman prisons. In addition, users of illegal drugs are not eligible for any financial support after release from prison or any assistance for employment except to apply to the Ministry of Labour along with all Omani job seekers whose waiting list is generally very long. Even if their turn comes, they are likely to be rejected by potential employers due to their criminal record. Thus, the government needs to consider special priority channels with added incentives for those willing to employ a person with a criminal record. A substantial amount of literature suggested that a post-prison supportive plan before release was very effective in assisting former users of illegal drug prisoners to



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reconnect to social life and consequently reduce relapse and reoffending (Kaye 2013; McKim 2014, Sear 2017; Western et al. 2015).

## Recommendations

The following recommendations are based on the findings of this study and supported by literature, to facilitate users of illegal drugs break the circle of relapse and re-entry. Drug policies need to be drastically revised internationally to decriminalize illegal drugs to some extent. However, this cannot be attempted unilaterally without international collaboration between all nations including Oman. Most drug users do not become addicts. Literature suggests that some people are genetically more susceptible to drug addiction. According to this view, it is unjust to criminalize drug addicts as they need treatment and not punishment.

- 1. Establishing drug treatment in prison is essential in Oman's central prison as most prisoners are drug users. Drug treatment in prison would help identify all the registered cases of users of illegal drugs in prison and prioritize their needs in terms of treatment. In addition, minimize drug-taking behavior in prison for those who exhibit this behavior inside prison. Moreover, it will help rehabilitate drug users who are approaching release from prison on how to overcome stresses outside prison life that might cause relapse.
- 2. The positive feedback from participants suggests that they may benefit from counseling within prison. This might also be added to the in-prison rehabilitation option.
- 3. Establish a referral system with cooperation between law enforcement and health care departments where a newly released drug user is obliged to continue the treatment outside prison. This referral system also needs to include social support that takes care of their basic needs in terms of accommodation, employment, and financial supporting system, as well as counseling facilities.
- 4. Formulate a friendly task force that includes recovered illegal drug users and motivational speakers to conduct periodical campaigns to increase awareness in prison settings on drug use and how to combat this problem.
- 5. Encourage creativity to the greatest extent. Prison art is proven to be therapeutic for prisoners (Cheliotis 2014), particularly for those suffering from depression. Mural paintings are known to have a particularly powerful influence on prisoners and is being practiced in many prisons across the world. The advantage of mural art is that it can be a collective venture with the potential to provide a healthy form of unity among the prisoners and pride in their accomplishments. The external walls of the prison are a readily available medium for large mural art in the creation of which everyone can collaborate. The murals could even be judged from time to time by professional artists and the best ones were given awards and published online.
- 6. Books and periodicals should be easily accessible to the prisoners for their entertainment and education. It should be possible for prisoners to take online courses in prison (Hughes, 2016).

#### Limitations

Potential limitations of this study mainly relate to the research setting and associated administrative and security restrictions and related to the population being studied. Conducting research in prison has many limitations in terms of rules and regulations of the prison. Therefore, every step of this research was carried out in accordance with the prison protocol. This universal limitation of prison ethnography has been reported by other studies in the literature.



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#### Conclusion

Users of illegal drugs in Oman are subjected to a system designed more on punishment rather than support. The negative experiences of repeated imprisonment generate more distress, which might also contribute to early relapse and reconviction. Drug users in Oman are individuals who require prompt comprehensive management to tackle the problem of drug use. Prison is not a substitute for therapeutic strategies in preventing users of illegal drugs from returning to drugs. Repeated imprisonment of many people is also likely to impact the prison resources in terms of finance and manpower. Increasing penalties for users of illegal drugs who relapse within a very short time resulted in a significant increase in several users of illegal drugs in prison. This policy or strategy was meant to deter drug users from using drugs and being punished as using illegal drugs is a crime in Oman. Perhaps part of the reason why imprisonment does not help reduce recidivism is the lack of support inside prison. However, the central prison is not equipped with the necessary support to help users of illegal drugs.

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