



CONFEDERATION EUROPEAN PROBATION *MENTAL HEALTH IN PRISON* Reducing risk Factors

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Mental health in prison

Summary



1. COMMON MENTAL HEALTH DISORDERS IN PRISON CONTEXT

- Special needs of individuals with mental illness in contact with the criminal justice system



2. European Survey CoE

- Findings and conclusions



3. COMPREHENSIVE REHABILITATION APPROACH

- Risk, Needs, responsivity

Mental health in prison

Reducing Risk Factors



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Mental health, Aging
and Palliative Care in prisons

www.menace-project.org



MenACE

Mental Health, Aging and
Palliative care in European
Prisons

MenACE Mental Health, Aging and Palliative Care in Prisons aims to increase the response to mental health disorders within prisons and the quality of palliative and life care services provided by enhancing the competences of management and frontline staff to address prisoners' mental health needs and the special needs of older prisoners.

News & events

[MenACE project featured in the Portuguese Newspaper "Jornal de Notícias"](#)

Portugal, 3rd May 2017

Mental health in prison

Reducing Risk Factors

- In terms of prevalence of mental illness in prison context, about 4% of inmates (males and females) present mental disorders.
- 10% of male inmates struggle with depression, and 47% have an antisocial personality out of 65% with personality disorders.
- 12% of female prisoners show signs of having a major depression, while 21% have an antisocial personality disorder (out of 42% with PD9):

Male inmates vs Female inmates



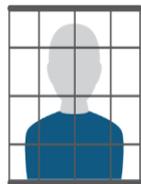
- Psychotic illnesses
4%
- Major depression
10%
- Personality disorder
65%
- Antisocial personality disorder
47%



- Psychotic illnesses
4%
- Major depression
12%
- Personality disorder
42%
- Antisocial personality disorder
21%

Inmates vs General Population

Inmates present higher rates of mental illness...



...when compared to the general population

- Meta-analysis data confirms that inmates show higher rates of mental illness when compared to the general population.
- Emotional disorders rates can increase according to the stage of imprisonment.
- Research shows that during the first week of imprisonment, emotional disorders can be prevalent in almost 90% of the cases (after 6 months >50%)
- After trial, several inmates arrive in prison with previously detected mental health conditions, importing them to a whole new context.

Mental health in prison

Reducing Risk Factors

- Inmates with existing mental disorders are at further risk of acute mental harm, as they have fewer resources to cope in an environment lacking in privacy.
 - This risk is higher in tendentiously depressive inmates, who may become suicidal and psychotic due to an increased emotional deterioration.
-
- Prisoners without any mental health problems prior to imprisonment may develop a range of mental disabilities in prisons, where they do not feel safe, dormitories overcrowded and staff not trained to deal with their specific psycho-social support requirements.

PRISON ENVIRONMENT



Negatively influences...



Physical
health



Mental
health



Social
health

Mental health in prison

Reducing Risk Factors

RISK OF SUICIDE AND SELF-HARM



- Research shows that suicide rates within the prison context are higher than in the general population.
- This is caused by a variety of factors, such as long-term sentences, single-cell use, mental disabilities, substance abuse as well as individual's history of suicidal tendencies.
- International findings shows that inmates who commit suicide actually suffered from some form of mental disability.

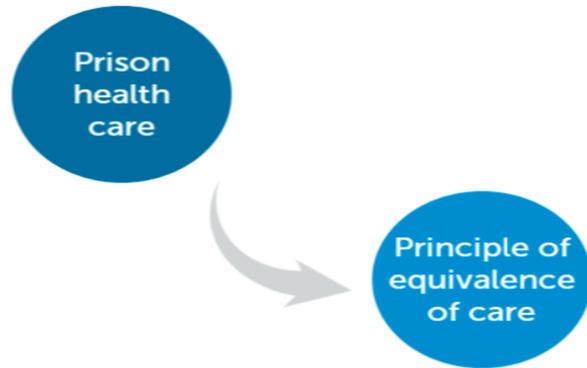
- Inmates who commit self-harm usually have a background of being victims of violence and/or substance abuse.
- Such historical component should require therapeutic responses from the correctional facilities where their serving their sentence, especially since these inmates are even more likely to attempts suicide then others.



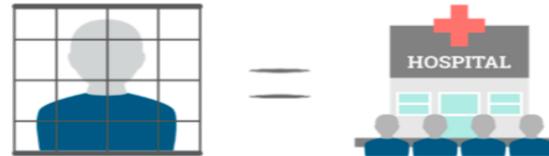
Mental health in prison

Reducing Risk Factors

LEVELS OF CARE



Level & quality of mental health services...



- Training on mental health to prison health staff
- Regular visits from a community mental health team
- Access to outside health care services / right to be transferred



- When analyzing prison health care issue, often the principle of equivalence of care is referred, highlighting the importance of prison services providing the same level of quality of the basic health services as in the community, including mental health.
- This principle might be achieved through different levels or means:
 - Prison health staff training on mental health;
 - Regular visits from a community mental health team;
 - Access to health care services outside prison.

Mental health in prison

Summary



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2. European Survey CoE

- Findings and conclusions



Council of Europe
Conseil de l'Europe

Questionnaire on Mental Health Disorders and Disabilities of Persons in Penal Detention and under Probation Supervision

*Charlie Brooker, Honory Professor, Centre for Sociology and Criminology
Royal Holloway, University of London*

Jorge Monteiro, Head of Unit- Prison and Probation Services- Portugal

Council of Europe
Conseil de l'Europe





Mental health in prison and probation

Main findings



Mental health

Table 1 – Response

Prisons

Number of Total Returns

Note: Germany sent 10 different responses (out of a possible 16), Spain sent 2

Thus, there was a possibility of 67 'Response Units'

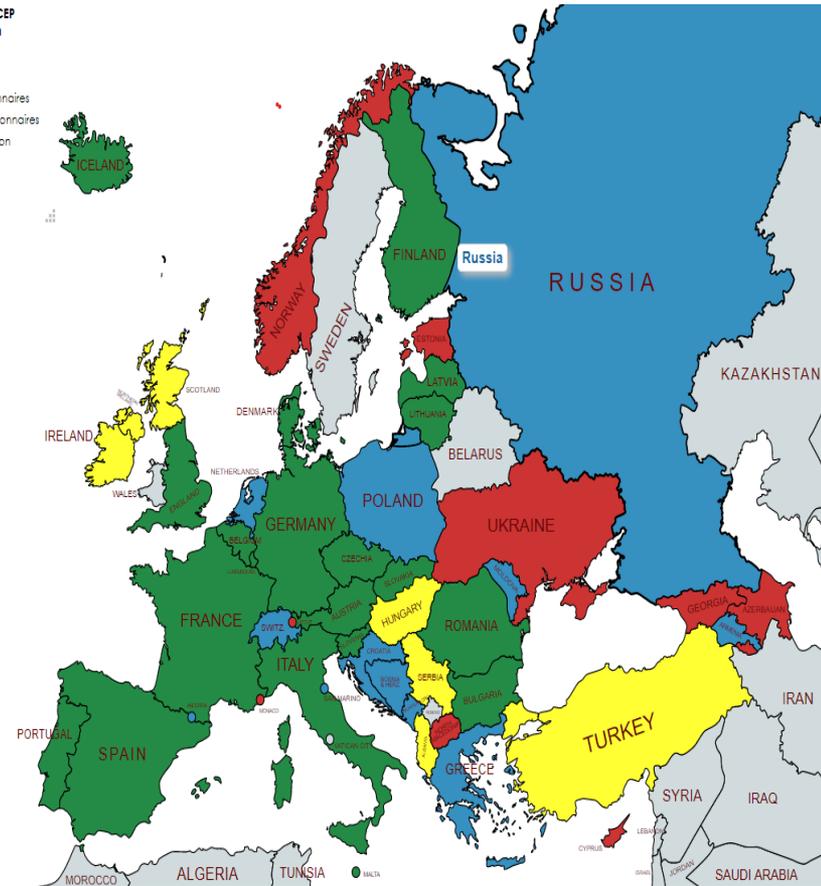
Data is reported from 42 out of a possible 67 'response units'

% Overall Response

63%

The Council of Europe/CEP
 Survey: mental health in
 prisons and probation
 response rate

- Received no questionnaires
- Received both questionnaires
- Received the Probation questionnaire only
- Received the Prison questionnaire only





Mental health in prison and probation

Main findings



Mental health

Table 2 – Receiving mental health awareness training

	<i>Prisons</i>
<i>Number receiving training</i>	31
<i>No. of Valid responses</i>	42
<i>% 'Yes' training received*</i>	73.8%
<i>Range</i>	N/A



- In prison, many countries provide training for staff in the area of mental health, mostly raising awareness training activities but also specialized training for diagnose and treatment

Table 4 – Estimation of Prevalence of mental health disorders in Prisons and Probation



- Range – 0% - 80%
- It was not a consensual topic, since it depends on the definition of mental health disorders and disabilities

	<i>Prisons</i>
<i>No of valid responses</i>	26 (61.9%)
<i>List estimates by Country/Jurisdiction</i>	Andorra- 20%; Armenia- 12%; Bulgaria- 0,36%; Croatia- 10/80%; Czech Republic- 60%; Finland- 65%; France- 6/24%; Greece- 9%; Iceland- 15%; 10%- Lithuania- 10%; Latvia- 38%; Luxemburg- 15%; Malta- 20%; Montenegro- 65%; Portugal- 2%; Romania- 16%; Russia- 8%; San Marino- 0%; Slovenia- 5-13%; Spain- 4%; Spain-Catalonia- 19%; Sweden- 46%; DE- NI- 30%; DE-SH- 20%; England - 78%



Mental health in prison and probation

Initial findings



Mental health

Table 6 – When does screening for mental health problems take place in prison

	<i>Prisons</i>
<i>Intake</i>	30 (71,4%)
<i>Admission</i>	34 (80,9%)
<i>Preparation for release</i>	12 (28,5%)
<i>Probation</i>	



- Most of the countries have screening procedures established in the first phase of incarceration (Intake and Admission)

Table 8 – How often are prisoners screened for MH problems



- Mainly health professionals are conducting the screenings, although some countries replied that prison staff is also assessing inmates

Frequency of Prisoner screening for mental health problems

<i>By request of the prisoner</i>	28 (66,6%)
<i>By medical order</i>	28 (66,6%)
<i>Once a year or less</i>	24 (57,1%)
<i>Every two years or more</i>	28 (66,6%)



Mental health in prison and probation

Initial findings



Mental health

Table 11 – Does the prisons in your country/jurisdiction have special units to provide treatment to detainees with psychiatric mental health disorders?



- A significant number of countries mentioned that there are special units with specific resources (including physical conditions) adapted to the needs of prisoners with mental health disorders

	<i>Prisons</i>
<i>No of valid responses</i>	42
<i>% stating 'yes'</i>	29 (69%)

Table 14 – Is there a prison suicide reduction programme established in your country/jurisdiction

	<i>Prisons</i>
<i>Valid responses</i>	42
<i>% stating there is such a programme</i>	37 (89%)



- Suicide in prison is a concern of all countries and jurisdictions
- It's a very important topic with large positive responses rate
- Many countries have in place suicide prevention programs that combine screening for early signs and symptoms of risk of suicide and follow-up of cases of risk



Mental health in prison

Summary



- Good reaction from members states to the questionnaire (63%)
- Extensive reports with a lot of interesting and relevant information
- Clear increasing investment from member states on the mental health of inmates
- Training and raising awareness on mental health disorders is provided for all prison staff in many countries (74%)
- Importance of research on the prevalence of mental health disorders among inmates in order to better acknowledge the specific needs of this population (62% of answers)
- Increasing shared responsibilities between MoJ and MoH in the treatment of inmates with mental disorders (66%)
- Existence of special units with physical conditions and human resources specialize in the accommodation and care of inmates with mental health disorder and other disabilities (69%)
- Very impressive rate of positive responses to the collection of data related to suicide behaviors (90%)
- As well as the existence of suicidal prevention programs and strategies (89%)
- Good responsive rate referring to the work with the community in resettlement plans

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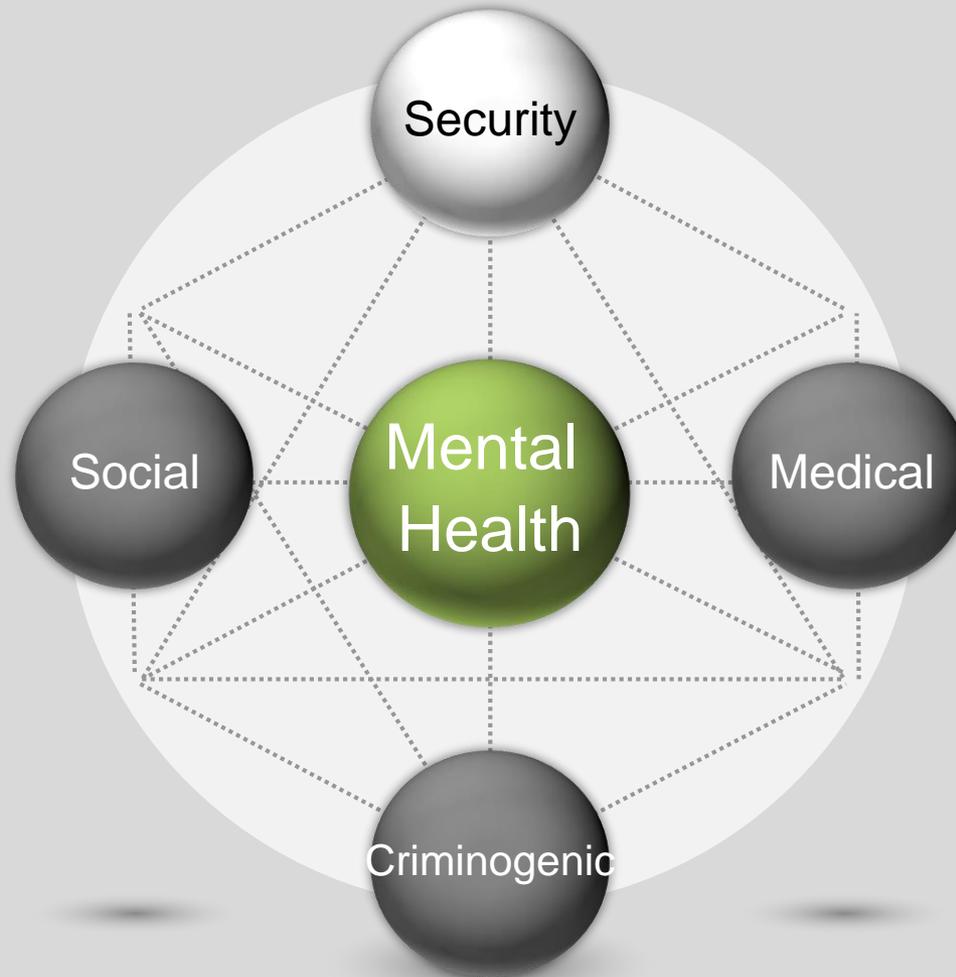
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- Risk, Needs, responsivity

Risk and Needs Assessment

Mental Health in prison context

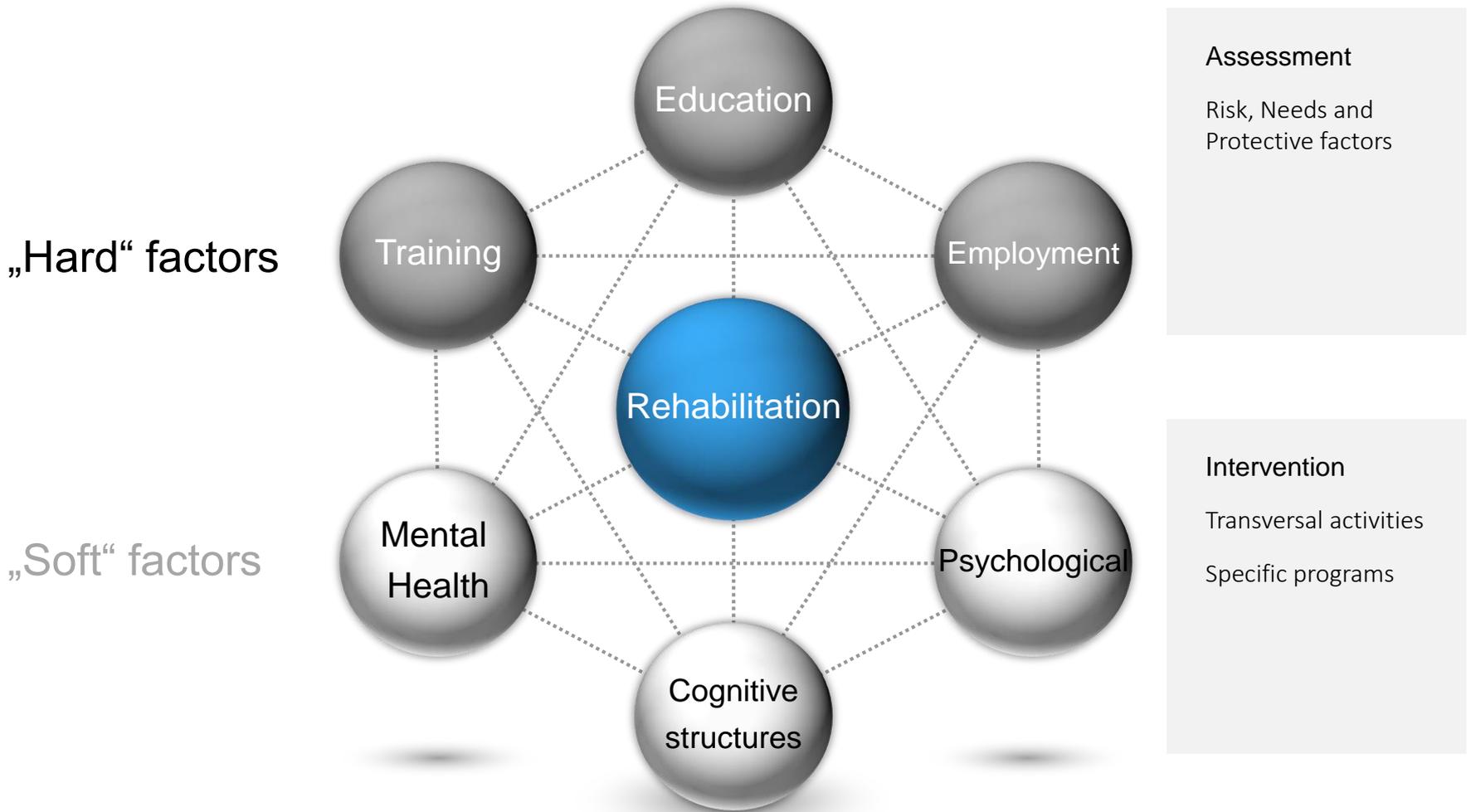
- History of antisocial behavior
- History of violent acts
- Previous attempts against others or themselves
- Family support
- Housing
- Work habits and history of being fired



- Use of drugs and/or alcohol
- Personality disorder
- Depression and anxiety
- History of Psychotic episodes
- Adherence to medical treatment

7S-FRAMEWORK (MCKINSEY)

The seven Success Factors for rehabilitation



Rehabilitation Model (RNR)

Risk-Needs-Responsivity



- Changing risk factors and hard skills
- Reducing criminogenic needs
- Improving protective factors
- Rehabilitation programs vs Specialist psychological interventions

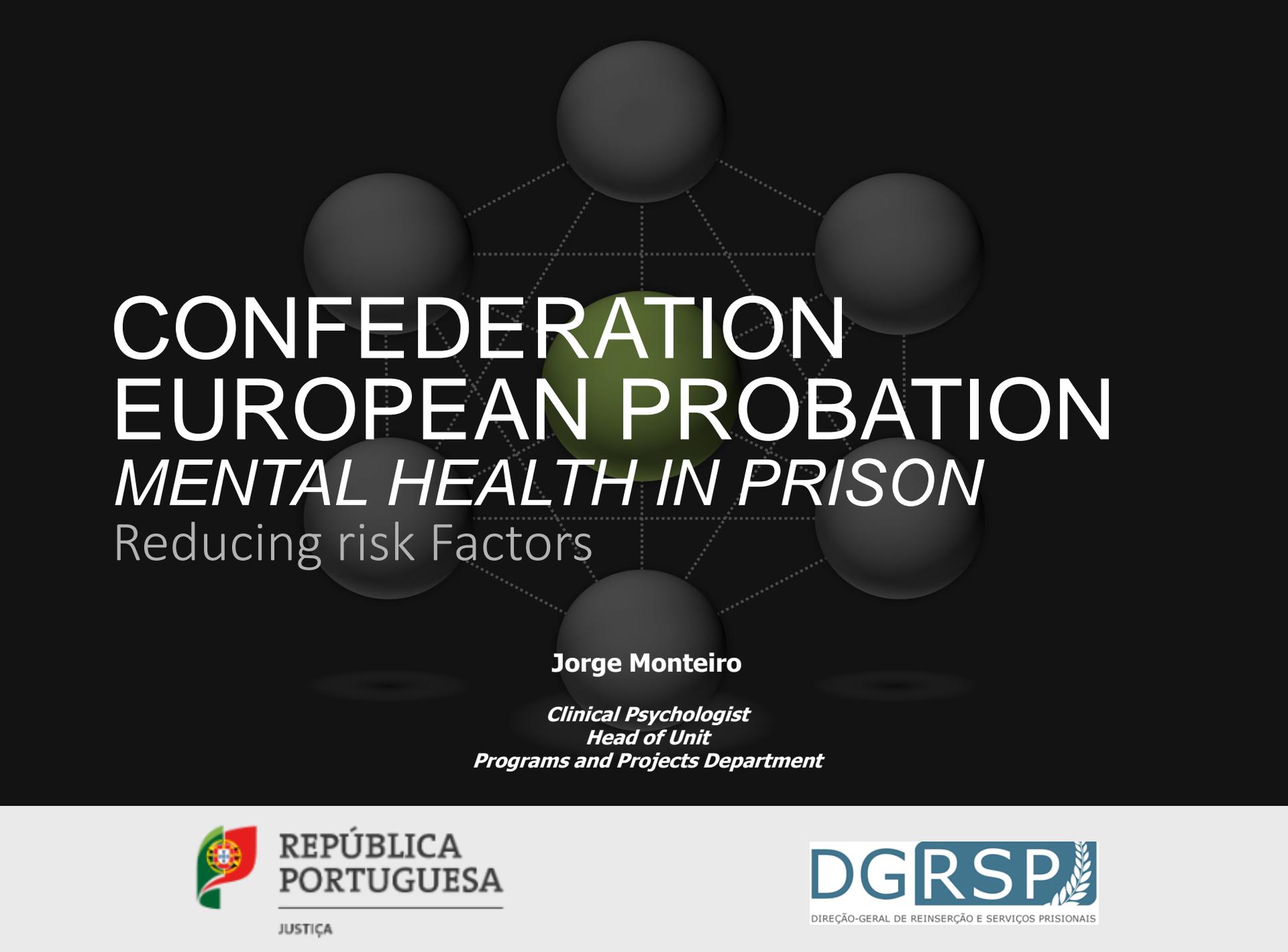
- Mentoring programs
- Mental Health treatment
- Theological education and pastoral support

- Social and family support
- Resettlement plans
- Transition management
- Social and organizational support

Promoting change...



... building new opportunities.



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