



**Incarceration, Mental Illness,
and the Risk of Suicide**

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Presenter's Disclaimers

- The presenter has no financial relationships or interests to disclose*
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Corrections

Definition

"Corrections" includes those agencies and programs at the local, state and federal level that interface with individuals who have either been accused of crimes or convicted of crimes



Current Theories of Punishment

- Rehabilitation**
 - To correct those traits that result in criminal behavior
- Restraint/Incapacitation**
 - To prevent individuals from committing future criminal acts through detention
- Retribution**
 - To punish or harm those individuals who break the law
- Deterrence**
 - To deter or prevent the commission of future criminal acts



Types of Correctional Facilities - Lockups

- Local temporary holding facilities that often constitute the entry phase of the criminal justice system
- The most common type of correctional facility
- Average length of stay: <48 hours (temporary detainment)
- Located in police stations (30% of police departments operate at least 1 lockup)



Types of Correctional Facilities - Jails

- Locally (typically county) operated correctional facilities that confine individuals before or after adjudication
- Used to house pre-trial detainees, persons convicted of a misdemeanor offense, parole/probation violators & those found in contempt of court
- 30-40% of incarcerated individuals in the US are held in local jails



Types of Correctional Facilities - Jails

- There are ~3,200 jails in the US, housing ~700,000 inmates
- Also referred to as “local confinement facilities” or “local detention centers”
- 60% of persons housed in jails are awaiting some kind of court action for a current charge



Types of Correctional Facilities - Jails

- Orange County Detention Center:
1 facility with a total inmate capacity of 129
- Wake County Detention Center:
2 facilities with a total inmate capacity of 1,568
- L.A. County Jail (nation’s largest):
7 facilities with a total inmate capacity of 19,000
(average length of stay ~60 days)



Types of Correctional Facilities - Prisons

- Confinement facilities that house individuals who have been convicted of felony offenses
(exceptions exist - i.e., “safekeepers” and CRV in NC)
- Are operated by state & federal governments
(exception - privately run prisons)
- 60-70% of incarcerated individuals in the US serve their time in a prison
- There are ~1,800 prisons in the US, housing ~1.5 million prisoners



Types of Correctional Facilities - Prisons

- ❑ The NC Department of Public Safety (NC DPS, 2019)
 - Currently there are ~36,500 inmates within NC DPS
 - These inmates are housed in 56 state prisons
- ❑ The US Federal Bureau of Prisons (US BOP, 2019)
 - Currently there are ~180,000 inmates within US BOP
 - 151,000 inmates are housed in 122 federal BOP facilities
 - 29,000 inmates are housed in 13 private correctional institutions or "other" facilities



Pertinent Statistics

- ❑ From 1980 to 2013, the # of incarcerated persons in the US quadrupled, from 500,000 to 2.2 million (Bureau of Justice Statistics)
 - The introduction of "mandatory minimum" sentencing at the state/federal level and the War on Drugs have played significant roles in this increase over the past 4-5 decades
- ❑ The US leads the world in the # of individuals who are incarcerated (~2.2 million, which is 0.9% of the adult US population)
- ❑ 20-25% of the world's prisoners are incarcerated in the US
- ❑ According to the US DOJ, the average inmate in US federal prison costs \$21,000 - \$33,000 per year
- ❑ According to the NC DPS, the average inmate in NC state prison costs \$33,000 per year



The Scope of Mental Health in Correctional Settings

- ❑ The 3 largest psychiatric facilities (in terms of the number of "psychiatric patients" being housed) in the US (and world) are:
 - Los Angeles County Jail (CA)
 - ❖ Houses 19,000 inmates (~25% suffer from a psychiatric disorder)
 - Rikers Island Jail (NY)
 - Cook County Jail (IL)
- ❑ Deinstitutionalization has played a key role in the shifting of individuals with serious mental illness from the hospital to the correctional setting
 - Developments in psychopharmacology in the 1950s
 - Community Mental Health Act of 1963
 - Changes in civil commitment laws in the 1970s
 - Financial considerations
 - Civil liberties considerations



The Scope of Mental Health in Correctional Settings

- There are 10 times the number of individuals with serious mental illness in jails/prisons than in state psychiatric facilities (Treatment Advocacy Center, 2014)
- ~40% of individuals with serious mental illness have been incarcerated in jail/prison at some time in their lives (TAC, 2010)
- ~16% of inmates possess a "serious mental illness"* (6.4% in 1983) (Steadman, 2009)

*Defined as possessing a DSM-IV-TR diagnosis of schizophrenia, schizophreniform disorder, brief psychotic disorder, schizoaffective disorder, delusional disorder, bipolar disorder or psychotic disorder not otherwise specified



The Scope of Mental Health in Correctional Settings

Reduction in US psychiatric bed availability - a contributing factor for incarceration of the mentally ill

- 1955: ~340 inpatient psychiatric beds per 100,000 US population
- 2004: ~17 inpatient psychiatric beds per 100,000 US population



Prevalence of Psychiatric Disorders - Jails

- 64% of jail detainees suffer from a mental health problem (BJS, 2006)
- 24% of jail inmates reported at least 1 symptom of a psychotic disorder (BJS, 2006)
- The NCCHC has estimated that 1-2% of jail detainees possess a psychotic disorder, 2-3% had experienced a manic episode & 8-15% had experienced a major depressive episode within the past 6 months
- 15% of male jail inmates & 31% of female jail inmates possess a serious mental illness (Steadman, 2009)



Prevalence of Psychiatric Disorders - Prisons

- 45-56% of prison inmates suffer from a mental health problem (BJS, 2006)
- 5-10% of prison inmates possess a severe mental illness, according to one study (Steadman, 1991)
- 20% of prison inmates suffer from a serious mental illness, according to the American Psychiatric Association (2000)
- The NCCHC has estimated that 2-4% of prison inmates possess a psychotic disorder, 2-4% suffer from bipolar disorder & 13-18% suffer from major depressive disorder



Legal Requirements for Correctional Mental Health Services

- The 8th Amendment of the US Constitution protects convicted inmates from suffering cruel & unusual punishment
- The due process rights guaranteed by the 14th Amendment of the US Constitution protect pretrial detainees from punishment (“detainees are entitled to at least the same level of care as the convicted”)



Legal Requirements for Correctional Mental Health Services

- Estelle v. Gamble* (1976) - the US Supreme Court decided that the constitution required the provision of health care to inmates, & established the “deliberate indifference” standard
- Farmer v. Brennan* (1994) - the US Supreme Court equated deliberate indifference with recklessness, thereby occupying a middle ground between negligence & intent to harm (Dlugacz, 2007)
- A prison official would fall below the “deliberate indifference” standard if he possessed substantial knowledge of risk & did not act to prevent harm (Cohen, 1998)



Legal Requirements for Correctional Mental Health Services

- Bowring v. Godwin* (1977) - the US 4th Circuit Court of Appeals held that there is “no underlying distinction between the right to medical care for physical ills & its psychological or psychiatric counterpart”
- Sentenced inmates & pretrial detainees have a constitutional right to mental health care services



Legal Requirements for Correctional Mental Health Services

- Inmates can seek damages in federal court under the auspices of 42 USC Section 1983 (“1983 claims”) if a correctional official (including a psychiatrist) falls below the “deliberate indifference” standard
- Inmates can seek damages in a civil negligence tort if a psychiatrist commits medical malpractice
- The Prison Litigation Reform Act (PLRA) of 1996 has placed constraints on prisoners’ access to the federal courts



Legal Requirements for Correctional Mental Health Services

Ruiz v. Estelle (1982) - the US 5th Circuit Court of Appeals found that a system of correctional mental health care should be comprised of 6 components

- A program of screening & evaluation
- Treatment which goes beyond the mere segregation & monitoring of mentally ill inmates
- Trained mental health staff in sufficient numbers to identify & provide individualized treatment
- Complete, accurate & confidential treatment records
- Prescribing/administering medications by qualified staff which is consistent with professional standards
- A method for identifying, treating and supervising those with suicidal tendencies



General Principles for Correctional Mental Health Services

The NCCHC, in its *Standards for Health Services in Jails and Prisons*, has identified 3 basic rights for inmates

- The right to access care
- The right to the care that is ordered by a health care professional
- The right to professional medical judgment



Professional Standards for Correctional Mental Health Services

In 1979, the US Supreme Court noted that even though professional standards do not create constitutional requirements, "they may be instructive"

Professional organizations which have provided relevant standards

- National Commission on Correctional Health Care (NCCHC)
- American Public Health Association (APHA)
- American Psychiatric Association (APA)
- American Correctional Association (ACA)



Professional Standards for Correctional Mental Health Services

American Psychiatric Association Position:

"The fundamental policy goal for correctional mental health care is to provide the same level of mental health services to each patient in the criminal justice process that should be available in the community. This policy goal is deliberately higher than the 'community standard' that is called for in various legal contexts"
(APA, 2000)



Special Issues in Correctional Psychiatry - Suicide

- Suicide is the leading cause of death in jails, & the 5th leading cause of death in prisons (2010 data)
- US national suicide rate: 14.0/100,000; 10th leading cause of death in US general population (CDC, 2018 data)
- The rate of suicide in jails is 42/100,000 (Noonan, 2012)
- The rate of suicide in state prisons is 16/100,000 (Noonan, 2012)



Special Issues in Correctional Psychiatry - Suicide

- Suicide risk factors:** suicidal ideation, single cell occupancy, white race, male gender, violent offense, substance abuse hx, hx of mental illness, medical comorbidities, hx of suicidal behavior/attempt, life sentence, married status, change in legal status, and length of time incarcerated (50% of jail suicides occur within 2 weeks, 65% of prison suicides occur after 1 year) (Hayes, 2010; Fazel, 2008)
- Jail & prison suicide rates have both decreased since the early 1980s (Mumola, 2005)



Special Issues in Correctional Psychiatry - Suicide

- Hanging is the most common method of completed suicide in correctional settings (Hayes, 2010)*
- Two primary causes of jail suicides (Bonner, 2000)
 - jail environments are "conducive to suicidal behavior"
 - the inmate is facing a "crisis situation"
- Inmates in segregation/SHU are at increased suicide risk (Patterson & Hughes, 2008)

*Firearms are the most common method of completed suicide in the US general population (CDC, 2018 data)



Special Issues in Correctional Psychiatry - Suicide

NC DPS Prison Inmate Population

- Total # of suicides in NC DPS prisons (2010-2016): 20
- Method of suicide death (2010-2016): hanging (13), medication overdose (4), exsanguination (2) & suffocation (1)
- Suicide and gender (2010-2016): 15 male & 5 female



Special Issues in Correctional Psychiatry - Suicide

NC DPS Prison Inmate Suicides – Recent Years

Year	Number of Suicides
2015	3
2016	7
2017	6
2018	9



Questions?

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