

Opportunities and challenges for post-prison women employed as caregivers for the elderly in Thailand

Wirin Kittipichai¹, Suphawadee Panthumas¹, Nithirat Boontanon²

¹Faculty of Public Health, Mahidol University, Bangkok, Thailand

²Metropolitan Health and Wellness Institution, Department of Health, Ministry of Public Health, Thailand

Corresponding Author: Wirin Kittipichai **Email:** wirin.kit@mahidol.ac.th

Received: 5 May 2024 **Revised:** 16 August 2024 **Accepted:** 23 August 2024 **Available online:** January 2025

DOI: 10.55131/jphd/2025/230109

ABSTRACT

This study seeks to explore the perspectives of elderly care organizations and households with elderly members concerning the employment of post-prison women as caregivers for the elderly. Data were collected through in-depth interviews with representatives from 27 elderly care centers and questionnaire interviews with representatives of 560 households in five areas where women's correctional institutes are located in Thailand.

The findings revealed that 19 enterprise executives and 74 percent of household representatives held similar views on this issue. Specifically, among 21 elderly care centers, there was a tendency to hire post-prison women to work as caregivers. Conversely, it is worth noting that this issue is sensitive both on an individual level and for society as a whole. Therefore, it was advised against having former prisoners engage in home-based elder care. This recommendation stemmed from concerns that it could compromise the trust and safety of service users. Meanwhile, household representatives believed that individuals with a history of serious crimes should not be involved in caregiving. This was considered a crucial factor in determining whether to opt for nursing home services or hire caregivers for elderly individuals receiving care at home.

Therefore, it is recommended to establish a coordination center for various departments to collaborate. This center would oversee tasks including identifying qualified post-prison women, providing training courses for elderly caregivers, engaging in public relations, and coordinating with agencies seeking to hire caregivers. This initiative aims to facilitate the employment of women with previous convictions, empowering them to achieve sustainable livelihoods.

Key words:

ex-offenders; elderly; caretaker; employment; nursing home

Citation:

Wirin Kittipichai, Suphawadee Panthumas, Nithirat Boontanon. Opportunities and challenges for post-prison women employed as caregivers for the elderly in Thailand. *J Public Hlth Dev.* 2025;23(1):119-131 (<https://doi.org/10.55131/jphd/2025/230109>)

INTRODUCTION

The studies on class have revealed social differentiation. According to Bourdieu's work, it was discovered that individuals vary across various dimensions such as physical body, intelligence, abilities, profession, and work position. Society categorized occupations based on work patterns, types, and required skills, thereby enhancing the value and significance of each profession. However, such differentiation does not inherently denote the quality of individuals within the society. Nevertheless, it generates individual differences which create social gaps and eventually lead to social inequality.¹ Several studies refer to underserved populations, and factors contributing to the vulnerability consist of poverty, being minority groups, and experiences of incarceration or restricted freedom.²⁻⁵ According to criminal acts, prisoners must be punished once the verdicts have been reached.⁶ Once a person is found to be guilty and then punished by law, the sentence is expected to be proportionate to the seriousness of the offense. However, social sanctions reproduce the punishment after the person is released from prison. Stigma is perpetuated by labeling individuals as prisoners and denying them their rights and the opportunity to begin a new life post-release.⁷⁻⁸

Stigmatization of prisoners after their release from prison continues to exist in Thai society. Thailand's recidivism statistics 2020-2023, the recidivism rate of Thai offenders within one year after release was 13.04%, 11.96%, and 17.13%, respectively. When examining the statistics of repeat offenses within a 2-year and 3-year period between 2016 and 2020, the average recidivism rates were 25.44% and 33.67%, respectively.⁹ This indicates an upward trend of recidivism among former prisoners. According to previous studies, recidivism among former prisoners was the result of the following reasons: family

members did not accept these prisoners, society did not offer them opportunities, and the prisoners were unemployed after release.¹⁰⁻¹¹ As well, in the United States, about 90% of recidivists in prison were unemployed.¹²

Thailand has become a completely aged society.¹³ It is anticipated that by 2031, Thailand will transition into a super aged society, with the percentage of elderly people comprising 28% of the population. The estimated dependency ratio in Thailand for 2027 suggests that 100 working-age individuals will be needed to support 64 dependents.¹⁴ The working-age population is increasingly tasked with the responsibility of caring for both children and the elderly, all while needing to support their families through work. Based on forecasts, in 2020, there were projected to be 741,766 elderly individuals in need of caregiving support, accounting for 6.9% of the elderly population that year. Additionally, there was a demand for 105,967 elderly caregivers, resulting in a ratio of 1 caregiver for every 7 dependent elderly individuals.¹⁵

An elderly caregiver refers to a person providing care for the elderly, the person may work at elderly care enterprises, elderly homes, or in communities. A caregiver could be a homeowner or a professional caregiver being hired to provide care to the elderly.¹⁶ Roles of an elderly caregiver include providing physical care and emotional support, as well as assisting clients to do their daily activities.¹⁷ Furthermore, when caring for a bedridden elderly individual, the caregiver's responsibilities increase, as they must attend to the individual's excretion and hygiene needs. These tasks highlight the essential qualities required of an elderly caregiver, including patience and willingness to handle such tasks. The working conditions of an elderly caregiver, such as dealing with waste, the physical burden, and the repetitive nature of the job, may deter many Thai workers from

pursuing this occupation. Caring for the elderly is a service job that continues to face shortages and is in demand in the Thai labor market.

Thailand's Department of corrections and Department of health service support provide health services for prisoners, and some of them have been trained to provide care and assist health professionals, called Prisoner Health Volunteers (PHVs). They must be trained through the standardized training program for Village Health Volunteers (VHVs) adjusted for prisoner training. Under the supervision of prison health professionals, PHVs are able to provide basic health care services for prisoners such as first aid, health screening, education on health promotion, and monitoring patients referred from hospitals. It is likely that those who volunteer to be PHVs are interested in work related to healthcare services.¹⁸ If this group of prisoners obtain additional training in elder care, they will be more skillful, knowledgeable, and capable of becoming elderly caregivers. Currently, a career in elder care is more likely to provide a higher income. If former prisoners can pursue it, they will be able to earn income and provide for their families, which will diminish the likelihood of recidivism.

Former prisoners belong to a vulnerable group and have limited job opportunities. In the meantime, the elderly caregiver job is an in-demand occupation on the job market. If society is in favor of former prisoners taking up elderly caregiver occupation, recidivism, presumably, will be diminished. Former prisoners are likely to be hired to work as elderly caregivers when all stakeholders accept former female prisoners and provide them opportunities, especially health care facilities (employers) and elderly households (a group of people that use the services). Nevertheless, this is a new issue.

The information available to provide insight into the possibility of developing elderly caregiver careers for former prisoners is insufficient, which provides the rationale for the current study.

Therefore, the aim of this study was to explore the outlooks of executives of elderly care enterprises and representatives of households with elderly members concerning the employment of post-prison women as caregivers for the elderly.

METHODS

Study Design and Participants

A survey study was conducted using both in-depth interviews and questionnaire interviews to collect data. The study population consisted of administrators of elderly care facilities and representatives of households with members aged 55 years and over, with a focus on the hiring of female ex-convicts as caregivers for the elderly in Thailand.

The sample size calculation employed a formula for estimating an infinite population proportion with the cluster-sampling method.¹⁹ A total of 538 subjects were required, yielding a proportion of 0.5, an error of 0.05, and a design effect of 1.4. Meanwhile, the Local Administrative Organization defined it as a cluster. The number of clusters in each area was determined based on the percentage of the elderly population in the province. A total of 27 clusters were included, with 6 clusters each from the Central and Northern regions, and 5 clusters each from the Eastern, Northeastern, and Southern regions of Thailand, where women's correctional institutes are situated in corresponding provinces. In total, 560 household representatives participated, with an allocation of 20-22 representatives per cluster. Additionally, representatives from 27 elderly care enterprises were included. Both representatives from households and

elder care facilities could understand and speak Thai, and must be willing to participate in this study and sign the informed consent forms to be selected.

Ethical considerations

This study was approved by the Ethics Review Committee for Human Research of the Faculty of Public Health, Mahidol University, COA no. MUPH 2019-133 on October 28, 2019. The study was conducted in accordance with the Declaration of Helsinki.

Research instruments

The study employed two instruments, validated for content by three experts in family medicine, adult and elderly nursing, and behavioral sciences. The instruments attained an IOC index of 1. Firstly, a questionnaire was administered through face-to-face interviews with household representatives. It contained 15 items, including multiple-choice and open-ended questions, related to information about participants' personal details, household composition, utilization of elder care services, and opinions on opportunities for post-prison women to work as elderly caregivers. The second instrument consisted of a set of semi-structured interview questions, which were employed to conduct in-depth interviews with representatives of elder care facilities. These questions included: (1) What are your views on establishing a vocational training program in elderly care for female prisoners, aimed at equipping them with the skills needed for legitimate employment after their release, while also addressing workforce needs in an aging society? (2) How do you perceive the idea of former female inmates working as elderly caregivers? (3) What would be your reaction if a person released from prison, who has met elderly care standards, applied for a position in your nursing home? (4) What are the top three factors that would influence your decision to hire a trained and

certified elderly caregiver who is a former inmate? and (5) If you were to employ ex-inmate caregivers, what would be your top three concerns? This guideline focuses on the requirements for elder care services and perspectives on the challenges related to the employment of post-prison women as elderly caregivers.

Data collection

The study gathered data between November 2019 and March 2020. The research team, including village health volunteers, conducted home visits to explain the study to household representatives. Those who agreed to participate provided informed consent and completed a 10-minute questionnaire interview. For representatives of elderly care enterprises, researchers met them at their workplaces to explain the study. These participants underwent a 30-minute in-depth interview. All participants were informed of their rights and could opt out at any time if they felt uncomfortable or wished to withdraw from the survey.

Data analysis

Quantitative data were analyzed using descriptive statistics, including frequencies, percentages, means, and standard deviations. Text data were analyzed through content summarization.

RESULTS

A total of 560 household representatives were surveyed, with 375 individuals (67%) being female, ranging in age from 19 to 92 years (Mean \pm SD = 56.45 \pm 14.31). A total of 421 (75.2%) graduated from high school or less. Number of household members ranged from 1 and 14 (Mean \pm SD = 4.07 \pm 1.85), and 493 households (88.0%) had 2-5 members. In addition, the number of older persons in households ranged from 1 and 5 (Mean \pm SD = 1.57 \pm 0.72), and 520 households (92.9%) had 1-2 elderly individuals. 62% of

respondents were children of older persons in the households. It was found that only 5% of households had used services from nursing homes.

A total of 27 private nursing homes were interviewed: 11 in Bangkok, 6 in Chiang Mai Province, 4 in Songkhla Province, 3 in Nakhon Ratchasima Province, and 3 in Chonburi Province. These nursing homes offer three types of

services: overnight care, non-overnight care, and in-home caregiver services. The service offerings vary by center. Of the 27 centers, 15 provide overnight care, 6 offer both overnight and non-overnight care, and 3 provide all three types of services. Additionally, 2 centers offer overnight care in combination with other services, while 1 center focuses solely on in-home caregiver services.

Table 1. Information of household representatives who agree with employment of post prison women as caregivers for the elderly (n = 414).

List	Number	Percentage
Gender		
Female	271	65.5
Male	143	34.5
Age (year)		
< 45	103	24.9
45 – 59	126	30.4
60 – 69	116	28.0
≥ 70	69	16.7
Personal monthly income (Baht)		
≤ 10,000	168	40.6
10,001 – 20,000	135	32.6
> 20,000	57	13.8
No income	54	13.0
Number of household members (person)		
1 – 3	165	39.9
≥ 4	249	60.1
Number of older people in the household (person)		
1	199	48.1
2	184	44.4
3 – 5	31	7.5
Experienced using service at an elder care center		
No	400	96.6
Yes	14	3.4

Table 2. Opinions of households regarding the employment of post-prison women as caregivers for the elderly (n = 560).

List	Number	Percentage
Hiring post-prison women as caregivers for the elderly		
- Agree	414	73.9
<i>With their reasons (Option)</i>		
Opportunities and options (n = 133)		
Requires training and work at the nursing home only (n = 30)		
Occupation can bring about lasting behavioral change (n = 3)		

List	Number	Percentage
- Disagree	146	26.1
<i>With their reasons (Option)</i>		
Lack of trust in behavior (n = 26)		
Worry or fear (n = 23)		
Occupation unsuitable for post-prison women (n = 11)		
Uncertainty about service quality (n = 3)		
Using Services from nursing homes with post-prison women as caregivers		
- Use services	169	30.2
- Use services but depend on their history of past crimes	145	25.9
- Do not use services due to lack of trust or fear	38	6.7
- Uncertain	208	37.1

Opportunities for post-prison women working as caregivers for the elderly

Administrators from 19 out of 27 elderly care facilities (70.4%) expressed support for individuals with a history of incarceration working as caregivers for the elderly upon their release from prison. **First**, they viewed that post-prison women should have the right to engage in work. Also, a caregiving occupation is a lawful occupation. Therefore, these prisoners deserved a second chance when they realized their wrongdoing, especially those who did not commit serious crimes or accidentally committed crimes. *"Individuals who have served their legal sentence for a crime deserve the opportunity to rebuild their lives. This is particularly true for those who committed offenses without malicious intent. Society has a responsibility to offer reformed offenders chances for employment and legitimate pursuits, enabling their reintegration."* **Next**, after release from prison, ex-convicts may not pursue a caregiving occupation; but they could use the skills obtained from the training program on elder care with nearby people. *"Acquiring healthcare knowledge is beneficial. Even if not pursued as a career, this knowledge can be applied to care for family and friends"*. However, the administrators viewed that former prisoners should not provide elder care at home because it was a sensitive issue concerning an individual and society; it affected the sense of trust and safety of those who

utilized services and people related to them. *"Client discomfort with caregivers who have criminal histories and public perceptions of ex-offenders may create social tension. If possible, former inmates might be better suited for roles in centralized facilities rather than direct care positions."*

As for the opinions among household representatives, it was found that 74% agreed with the challenging idea of post-prison women working as caregivers for the elderly. They gave four reasons to support their viewpoints. **First**, it offered post-prison women job opportunities that could generate sustainable and sufficient income for them. If past offenses resulted from insufficient earnings, having sustainable and sufficient income would prevent recidivism. **Second**, it provided a place in society for former female prisoners to rebuild new lives where the prisoners could improve themselves, whether or not they chose to take up careers in elder care. If society offered them opportunities, these prisoners would have more options. *"People who have made mistakes and sincerely wish to change should be given the opportunity to start anew. Without this chance, they risk becoming trapped in a cycle of limited options and no income, which could ultimately lead them back to illegal activities."* **Third**, it was suitable. However, the prisoners must be screened and well-trained by the Department of Corrections. The prisoners were affirmed that they had truly changed their behaviors.

Their good behavior after release from prison should be approved by the Department of Corrections. In addition, they should have a passion for providing care for elderly people. *"Caring for the elderly demands a service-oriented approach, to ensure the highest standards, individuals are only permitted to provide elderly care if they are certified by the Department of Corrections. This certification confirms that they have undergone thorough vetting, demonstrated trustworthiness, and completed state-approved training in elderly care."* Besides, they must work at nursing homes where staff work together and operate under the chief's supervision. They were not supposed to be hired or assigned to provide elder care at home. *"If employed, ex-offenders should be certified and supervised. In a facility setting, risks of potential harm to the elderly due to an ex-offender's anger or dissatisfaction could be mitigated by available staff. Home care scenarios present greater safety concerns due to lack of supervision."* **The last**, caregiving job would improve former prisoners' gentleness. The occupation could encourage prisoners to change their habits and become completely different individuals. *"People who have been in prison have gone through difficult times and likely don't want to return to that life. I'm not sure about their ability to care for the elderly, as the work requires delicacy. However, it might help them become calmer and more gentle"*.

On the other hand, 26% of household representatives disagreed with this issue by giving four reasons as follows. **First**, they did not trust former prisoners as these prisoners might recommit crimes or hurt elderly people. Especially, those newly released from prison were not reliable. *"Prisoners were criminals and untrustworthy I have seen how many people who come out of prison go back to*

committing the same crimes. Second, they felt scared and insecure when thinking about the offenses, although the prisoners behaved well. *"Often see stories like this on the news, and I wonder when it might happen to me. It might seem fine at first, but over time, who knows what could happen?"* **Third**, former prisoners should find other occupations. They should not be allowed to provide care for elderly people who are weak and cannot take care of themselves. *"There are many other career options, so why not pursue those instead? Caring for the elderly is challenging, especially since they are often frail and unable to care for themselves. Additionally, it may not be appropriate to assign this responsibility to them"* **Finally**, they were uncertain about the quality of the services provided. Caregivers who were ex-convicts may not be highly responsible and have less passion for work compared with other care providers. *"Even ordinary people find it challenging, so how can former prisoners handle it? They might lack responsibility, and it could be dangerous for anyone under their care."*

Challenging elderly care enterprises to hire post-prison women to work as elderly caregivers.

The findings indicated that 20 out of 27 establishment executives would be willing to consider hiring women post-prison, provided that these individuals, upon release, meet the established standards of care for the elderly. They gave the following reasons: there is a shortage of elderly caregivers, especially Thai elderly caregivers. *"All information about the employees will be kept strictly confidential and will not be disclosed to others unless the employee voluntarily agrees to share their information."* Besides, this would offer opportunities to former female prisoners upon release. Employers were willing to keep the prisoners' records

confidential, ensuring that the information would not be revealed to coworkers or clients without the prisoners' consent. *"Currently, there is still a high demand for elderly caregivers. However, most individuals who have undergone training end up working in elderly care only temporarily, often while waiting for other job opportunities. This may be because elderly care requires a lot of patience and can be stressful. To excel in this field, one needs to have a genuine passion for the work or a strong necessity, such as previous experience caring for family members, which develops into skills that are then enhanced through further training to pursue it as a profession."* Meanwhile, recruiting post-prison women to work as elderly caregivers required careful consideration of their qualifications, especially their attitudes, dedication to work, mental state, ability to manage emotions and stress, criminal records, type of past offenses, and motives of crimes. Documents of mental state examination issued by the Department of Corrections might be required. In addition, a probationary period is required once accepted. For the executives from elder care centers who refused to hire former female prisoners, they reasoned that post-prisoners might be lying while they were being screened or interviewed. Some administrators would rather hire those trained by elderly caregiver training centers. *"We can't be sure if former prisoners will genuinely reform. They might just be pretending to change to secure a job and earn money."*

As for factors affecting administrators' decision to hire trained post-incarcerated women with certifications to work as elderly caregivers, three main reasons were identified. The most important reason was the types of criminal offenses in the past, a job might not be offered if a person was convicted of assault and battery or drug offenses (80.7%). The second most important reason

was personal characteristics (46.31%) such as age, educational attainment, and physical appearance – elder caregivers were expected to have clean-cut images with no visible tattoos. The last reason was successfully passing a probationary period with a certificate of work experience stating the number of previous care cases, positive attitudes, and mental stability.

Challenging households to use care services for the elderly in facilities that employ post-prison women to work as caregivers.

Nearly 2 out of 5 household representatives expressed uncertainty about availing themselves of the care services. Meanwhile, about 30% would utilize the care services at elder care facilities with ex-convicts hired to provide care because there were several people who were not former prisoners working there, such as elderly clients and other employees. Besides, these post-prison women had attended vocational training and were certified to work as elderly caregivers, indicating that they had knowledge and skills, as well as a strong determination to change themselves and pursue lawful occupations. Accordingly, it can be said confidently that utilizing their services is safe to a certain degree. *"Let's give them a chance. Without it, they may face limited employment opportunities. They have completed training and are eager to build a better life, pursue a profession, support their families, and take care of themselves."*

However, about 26% of participants would utilize the services under certain conditions – the offense types. If it was a serious crime such as an offense resulting in death, the services would not be utilized. The smallest population, 6%, was the group being certain that they would not utilize the services because they did not trust the prisoners and worried that ex-convicts would re-offend. They felt insecure and afraid that they would be harmed if they went to the facilities to utilize the services.

Additionally, some participants reported that their families provided care for them. If there were post-prison women providing care at the centers, they would rather have their families take care of them.

DISCUSSION

Over 7 in 10 of the participants agreed that elder care facilities should hire post-incarcerated women to work as caregivers and wanted to use the services for the reason that it would provide opportunities and income for ex-convicts, and eventually they will be able to rely on themselves. In addition, post-prison women who were screened and trained by the Department of Corrections may not be perceived as worrisome. However, it was suggested that former prisoners should work at facilities because there would be other staff working with them. Besides, the chiefs could provide close follow-up care for elderly clients in the meantime. The majority of participants believe that former prisoners should not provide private services to elderly people, or the facilities should not assign them to provide services at clients' homes. These results indicate that those who are in favor of former prisoners working as elderly caregivers have some concerns about utilizing private elder care services. Assigning these former prisoners to provide care at home will lead to alone time between a care provider and an elderly person. This pattern of services is not acceptable.

Considering these findings, it appears that the apprehension and sense of insecurity among the general population may stem from concerns that former prisoners might struggle to handle the emotional distress of the elderly. Biological changes affect both the bodies and emotions of the elderly, resulting in being anxious, highly suspicious, moody, headstrong, and depressed. These

symptoms result from the decline of the brain function coupled with hormonal imbalances. The studies related to experiences of caregivers providing care for dependent older adults revealed that the caregivers suffered physical, emotional, and social stress from their jobs.²¹⁻²² Likewise, a study in the South of Thailand discovered that family caregivers generally reported high and moderate levels of stress, accounting for 49% and 43.7% respectively.²³ Accordingly, it is possible that when former prisoners are under pressure and criticized by the elderly clients, their negative emotions might be triggered and eventually result in violent reactions. Also, the mental states of former prisoners are another condition that supports or hinders elder care service utilization. A group of prisoners involved in homicide cannot pursue a career as elderly caregivers.

The majority of administrators agreed on hiring post-prison women to work as elderly caregivers. 4 out of 5 executives offered job opportunities to ex-convicts, meanwhile, six facility representatives disagreed. The latter group stated that post-prison women might be deceptive, irresponsible, and not trustworthy. Instead, they should do other jobs because providing care for the elderly is a delicate matter. It indicates that despite the fact that there was the promotion of former prisoners' skills and abilities in elder care provision, the attitudes of these elder care facilities remain negative and difficult to change. The attitudes might be derived from having heard the news about crimes or violent situations that have become worse nowadays such as rape and sexual assault, attempted murder or murder, and drug offenses.²⁴⁻²⁵ These offenses have been consistently reported in the media and could cause negative perception, which creates fear and feeling unsafe when being around former prisoners. Fear was the

emotional response to danger or threat that an individual experienced in a real-life situation.²⁶⁻²⁷

However, the majority of facilities were in favor of developing careers in elder care for post-prison women and were willing to hire them after they completed the training program. These facilities reasoned that it was to offer former prisoners employment opportunities while addressing the shortage of elderly caregivers. According to the aforementioned information, it is likely that the Thai workforce nowadays normally avoids work that is dangerous, difficult, and dirty.²⁸⁻²⁹ The career of an elderly caregiver contains two aspects: 1) it involves dirty work. Roles of caregivers in general involve bathing and handling waste such as solid waste, urine, and phlegm of the elderly. 2) It involves difficult work. That is to work under pressure and assist dependent older adults. In addition, caregivers must deal with pressure related to the elderly's emotional fluctuations due to medical problems and changes in hormones. Nursing homes might agree on career development in elder care; however, they are not willing to offer opportunities to all former prisoners to attend the training programs. These facilities suggested that former prisoners' characteristics must be screened thoroughly such as past offenses, motives, or criminal records prior to providing services. It is consistent with the results obtained from the household representatives, who imposed one condition that former prisoners must not be related to serious crimes or offenses against life and body.

The similar opinions given by elder care facilities and elderly households indicate that the type of offenses committed by former prisoners is a crucial point when considering hiring them or supporting them to pursue this occupation. The reasons that participants consider this issue important might be due to the fact that criminal behaviors are related to mental health

status. There were identified relationships between personalities, self-control, and criminal behaviors. It was observed that individuals exhibited varying personalities, leading to distinct responses to challenges, decision-making processes, and interactions with their environment. Furthermore, people with lower levels of self-control were found to be more prone to engaging in deviant behaviors and criminal activities.³⁰ Accordingly, both elder care facilities and households lay down one condition that training and work areas of former prisoners must be limited to nursing homes and elder care centers. The prohibited area of services is the clients' homes.

In conclusion, the study reveals broad support for employing post-incarceration women as elderly caregivers. Most enterprise executives expressed willingness to hire such individuals, while over 70% of household representatives approved their placement in nursing homes. Representatives of both groups viewed this employment as an opportunity for former prisoners to achieve self-reliance and considered the Department of Corrections' training and screening adequate. However, there was strong consensus on the need to evaluate past offenses when determining suitability for elderly care roles. They agreed that individuals with serious or violent criminal records should be restricted to nursing homes rather than in-home care. This approach balances the demand for caregivers with the need to maintain safety and trust in elderly care settings.

RECOMMENDATIONS

It is recommended to set up a coordination center for various departments to collaborate such as the Department of Corrections, the Department of Probation, the Ministry of Public Health, and the Ministry of Labor, Thailand, in occupational promotion i.e., elderly

caregiving job for post-prison women. The coordination center would operate the screening of female ex-convicts' qualifications prior to obtaining elder care training, the arrangement of elder care training, the compilation of trained prisoner lists, the advertisement, and employment. That is to stimulate the employment of ex-convicts and give them the opportunity to pursue lawful occupations and rely on themselves. The likelihood of recidivism is diminished when they have sufficient income and can still contribute to society both directly and indirectly. This challenge desires to provide female ex-convicts with opportunities for secure employment, enabling them to attain sustainable livelihoods.

ACKNOWLEDGMENTS

We would like to thank the Division of Justice Innovation Development, Office of the Permanent Secretary of Thailand, for their support, encouragement and participation with several agencies throughout the research. I would also like to thank administrators of elderly care enterprises, and representatives of Thai households for the provision of important information that led to the completion of this research.

REFERENCES

1. Boyne R. Bourdieu: from class to culture: in Memoriam Pierre Bourdieu 1930—2002. *Theor Cult Soc.* 2002;19(3):117–28. doi: 10.1177/026327602401081558.
2. Chansama W, Aemyoo K, Kuankhway N, Tangpadikun T, Rojanatrakul T. Thailand's social inequality and human rights. *J Legal Entity Manag Local Inn.* 2022;8(8):365-74.
3. DiPrete TA. The impact of inequality on intergenerational mobility. *Annu Rev Sociol.* 2020;46(1):379-98. doi:10.1146/annurev-soc-121919-054814.
4. Techaniyom K, Kittisaknawan C, Arakpothchong W, Pinit W. The causal factors affecting income inequality: a case study of middle and low income level countries. *J. Econ Manag. Strategy.* 2020;8(2):76-91.
5. Neckerman KM, Torche F. Inequality: causes and consequences. *Annu. Rev. Sociol.* 2007; 33(1): 335-57. doi: 10.1146/annurev.soc.33.040406.131755 .
6. Nitidharmmalai Institute. Criminal Code. [Cited 2024 March 14]. Available from: <https://www.drthawip.com/criminal-code/1>.
7. Phuriwikrai K. Looking beyond 'prisons' towards gender-sensitive justice. 2020 [Cited 2024 March 14]. Available from: <https://www.the101.world/alternatives-to-imprisonment-for-women/>. in Thai.
8. Dwyer RE. Credit, debt, and inequality. *Annu Rev Sociol.* 2018;44(1):237-61. doi:10.1146/annurev-soc-060116-053420.
9. Thailand's Department of corrections, Recstats. Recidivism statistics database. [Cited 2024 March 14]. Available from: <http://www.correct.go.th/recstats/index.php/en/home>.
10. Klinkhae C, Chaidee K, Semeinpet N, Somwong S, Suwanno T. Factors affecting repeated offending of jail inmates in Mae Hong Son Province Prison. *J Pacific Instit Manag Sci.* 2020;6(3):253–261.
11. Meepien P, Bubphamala B. Factors causing recidivism in narcotics cases of the Inmates Udon Thani Central Prison. *J Roi Kaensarn Academi.* 2022;7(3):17-32.
12. Flynn J. 18 out of prison employment statistics [2023]: economic opportunity for fomrmerly indarcerrated. 2022 [Cited 2024 March 14]. Available from: <https://www.zippia.com/advice/out-of->

- prison-employment-statistics/#Formerly_Incarcerated_People_Unemployment_Statistics.
13. Foundation of Thai Gerontology Research and Development Institute. Situation of the Thai older persons 2021. [Cited 2024 March 14]. Available from: https://www.dop.go.th/download/knowledge/th1663828576-1747_1.pdf.
 14. Thailand's Office of the National Economic and Social Development Council. Report of the population projections for Thailand 2010-2040 (revision). Bangkok: Amarin Publishing. 2019.
 15. Foundation of Thai Gerontology Research and Development institute. Systems of long-term care and manpower for elder care: the direction in Thailand. [Internet]. [Cited 2024 March 14]. Available from: <https://kb.hsri.or.th/dspace/bitstream/handle/11228/2737/hs1594.pdf?sequence=3&isAllowed=y>.
 16. Thailand's Department of Health. Standards of providing private elder care in the community. [Internet]. [Cited 2024 March 14]. Available from: https://hp.anamai.moph.go.th/web-upload/4xceb3b571ddb70741ad132d75876bc41d/202106/m_news/35025/204975/file_download/ae57bdf798c049499f3772b4f57dad8.pdf.
 17. Levere D, Hoppmann C, DeLongis A. Couples and illness. *Comprehensive clinical psychology*. 2022;8:514-537. doi:10.1016/B978-0-12-818697-8.00069-8.
 18. Thailand's Department Of Health Service Support, Ministry of Public Health and Thailand's Department of Corrections, Ministry of Justice. Training program for Prisoner Health Volunteers. [internet]. [Cited 2024 March 14]. Available from: www.correct.go.th/meds/index/Download/VHVD0C2.pdf.
 19. Wayne WD. *Biostatistics: a foundation for analysis in the health sciences*. 9th ed. USA: John Wiley & Sons Inc. 2009.
 20. Department of Provincial Registration Administration, Ministry of Interior. Registration statistics system. Statistics on the elderly population statistics of 77 provinces. [Internet]. [Cited 2024 March 14]. Available from: https://www.dop.go.th/download/knowledge/th1550973505-153_0.pdf.
 21. Papangkorn, R. Caregivers' Experiences in Caring for Dependent Elderly Persons. Master of Nursing Science Program in Adult Nursing. Nakhon Pathom; Faculty of Graduates Studies, Mahidol university. [Internet]. [Cited 2024 March 14]. Available from: <https://mulinet11.li.mahidol.ac.th/e-thesis/4136492.pdf>.
 22. Tamdee D, Tamdee P, Greiner C, Boonchiang W, Okamoto N, Isowa T. Conditions of caring for the elderly and family caregiver stress in Chiang Mai, Thailand. *J Health Res*. 2019; 33(2):138-150. doi:10.1108/JHR-07-2018-0053.
 23. Sutthirit S, Yuangthong A, Chanead W, Niyomjit S, Bueasang N, Rodcharoen S. Stress of caregivers providing care for bedridden elderly, Surat Thani Province. *Region 11 Med J*. 2021; 35(2):1-12.
 24. Bangkok Post. Gold hold-up suspect claims he killed for the thrill. [Internet]. [Cited 2024 March 14]. Available from: <https://www.bangkokpost.com/thailand/general/1841339/gold-hold-up-suspect-claims-he-killed-for-the-thrill>.
 25. Bangkok Post. Paroled serial killer sentenced to death for 2019 murder. [Internet]. [Cited 2024 March 14]. Available from: <https://www.bangkokpost.com/thailand/general/2093911/paroled-serial-killer-sentenced-to-death-for-2019-murder>.
 26. Fox JA. *Primary health care of children*: Mosby. 1997.
 27. Nicastro EA, Whetsell MV. Children's fears. *J Pediatr Nurs*. 1999;14(6):392-

402. doi:10.1016/S0882-5963(99)80068-2.
28. Asian Migrant Centre Mekong Migration Network. Thailand country report. In Migration needs, issues and response in the Greater Mekong Subregion: a resource book. Asian Migrant Centre. Kowloon, Hong Kong, p.143-172. [Cited 2024 March 14]. Available from: [https:// www.asianmigrantcentre.org/_files/ugd/c2180c_02ceb7a5ff7f4f58a0282282d90be5e5.pdf](https://www.asianmigrantcentre.org/_files/ugd/c2180c_02ceb7a5ff7f4f58a0282282d90be5e5.pdf).
29. Soonthornthada K. Changes in the labor market and international migration since the economic crisis in Thailand. *Asian Pac Migr J*. 2001;10(3-4):401-27. doi:10.1177/0117196801010001000
30. Kamaluddin MR, Shariff NSM, Othman A, Ismail KH, Saat GAM. Linking psychological traits with criminal behaviour: a review. *ASEAN J Psychiatry*. 2015;6(2):135-147.