



From Criminalisation to Release: Older Women's Journeys Through Imprisonment in Thailand

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Abstract

This study examines the experiences of older women in Thailand before, during and after imprisonment, drawing on interviews with 18 currently or formerly imprisoned women and focus groups with 20 prison staff. Findings show that criminalisation in later life was often driven by survival, shaped by economic hardship, caregiving burdens, victimisation, and periods of instability. In prison, women faced interconnected and compounding challenges, including emotional distress, inadequate healthcare, exclusion from activities and isolation. Preparation for release was rarely age-responsive, leaving women under-resourced and insufficiently supported. Returning home depended heavily on family support, stable housing and income, none of which was guaranteed. Stigma and shame were significant barriers to older women's ability to rebuild their lives. These findings underscore the urgent need for gendered, age-responsive reforms, building on the United Nations Rules for the Treatment of Women Prisoners and Non-Custodial Measures for Women Offenders (the Bangkok Rules).

Keywords: Incarcerated women; prison; criminalisation; ageing.

Introduction

Thailand has played a leading role in advancing gender-responsive justice, particularly through efforts to better understand women's pathways to criminalisation and their experiences of imprisonment. This leadership is exemplified by Thailand's central role in developing the 2010 United Nations Rules for the Treatment of Women Prisoners and Non-Custodial Measures for Women Offenders (the Bangkok Rules). The Rules provide guidance to policy-makers, legislators, courts and correctional services on reducing the unnecessary imprisonment of women and on establishing principles for detention and re-entry. They acknowledge that women's engagement in criminalised behaviours is often rooted in gender-based subjugation, that the criminal justice system is shaped by patriarchal assumptions, and that many women, despite being highly vulnerable, pose little risk to community safety (Jefferson & Jeffries, 2022).



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Although no international standards specifically address older people in the criminal justice system, the Bangkok Rules, together with the United Nations Standard Minimum Rules for the Treatment of Prisoners (Nelson Mandela Rules) and the United Nations Principles for Older Persons (1991), call on nation-states and their authorities to ensure equitable access to justice, services and protections for vulnerable groups. The Bangkok Rules call for “comprehensive, results-oriented research on the offences committed by women, [and] the reasons that trigger women’s confrontation with the criminal justice system” to guide the development of policies that “aim to improve the outcomes and fairness to women” (Rules 67 and 70[2]). Yet, research on older women’s criminalisation, imprisonment and post-release experiences remains limited, especially in non-Western settings. Responding to this mandate and addressing these gaps, this qualitative study examines the pathways through which older women in Thailand become criminalised, as well as their prison experiences and post-release needs. The aim is to generate evidence to inform gender-responsive and age-sensitive policy and practice. The following sections review previous research, describe the study methods, present the findings and conclude with implications for reform.

Previous Research

Pre-Prison Lives and Criminalisation Pathways

Feminist research into how women come into conflict with the law has provided valuable insight into its gendered dimensions (Jefferson & Jeffries, 2022; Wattanaporn & Holtfreter, 2014). It shows that criminalisation is shaped by interconnected life experiences, including gender-based victimisation and trauma, mental health challenges, substance misuse, male coercion and control, limited education, material deprivation, family caregiving responsibilities and restricted access to justice (e.g. Jefferson & Jeffries, 2022; Russell et al., 2020). Research on the criminalisation and pre-prison lives of older women is limited. However, some studies of older women in prison have examined their backgrounds, highlighting lives shaped by cumulative disadvantage, including long histories of abuse, economic hardship and heavy caregiving burdens (Aday & Krabill, 2011; Bows, 2023; Prost et al., 2022; Wahidin & Aday, 2012). Some have experienced repeated criminalisation, while others face imprisonment for the first time in later life (Aday & Farney, 2014).

The sole prior study of older women’s pathways into the criminal justice system found that most encountered legal issues in their forties and fifties, largely while attempting to economically provide for their families (Russell et al., 2022). These women were particularly vulnerable to economic marginalisation. Limited education confined them to precarious, low-paid work, while age-related health decline further reduced their earning capacity. Substantial caregiving¹ responsibilities also shaped their trajectories, with several imprisoned for drug-related activities, often engaged in to provide for children, ageing parents, extended kin or grandchildren. For some, methamphetamine use was a strategy to sustain work productivity, while for others, selling drugs became a means of survival. In several instances, women assumed the role of primary provider after a husband’s death or incapacity, or when adult children, often struggling with substance misuse, could not support themselves or their children. A number took responsibility for their grown children’s behaviours to shield them and their grandchildren from the harms of parental imprisonment. In other cases, criminalisation occurred in the context of victimisation, trauma and psychological distress.

Ageing in Prison

In prison settings, people are typically considered elderly from the age of 50, reflecting correctional health evidence of a 10- to 15-year difference between the health status of incarcerated people and that of the general population. In practice, this means that a 50-year-old person in prison typically presents with a health profile similar to that of someone aged 60 to 65 years in the community (Ahalt et al., 2013; Easton, 2018). Accelerated ageing reflects the cumulative effects of life stressors common among criminalised people, including poverty, poor diet, substance use and exposure to adversity, which undermine health and hasten ageing (Skarupski et al., 2018). Conditions of imprisonment further exacerbate these effects (Easton, 2018; Maschi & Aday, 2014; Wahidin & Aday, 2012).

Scholarship on ageing in prison has tended to focus on men, leaving older women’s experiences comparatively under-explored (Bows, 2023; Codd, 2018; Wahidin, 2013). The marginal scholarly visibility of older women reinforces their structural neglect and sustains one-size-fits-all policy and practice responses to incarcerated older people, thereby erasing the gendered realities of ageing in prison (Penal Reform International, 2021). Additionally, scholarship on older people deprived of liberty, including women, has largely been framed through a medicalised lens, foregrounding healthcare needs and narrowing attention to other dimensions of older incarcerated persons’ lives (Bows, 2023; Codd, 2018, p. 350).

Research, predominantly focused on men, shows that older imprisoned people experience disproportionately high rates of chronic illness, including arthritis, hypertension, diabetes, dementia and heart disease (Aday & Farney, 2014; Williams & Abraldes, 2007). Many also live with disabilities that limit mobility and daily functioning, while contending with prison

environments designed for younger, physically able populations (Aday & Farney, 2014). Emerging scholarship indicates that older women's health needs, particularly those associated with menopause, remain inadequately recognised within custodial healthcare systems (Aday & Krabill, 2011; Schach et al., 2021).

Alongside these physical health concerns, substantial mental health challenges have been documented. Older people in prison report higher levels of depression, anxiety and psychological distress than both younger incarcerated persons and older adults in the general community (Baidawi, 2016; Franke et al., 2019). In later life, women appear particularly vulnerable, with evidence indicating higher risks of mental ill-health than men (Aday & Farney, 2014; Aday & Krabill, 2011; Stoliker & Galli, 2019).

Knowledge of the experiences and needs of older incarcerated people beyond healthcare remains limited, particularly for women. However, evidence suggests that older women – particularly those imprisoned for the first time in later life – are especially prone to isolation and loneliness (Aday & Krabill, 2011; Maschi et al., 2014; Stevens et al., 2018). Gendered caregiving roles and expectations make separation especially painful, and older women report anxiety about ageing parents and fear that loved ones may die before their release (Barry et al., 2020; Easton, 2018; Reviere & Young, 2004). Family contact provides vital support and helps women cope with the hardships of prison life, but visits often decline over time, contributing to fractured relationships (Aday & Krabill, 2011; Krabill & Aday, 2005). This tapering of contact may partly be explained by prison location; the geographical placement of women's prisons often situates them far from home, effectively pricing families out of regular contact.

Engagement in meaningful prison activities is central to well-being, yet older women report fewer opportunities than younger cohorts and men, and there is often a gap between what prisons offer and what older women need (Aday & Krabill, 2011; Wahidin, 2004). Carceral activities and institutional programmes, including sport, physical exercise, recreation, education and vocational training, are organised around younger bodies and life stages. Older women can be excluded, leading them to feel disengaged and invisible (Aday & Krabill, 2011; Krabill & Aday, 2005; Kratcoski & Babb, 1990; Wahidin, 2004).

Older Women's Re-entry

Release from prison is a critical yet underexplored stage of the carceral trajectory, shaped by both gender and age, though these dimensions are rarely examined together. Few studies focus specifically on older women returning home (Brent, 2019; Shantz & Frigon, 2009). What we do know is that transition planning and support are typically inadequate, seldom tailored to older people and often neglect women altogether (Forsyth et al., 2015; Skarupski et al., 2018). Older women face significant challenges in their post-prison lives, including managing complex health conditions and securing housing and sustainable livelihoods amid discrimination and stigma (Ahalt et al., 2013; Baldry et al., 2006; Cobbina, 2009; Di Lorito et al., 2018; Shantz & Frigon, 2009; Western et al., 2015). Re-establishing family relationships is another difficulty, with many reporting isolation and limited support after release (Aday & Krabill, 2011).

Methods

While intersectional feminist scholarship has broadened analyses of women's experiences within criminal justice systems, studies exploring the intersection of gender and older age remain scarce (Powell & Wahidin, 2013). At present, we know little about older women's experiences of criminalisation, imprisonment and life after release, particularly in non-Western settings (Bows, 2023; Codd, 2018). Drawing on qualitative interviews with women aged 50 years and older who have experienced imprisonment in Thailand, as well as focus groups with prison staff, this study examines criminalisation pathways, prison experiences and the post-release transition through an intersectional feminist lens.

Thailand has four types of prison facilities for women – correctional institutions and central, provincial and district prisons – with separation from men in all settings. District prisons confine women serving shorter sentences, provincial facilities manage medium-term sentences, and central correctional institutions house those serving longer terms (Oliver et al., 2017, p. 773).² The majority of research participants were from correctional institutions, and some had been incarcerated in district or provincial prisons for either their entire sentence or a portion of it.

A purposive sampling approach was used to recruit women aged 50 years or older with lived experience of imprisonment – that is, currently or formerly incarcerated. Women were invited to participate through Thailand's Department of Corrections, and those who volunteered were introduced to the research team. The researchers then provided further, more detailed information about the study, including its aims, the voluntary nature of participation, possible risks, confidentiality and privacy safeguards. Those who agreed to participate were given a study information sheet and provided written informed consent.

Eighteen interviews were conducted focussing on three areas: (1) pre-prison life (childhood and adulthood, education, employment, economic circumstances, health and substance use, and circumstances leading to criminalisation); (2) prison experiences (challenges, needs, and pre-release planning); and (3) returning to the community (expectations, experiences, challenges and needs). The women interviewed were mostly Buddhist ($n = 15$) and had an average age of 61 years (range: 50–69). They were predominantly criminalised for engaging in drug-related acts ($n = 12$), followed by property ($n = 4$) and violence ($n = 2$). The women's sentences ranged from one year to life imprisonment; one participant was sentenced to death but was released after 18 years following a Royal Pardon.³ Only three participants reported a prior official criminal history. Eight women were interviewed while incarcerated, and 10 women were interviewed post-release.

In addition, four focus groups were held with 20 correctional staff to examine staff perspectives on women's pathways, custodial experiences and re-entry. The prison administration informed all staff about the research and invited volunteers. Participants included social workers, nurses, penologists, vocational trainers, correctional officers and prison administrators. Most had extensive experience in the Department of Corrections, with over half having worked there for 15 years or more.

Interviews and focus groups were conducted either in English by the first author, with simultaneous interpretation into Thai by the third and fourth authors, or in Thai and then transcribed into English. Sessions lasted between one and two hours, were audio-recorded, transcribed, and then analysed to identify recurring themes. The findings are presented below under three headings: (1) pre-prison life and criminalisation; (2) prison life; and (3) returning home.

Pre-Prison Life and Criminalisation

Older women's criminalisation reflected a complex interplay of disadvantage, personal crises and accumulating relational pressures. Financial desperation was often the immediate catalyst for entry into the criminal justice system, with staff noting that, "for older women, it is usually because of financial reasons. The crimes they commit are due to a need for money, whether it be for their families or to look after themselves." Major life disruptions, such as the death of a spouse, serious illness, relationship breakdown or ongoing domestic violence, were also common. These crises destabilised already fragile coping systems, leaving women with few identified options for survival.

Childhood Adversity

Many women grew up in rural villages or marginalised urban neighbourhoods where resource scarcity dominated daily life.⁴ In these settings, families relied mainly on low-paid informal work. As one woman explained, her "family struggled financially. In summer, we grew rice, and in winter, we farmed cucumbers." Childhoods were also marked by violence, neglect and fractured parent-child bonds (e.g. divorce). Physical abuse was often inflicted by fathers, stepfathers or other male relatives, sometimes accompanied by sexual abuse. One woman recalled how her stepfather "was always trying to get some opportunity to harass me sexually", and another described fleeing to a Bangkok factory at 14 years of age, seeking to get "as far away as possible" from her abusive stepfather after disclosing to her mother, who "didn't quite fully believe it". She was relieved to escape, but "had to struggle" to support herself, and later found herself living in a neighbourhood she described as a "chaotic slum".

Educational attainment was generally low, with half the participants not completing lower secondary education.⁵ Under-education was linked to economic hardship (particularly among those who grew up in rural areas), gendered attitudes and family crises. For example, one woman left school at the age of 13 years after her mother's death and "went to the city to work in a factory. My family was poor. I used that money to take care of the family." She tried to persuade her father to let her continue school, but he told her: "You are a girl, you don't need to study. You will grow up and have a family. You will be a wife." She then moved to the city, found work and "helped dad to raise my brothers". Another woman recalled leaving school because "no one paid the fees. I worked at the tobacco factory and earned 100–200 baht [US\$2.75–5.50] per day", contributing financially to her household. Staff noted that limited education and literacy later hindered women's livelihood prospects and their ability to navigate the justice system.

Economic Marginalisation and Familial Caregiving

In adulthood, limited education confined many of the women to low-paid work, and heavy caregiving responsibilities further compounded their economic precarity. Here, unlawful income-generating activities emerged as a means of survival, especially during moments of acute financial distress. As one woman relayed, "The money wasn't enough, and I needed to provide for my family." Staff observed that many older women subsist on as little as "100 baht [US\$2.75] a day. It is impossible, so when someone offers them a quick way to make money, they take it." Another woman explained: "I never used drugs, but they said if I carried this bag, I'd get 5000 baht [US\$138]. I thought of my debts, and I needed money for my daughter's living costs."

The loss of, or abandonment by, romantic partners left many women as their sole family providers. As one interviewee stated: “My child’s father was involved in criminal activity and eventually disappeared, leaving me with no education and a child to support.” Women’s caregiving responsibilities did not end when their children became adults; many assumed responsibility for grandchildren, either alongside their adult children or as primary carers when their sons and daughters migrated for work.⁶ One woman reflected: “I have too much responsibility. All the burden in the family falls on my back. This is why I committed the crime.”

Care responsibilities for elderly or ill spouses and other relatives (most often ageing parents)⁷ added further pressure, driving some women to engage in criminalised behaviours out of desperation. For example, one participant cared for her paralysed husband for a decade, during which time he mortgaged their home to cover costs. Following his death, she sold drugs to repay the debt. Another woman quit her job to provide end-of-life care for her elderly father, who was “incapable of looking after himself”, depleting her already limited financial resources. Within a year of her father’s death, unemployed and struggling to pay her daughter’s education fees, she transported drugs.

Victimisation and Trauma

Intimate relationships with men were often characterised by violence, coercion, infidelity and substance misuse. For some women, criminalisation stemmed from efforts to protect themselves or others from violent men. Women who had experienced domestic violence described seeking help from law enforcement, only to be told it was “a family matter”.⁸ As a result, some were criminalised for efforts to safeguard themselves from violent men. For example, after enduring decades of intimate partner abuse, a 60-year-old interviewee described killing her husband after he threatened her with a gun. She said, “I tried to take it from him. I didn’t know it was loaded. I didn’t mean to kill him; I just wanted to protect my life.” Staff likewise observed women imprisoned for defending themselves against men, and they also described cases in which women acted to protect others: “Sometimes the woman has seen their daughter being abused by a son-in-law. After years of this, one day they cannot take it anymore, and they assault the son-in-law, causing his death.”

Relational Loyalty and Sacrifice

Some women became involved in unlawful activity at the urging of loved ones, with emotional loyalty making refusal difficult. Traditional Thai familial norms encourage women to be selfless, nurturing and prepared to make sacrifices for their family’s well-being (Xu et al., 2011). One woman was criminalised for drug possession after police found narcotics in the home she shared with her son. She neither used nor sold drugs and was unaware of his involvement, but as the homeowner, she was held liable when he refused to claim responsibility. Prison staff observed that “some women admitted guilt to protect a family member, particularly when drugs were found in a shared residence, confessing to shield relatives who lived with them”. Likewise, another group noted that “the [adult] children commit the fraud and use the elderly relatives’ names to open the bank account. When they get charged, it is the elderly person who goes to prison, and the children get away.”

Isolation, Disconnection and Prison as a Refuge

Prison staff noted a small but significant group of older women who came into conflict with the law deliberately because “outside, there is nobody to look after them. Inside, there is social contact, people to talk to, and someone to care for them.” Prison offers connection and care – both emotional and material. Staff recalled women openly admitting that “when we enter, the medical staff make sure we get the medicine, so my health can improve here”.

Barriers to Justice

Many participants faced significant procedural disadvantages at the point of arrest and charging. Women described signing police documents they could not fully understand due to limited formal education, and said they felt pressured or coerced by officers. For example, one woman recalled that “from the moment I was at the police station, I was blank. They forced me to sign. I signed because I was scared.”⁹ Access to competent legal representation was similarly constrained. Many women lacked the financial resources to retain private counsel and were therefore reliant on court-appointed lawyers. However, these lawyers were often described as overburdened and minimally engaged. As one woman explained, her lawyer advised her that “it is better if you confess because the sentence will be more lenient”. The promised leniency never materialised. Prison staff corroborated these concerns, noting that older women in prison rarely had access to competent or proactive legal counsel.

Prison Life

The Bangkok Rules acknowledge that women are particularly vulnerable at the time of admission to prison, and some scholars have noted that this transition is especially distressing for those imprisoned for the first time later in life (Aday & Krabill, 2011).

These patterns were evident in the present study, where arrest and imprisonment were a profound shock for many older women. Most had no prior experience of incarceration, and the abrupt transition to prison life was intensely distressing. One woman said it was “a very unexpected event in my life. It was hard for me to accept.” Another said, “Everything inside is very difficult because it is something I’m not familiar with. The hardest thing is adjusting.” Several felt they were “losing [their] mind”, crying daily, and some experienced rapid physical decline. One woman lost 9 kilograms in a month due to stress, loss of appetite and insomnia. Adjustment often took months or years, with family contact, peer support, prayer and meditation helping women cope.

Contact with the Outside World

Maintaining family connections was vital to older women’s well-being in prison. While some benefited from regular visits, others received none, leaving them feeling isolated and without hope. Separation was described as one of the hardest aspects of imprisonment, with women explaining, “I want to go home so bad, that’s the worst.” One woman said that the thought of her mother waiting to hold her stopped her from taking her own life. Visits with loved ones could also be painful, with one woman recalling the angst she felt every time her mother asked, “When are you coming home?” Another woman asked her family not to visit too often because seeing them made her miss them more.

Geographic distance was a major barrier to family contact, with travel costs making visits unaffordable, especially for rural families.¹⁰ “It’s far, the roads are dangerous, and fuel is expensive,” one woman explained. Many relied on video calls as a cheaper option, but these were short, noisy and lacked privacy. One woman explained that she “only gets to use video call once a month. I can’t really focus on, hear, what my relatives say.” Digital literacy was another obstacle, as some older relatives could not manage the app used to make video calls: “My older sister didn’t know how to do a virtual visit, so I let go.”

Families also provided practical support that reinforced women’s sense of being loved and remembered. One woman said her brother deposited money into her account each month, reassuring her that “everyone is okay out there”. Another woman’s family sent food and money. She said, “I’m good. My children still take care of me, and they still love me.”

Social Life

Life in prison brought both connection and isolation for older women. Overcrowding and shared spaces with women of different ages and backgrounds could lead to conflict. “Everyone living together in one place, it was difficult,” one woman said, while another recalled, “They usually fight all the time. There were daily fights inside.” Disputes arose over scarce resources such as bedding. “The space is limited. Sometimes people argue because of the bedding space.” Age differences also created friction, as “the younger ones get frustrated with the older ones being slow”. Relations with staff could be stressful, with some women reporting that officers became impatient or “snapped” at them for moving too slowly. Many coped by strictly following rules or withdrawing socially, explaining that “I don’t really socialise. I usually stick with another friend, and that’s it.”

Yet prison could also foster inclusion; separated from families, many women found comfort in friendships that offered support and a space to “share any worries and struggles”. “We huddle up and look over each other,” one said. Positive staff relationships were equally important. “They take good care of me. They were very, very nice,” explained one woman, while another described officers who “encourage me, give me a good mindset”. In one facility, staff close in age to older women created “a nice sort of shared experience”. Such connections functioned as vital lifelines, helping women cope with isolation, loneliness, and emotional strain.

Hygiene, Health and Well-Being

Staff described a range of measures to meet older women’s health needs, including regular screenings, accessible facilities (ramps, railings, seated toilets) and flexible routines such as earlier showers and meals. Younger women sometimes assisted with daily tasks, while diets were modified to include less salt and sugar and more protein. Exercise was encouraged through aerobics, yoga and stretching: “We exercise every day, yoga gestures help me stretch.”

In all facilities, women aged 60 years or older, as well as women living with disabilities, were housed in a special needs unit located on lower floors near the medical unit, enabling easier access to healthcare. Women in these units consistently described better conditions than those available to the general prison population. They praised timely healthcare, medication continuity, and more accessible facilities and routines, including better opportunities to maintain personal hygiene. In contrast, women aged 50–59 years were generally housed with the mainstream prison population, an arrangement many found stressful. For example, showering in this context was described as particularly difficult, because unlike those in the special units, “We have such limited time. We need to do our laundry and shower at the same time. You have to scramble or fight to get access to the

taps.” One woman even “requested the early shower slot, so I can have more time, but the prison staff didn’t allow that”. She suggested that special needs accommodations should be extended to women aged 50–59.

Overcrowding was a major problem, limiting access to clean water and sleeping space (for women outside of the specialised units); as one woman explained, this contributed to outbreaks of lice and scabies. For women in the mainstream prison population, poor ventilation and cramped beds disrupted rest. Overcrowding also strained medical facilities; health checks were irregular, and treatment was often confined to immediate visible symptoms. Medication shortages were a problem, leading one woman to remark that “there’s a sort of saying that paracetamol fixes everything”. Others recalled being denied treatment, such as waiting two days with a high fever after being refused antibiotics. Women whose families could not provide medication or financial support were especially disadvantaged. One woman noted, “You need money to survive, otherwise, it is very difficult.”

Emotional well-being often declined in prison, with separation from family the most significant source of distress. Some women entered with existing mental health conditions and continued treatment, such as one whose daughter arranged delivery of her antidepressants. Others found relief in group activities and counselling. “They arrange activities like drawing to release my stress,” one woman said, while another explained, “We get to speak out, see counselling services, and play games together.” Access, however, was inconsistent between prisons. One woman noted that “there’s no such service available at all”, while another remarked, “It would be great if there were any programme related to the improvement of mental health.”

Programmes and Activities

Many women spoke positively about opportunities to gain knowledge and skills through education, vocational training and work programmes. Only a few pursued formal education, but all participated in vocational training or worked at some point, often learning skills they had never developed outside. “I joined the bakery, flower making, and sewing. When I was at home, I didn’t get a chance to do all this because I had to raise my kids and run my business,” one woman said.

Programmes were also valued for their therapeutic benefits, helping women feel productive, manage stress and pass the time. “The vocational programme made me focus on my work, not overthink. When I did embroidery beautifully, I felt proud,” one explained. Others described music and shows that “keep you relaxed, make you peaceful”, while some found meaning in caring for babies born in prison: “This helps me mentally, it reduces my stress.” Religion and meditation also supported adjustment. “Prayer gives us a calm heart,” one noted.¹¹

There were also material benefits. Most women undertook paid work, with wages deposited into their prison accounts, which they could then use to buy items such as snacks and toiletries from the prison shop. Alongside this, some performed unpaid tasks for peers, which were rewarded informally with goods, favours or small privileges such as snacks, lotion or extra shower time. Participation in programmes could also earn points towards a higher prison rank. One woman explained that she “joined every programme because the certificates make us eligible to move up in rank”. Advancing in rank was significant, as it granted certain privileges within prison and could also shorten time in custody.¹²

Some women were excluded from programmes because of their sentence length and age. As one explained, “People with shorter sentences are not eligible.” This reflected the fact that many courses and activities required extended participation, making them more suitable for those serving longer terms. Others were told they were “too old” for certain activities, including paid work. For women who had lost contact with their families, working was often necessary to meet basic needs inside prison. Those who did work earned very little. For example, one woman reported US\$2.75 per month for folding plastic bags. Many women expressed anxiety about financially burdening their relatives. As one explained, “My daughter can only barely support me, so I feel sorry for her.”

Returning Home

Pre-Release Planning

Staff and women described the transition back to community life as lacking sufficient preparation time and being under-resourced and poorly matched to older women’s needs, leaving them inadequately prepared for release. Pre-release programmes were available, but they varied widely in content, duration and quality, and were often insufficient to address the complex realities faced by women. Two main types were provided. The first was a general pre-release course covering budgeting, “various agricultural practices,” and other self-sufficiency skills. Some women found the agricultural component irrelevant to their circumstances, noting that they had “no land or a family farm to go back to,” and “you can be a little too old to be farming.” Others agreed it was only useful for younger women with land to cultivate. Although some older women in this study had

family-owned land prior to their incarceration, it was often sold during their imprisonment. These sales were used to pay debts, cover legal fees, meet household costs, or provide financial support to the women while they were in prison. Additionally, farming is physically demanding and pays only a modest income, meaning it may not be a viable option for those experiencing functional decline (Sunanta, 2009).

The second programme was designed for older women, with staff explaining that it placed greater emphasis on health, diet, relaxation, and vocational skills “based on the physical capacity for the kind of job that the elderly can do.” Families were occasionally invited to join pre-release programmes to help rebuild connections and support women after release. Relatives were also contacted in advance to discuss housing and work arrangements. The staff emphasised that, compared with their younger counterparts, older women often had more complex needs. They explained that older women “need more information than usual. They must be prepared for where they will stay, and some are ill or bedridden with no one to care for them after release.” Other prison staff added, “if we know months in advance that an older woman is returning to a rural village, we can connect her to the right people. Waiting until a week before is too late.”

Chronic illness was widespread among older women, making continuity of healthcare critical after release. Common conditions included hypertension, diabetes, kidney disease, and mental health disorders. In principle, prisons aimed to support a smooth transition to community healthcare by preparing medical records, issuing a health release form, and providing up to two months of medication, along with referrals to local hospitals and mental health service providers.

Family Reunification, Accommodation, and Employment

Across the interviews, family emerged as the central focus in women’s journeys home. Most women planned to live with relatives, “prioritise my family” and “compensate for the time I’ve been in prison”. For many, the hope of reunion was their main motivation. One explained that her “family is the most important. The rest of my life, I will spend with my family. I will pay for the kindness of how they still cared and looked after me.” Yet, staff and women acknowledged that reunification was not always possible. “Elderly women want to go back to their families, but sometimes they don’t know if their relatives will accept them back.” For those without supportive relatives, prisons arranged accommodation with the help of civil society, including charities operating halfway houses and Buddhist temples.¹³

Access to stable and sufficient income, alongside secure housing, was central to a successful transition after release. Staff emphasised the importance of equipping women to “raise money and have a life” and explained that they provide information on realistic post-release income-generating opportunities. Prisons tried to connect older women with welfare agencies and register them for the state pension. On release, women received small sums for “food and transport for the first few days”, but this was inadequate for long-term stability. A lack of inter-agency coordination was a major barrier. Prison staff noted a “gap” between prison preparation and outside support, with women frequently left without direction; resources were limited, and, as they moved from place to place, many were lost from the system.

Older women faced overlapping barriers to economic independence after their release. The first relates to physical limitations and declining stamina. “By the time you’re 50, you tire easier. It’s exhausting to go back to the way you were before. You’ve lost that fire,” one explained. Many had spent their lives in informal, physically demanding work, making the prospect of continuing this labour after release especially daunting: “A lot of hard work, a lot of physical work. I’m already old.” The second barrier concerns employers’ reluctance to hire older women. “It’s hard to get hired [as an older woman]. Except maybe as a housemaid,” one woman said. “But even then, we tire quicker.”

Stigma and Shame

The impact of imprisonment extends beyond the sentence itself, producing stigma and shame that shape how women are treated, how they see themselves and how they navigate life after release. In Thailand, these effects are particularly pronounced because of the cultural importance of “saving face”, which links personal dignity and social standing to both how others perceive you and how you perceive yourself (Persons, 2016; Ukosakul, 2009). Behaviour deemed morally unacceptable results in losing face (Lim & Basnyat, 2016; Loo & Tandamrong, 2022). For formerly incarcerated women, this loss of face is compounded by normative gender and age expectations. Older women are judged not only for violating criminal law but also for failing to meet societal norms of femininity and the higher moral standards expected of women in later life, including being virtuous, wise, socially responsible and serving as role models for younger generations (Arampibulkit, 2023; Xu et al., 2011). In other words, older women in conflict with the law in Thailand face compounded, multifaceted stigma.

This was clearly articulated by both prison staff and the women themselves. Community stigma was immediate and tangible: “They [the community] look at me negatively. No matter how well I do, they only see my bad.” In small rural communities,

negative social perceptions proved particularly resistant to change. Expectations of gender- and age-appropriate behaviour are stronger in these areas, where social cohesion is high (Arampibulkit, 2023). As a result, older women from rural areas reported avoiding public spaces to escape “gossip”, leading to feelings of disconnection and loneliness. One woman, comparing prison life with the outside world, noted that at least “in here [prison] I have people to talk to. Outside, I am alone.”

The women were also affected by internalised stigma and shame. One said: “The stigma is unavoidable, even within yourself. You feel the same sort of revulsion. You feel particularly self-conscious.” Staff made similar observations, noting that “the elderly tend to be more conservative. Once they are stigmatised, they can’t let it go. Younger people are more chill; they might be able to move on faster.” Feelings of shame and stigma were exacerbated by internalised ageism. Several women felt that being older gave them “a sense that you have no use, no purpose”. This was often discussed in the context of employment: “You’re old, you can’t work as well. Society views younger women as more useful.” Thus, some women felt they were “a burden for our children or grandchildren”, which caused shame, as “it is our pride to be able to find money”.

Engaging in criminalised behaviours can bring dishonour to family members, causing them to lose face in the community (Haritavorn, 2014; Kittikorn et al., 2006). One woman reflected on this impact, saying that “being imprisoned is very stigmatising. It hurts my family’s feelings. My mum, it breaks her heart.” The social consequences of imprisonment also limited livelihood opportunities, as “employers wouldn’t accept [women] who have been through prison. People wouldn’t trust them.” Prison staff emphasised that supportive community attitudes were central to whether women could rebuild their lives after release. As one officer explained, “Society needs to give them opportunities, take responsibility for them, and look after them, because after all, they’re just like anyone else.”

Discussion

This study highlights the vulnerabilities shaping older women’s lives before, during and after imprisonment. Criminalisation was often rooted in financial precarity, caregiving responsibilities and histories of violence. Life inside prison for older women was marked by profound emotional shock, uneven access to age-sensitive care, overcrowded and strained living conditions and, for some, fragile family connections and social isolation. At the same time, women identified important sources of resilience in peer bonds, religious practice and programme participation (when accessible), as well as in supportive relationships with staff and, when possible, continued contact with loved ones. Re-entry support was limited, leaving many older women reliant on family, charities or temples. Scarce employment opportunities, stigma and shame further hindered their ability to rebuild their lives after release.

These findings extend feminist criminological scholarship on women’s criminalisation, imprisonment and release. They suggest that age warrants closer consideration within gender-responsive reforms inspired by the Bangkok Rules. Although the Rules recognise women’s distinct experiences within the criminal justice system, the accounts presented here indicate that older women’s needs may not always be adequately addressed in practice. Greater attention to how ageing intersects with gender could therefore strengthen policy and service responses for women in conflict with the law.

Reducing older women’s involvement in the criminal justice system requires greater attention to the conditions that shape their lives, including economic insecurity, caregiving obligations, weak protection from violence, and barriers to legal representation. Measures such as improved income support and more responsive services for those experiencing domestic and family violence could help to reduce reliance on unlawful survival strategies (Arampibulkit, 2023). Older women also need access to competent legal representation and age-sensitive advocacy throughout the court process to ensure that their circumstances are appropriately understood and considered.

In prison, there may be scope to further tailor services and conditions to the needs of older women. This could include specialised orientation, more accessible healthcare and fewer restrictions on participation in work, programmes and other activities, where appropriate. Women aged 50 years and older could be given the option of residing in specialised units for older people or of receiving age-responsive modifications within mainstream prison settings. Maintaining family contact remains central to older women’s well-being and could be strengthened by supporting in-person visits, particularly for families facing geographic and financial barriers, alongside improved virtual communication options that ensure privacy, adequate time, clear audio and accessibility. Women may also benefit from earlier and more coordinated pre-release planning. Given the powerful role of stigma and shame in shaping post-release outcomes, community-level efforts to challenge negative perceptions of formerly incarcerated women may also be important in fostering greater social acceptance.

By embedding sensitivity to both age and gender at every stage of the criminal justice system, Thailand can build a more just, inclusive and effective response to older women in conflict with the law. The Bangkok Rules provide an important framework

for advancing gender-responsive justice, but their promise will only be realised when the specific realities of older women are more systemically addressed in policy and practice.

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¹ Economic marginalisation plays a key role in many women's criminalisation pathways, intersects with familial economic provisioning and is exacerbated in cultural contexts where women's responsibilities extend beyond the nuclear family (Jeffries et al., 2020). Thai women are expected to fulfil the role of a dutiful daughter, meeting the needs of both immediate and extended family, including providing financial support (Sunanta, 2009).

² Thailand employs a behaviour-based stratification system rather than a security-risk custody classification model such as maximum, medium or minimum security. This classification system consists of five tiers: (1) very bad; (2) bad; (3) medium; (4) good; and (5) very good. First-time imprisoned persons enter prison at the "medium" level, whereas second-time imprisoned persons enter at the "bad" level and third-time imprisoned persons at the "very bad" level (Thailand Institute of Justice, 2021, p. 16). The lower a woman's classification, the fewer rights and benefits she receives. For example, those classified as bad or very bad may have family visits restricted and are ineligible for sentence reductions and Royal Pardons (Oliver et al., 2017, p. 795). Reclassification to higher behavioural categories is determined through a six-monthly administrative review of institutional conduct, rule compliance and participation in work or rehabilitative activities, with progression linked to increased privileges (Thailand Institute of Justice, 2021, p. 16; Oliver et al., 2017, p. 795).

³ In Thailand, the monarch may reduce or cancel prison sentences either individually, following a petition, or collectively through a Royal Decree (Junlakan et al., 2012).

⁴ Since the 1960s, Thailand has undergone rapid industrialisation, which has resulted in widened inequality in the distribution of resources between rural and urban regions, with wealth concentrated in the cities while the countryside is further marginalised (Sunanta, 2009).

⁵ It was not until 1999 that Thai education reforms proposed increasing compulsory education to 12 years of age. Until the 1970s, few Thai children pursued education beyond Grade 4 (Michel, 2010).

⁶ There is a growing trend, particularly in rural Thai communities, for parents to migrate to the city to participate in paid employment, leaving their children behind in the care of grandparents (Ingersoll-Dayton et al., 2020).

⁷ Daughters have filial responsibilities to support the physical, emotional, and financial wellbeing of their ageing parents (Le Mare et al., 2015).

⁸ Although domestic violence is criminalised in Thailand, in practice it continues to be treated largely as a private issue, with limited institutional protection for women (Chuemchit et al., 2018; Jeffries et al., 2024; Xu et al., 2011).

⁹ Previous studies have found that policing in Thailand has involved various injustices, human rights abuses and corruption, particularly in relation to the enforcement of drug laws. For example, respondents in Hayashi et al.'s (2013) study reported being falsely accused, police planting evidence on them, being coerced to make a false confession and being compelled to sign a blank document.

¹⁰ In Thailand, the allocation of women to prisons takes into account both the location of their offence and the length of their sentence. As a result, many women must serve a significant portion of their sentence far from home. District and provincial prisons closer to their communities are generally unable to accommodate women sentenced to more than 10 to 15 years (Thailand Institute of Justice, 2014).

¹¹ The rehabilitative effects of religion in the lives of older women in prison have been documented in previous studies by Aday et al. (2014) and Lucas et al. (2018), which highlight that religion can provide a source of strength, enhance morale, foster comfort and instil hope for the future.

¹² See note 1.

¹³ In Thailand, Buddhist temples go beyond their religious functions, serving as centres of community organisation, education and social welfare. They are vital social hubs, particularly in the context of criminal justice rehabilitation (Saithong et al., 2025).

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