



Australian Government

Australian Institute of Criminology



Mental health in a sample of maximum security prisoners in Western Australia: Is DUMA a similar population?

Presentation by:
Jenny Kessell

Overview

Background to HoPE

Relevance to DUMA

Mental health screens in HoPE

What we knew about mental health of prisoner populations

What we discovered in HoPE

Conclusions

Background to HoPE

- Health of Prisoner Evaluation¹
- WA pilot study in 2008 in two maximum security prisons
- Based on 2001/03 NSW Inmate Health Survey (Tony Butler)
- N=146 55 female (21 Indigenous, 34 non-Indigenous)
 91 male (22 Indigenous, 69 non-Indigenous)

Background to HoPE

HoPE instrument examined

- Demographics
- Physical & mental health
- Sexual health, history & behaviours
- Health knowledge & attitudes
- Addictive behaviours
- Tattoos & body piercing (in & outside prison)
- Family contact

Background to HoPE

- 2006 AIHW report² identified the need for the national monitoring of prisoner health
- Minimal publically available data on prisoner health in WA
- Prisoner health impacts the wider community
- Untreated health issues (particularly substance abuse and mental health) can impact recidivism

Relevance to DUMA

- Drug use of DUMA population resembles imprisoned population more-so than general population
- Drug use and mental health tend to be co-morbid
- Mental health in DUMA cannot be measured in great detail because of time constraints
- HoPE project is intended to become a national project
- Findings from HoPE are therefore predicted to be relevant to the DUMA population

Mental Health in HoPE

- History of psychiatric illness/treatment
- Current psychiatric illness/treatment
- Suicide
- Self Harm
- Brief Jail Mental Health Screen (BJMHS)³
- Kessler-10 (K-10)⁴

What we knew about Mental Health

- Mental disorders in prison samples far exceed the occurrence in community samples⁵
- 1 in 5 Australians aged 16–85 years had a mental disorder⁶
- Almost 1 in 2 (or 7.3 million people) had experienced a mental disorder at some point in their lives⁶
- Released prisoners are more than twice as likely to report experiencing mental illness in the preceding twelve months⁷
 - Substance use (x5)
 - Affective disorder (x3)
 - Anxiety disorder (x2)

What we knew about Mental Health

- Rates of psychopathology are far greater among female prisoners than among males⁸
- Females & males present with different mental health problems⁹
- Individuals with a mental illness are at greater risk of other factors such as substance abuse and homelessness¹⁰

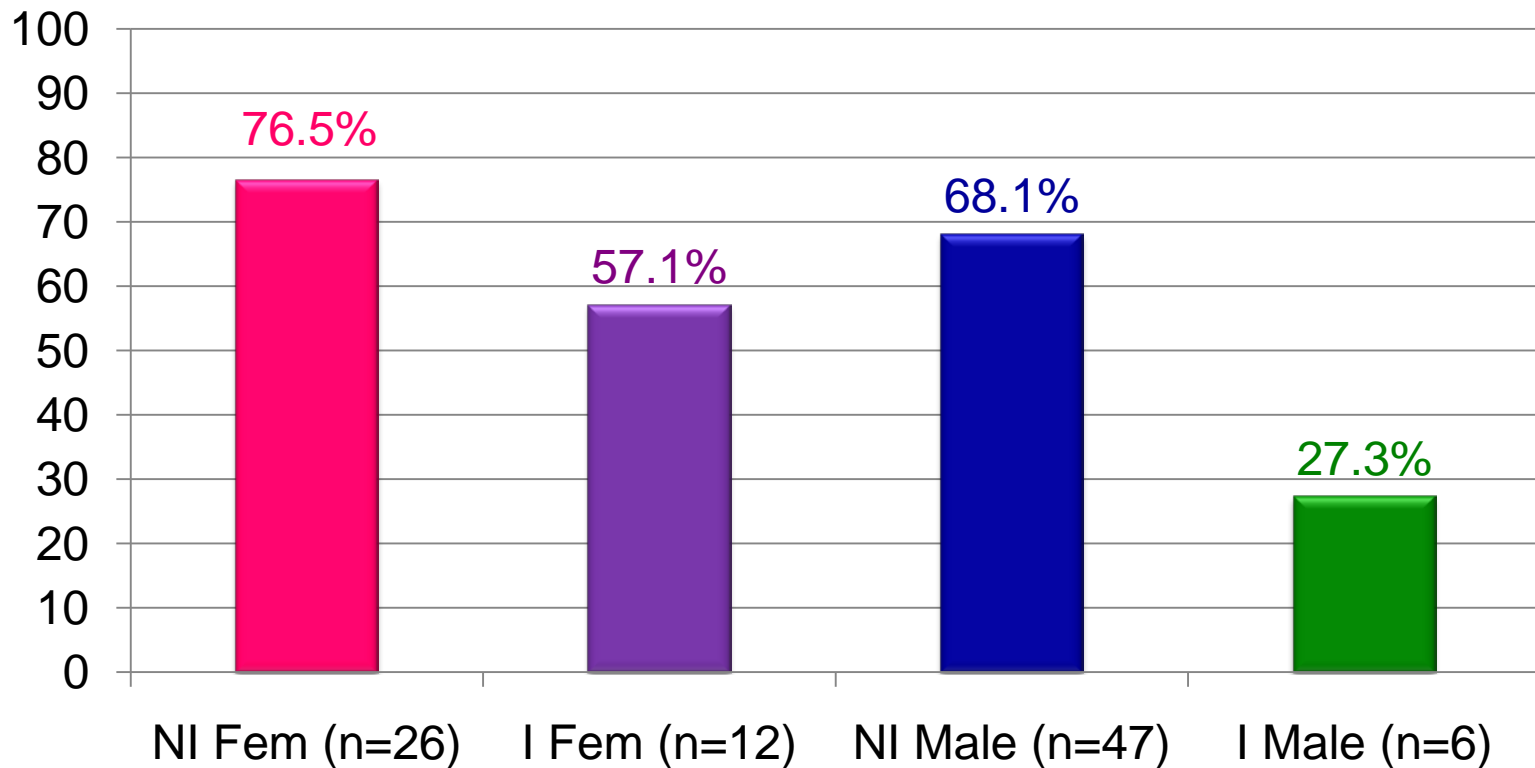
What we knew about Mental Health

- Aboriginal offenders demonstrate higher rates of mental health problems and alcohol and drug dependency¹¹
- Mental illness in the Indigenous population is multi-dimensional¹²
- Indigenous prisoners comprised 24% of the national prison population in 2008 (41.2% of WA prison population)¹³

What we discovered in HoPE

Have you ever received treatment/assessment for an emotional or mental health problem?

- 62.3% (N=91) of prisoners answered yes



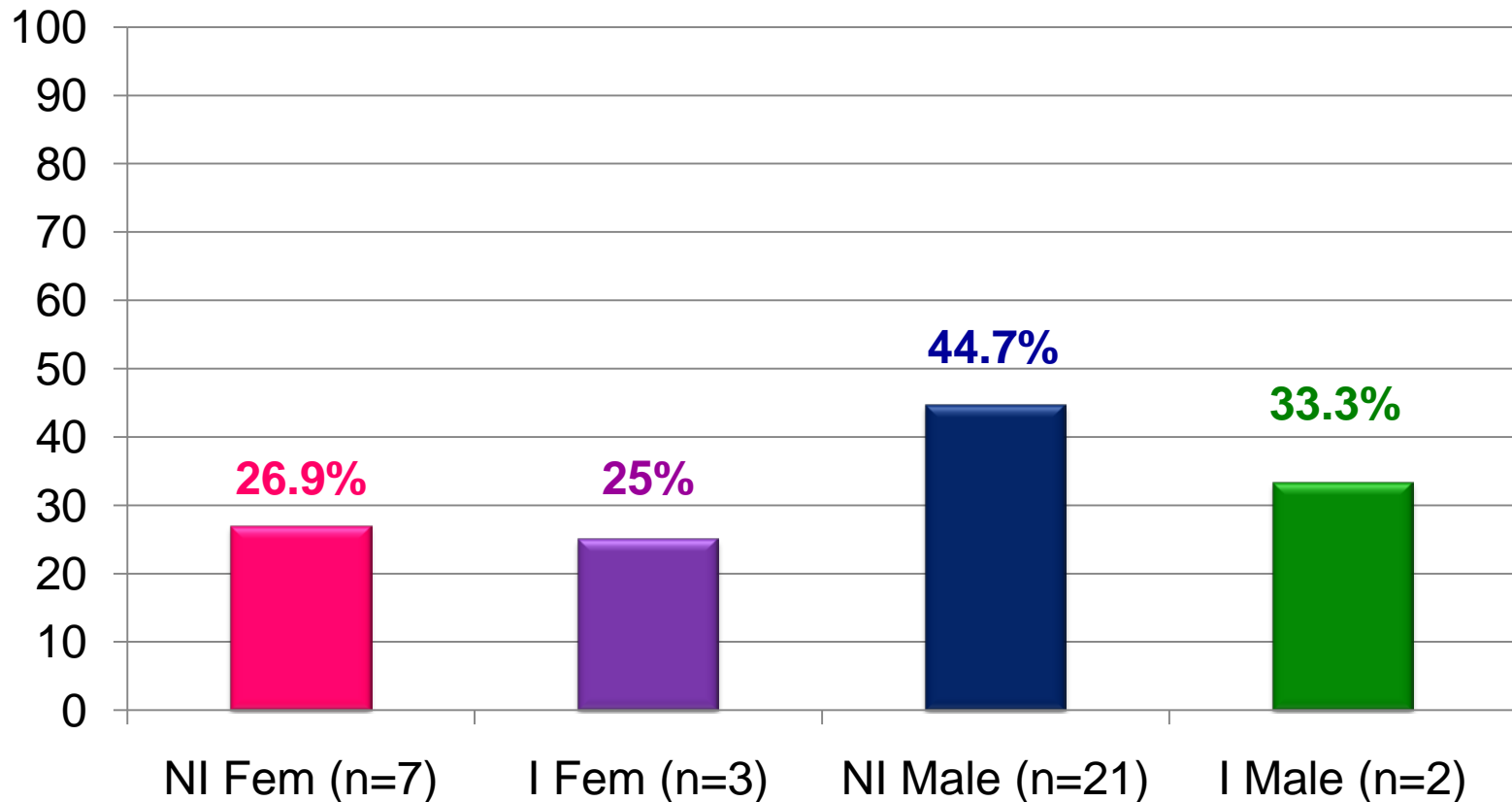
What we discovered in HoPE

- Significant association between Indigenous status and previous treatment ($p < .05$)
- Non-Indigenous people 3.38 times more likely to have received treatment/assessment
- Indigenous females 3.54 times more likely to have received treatment/assessment than Indigenous males

What we discovered in HoPE

Admission to a Mental Health Unit or Ward

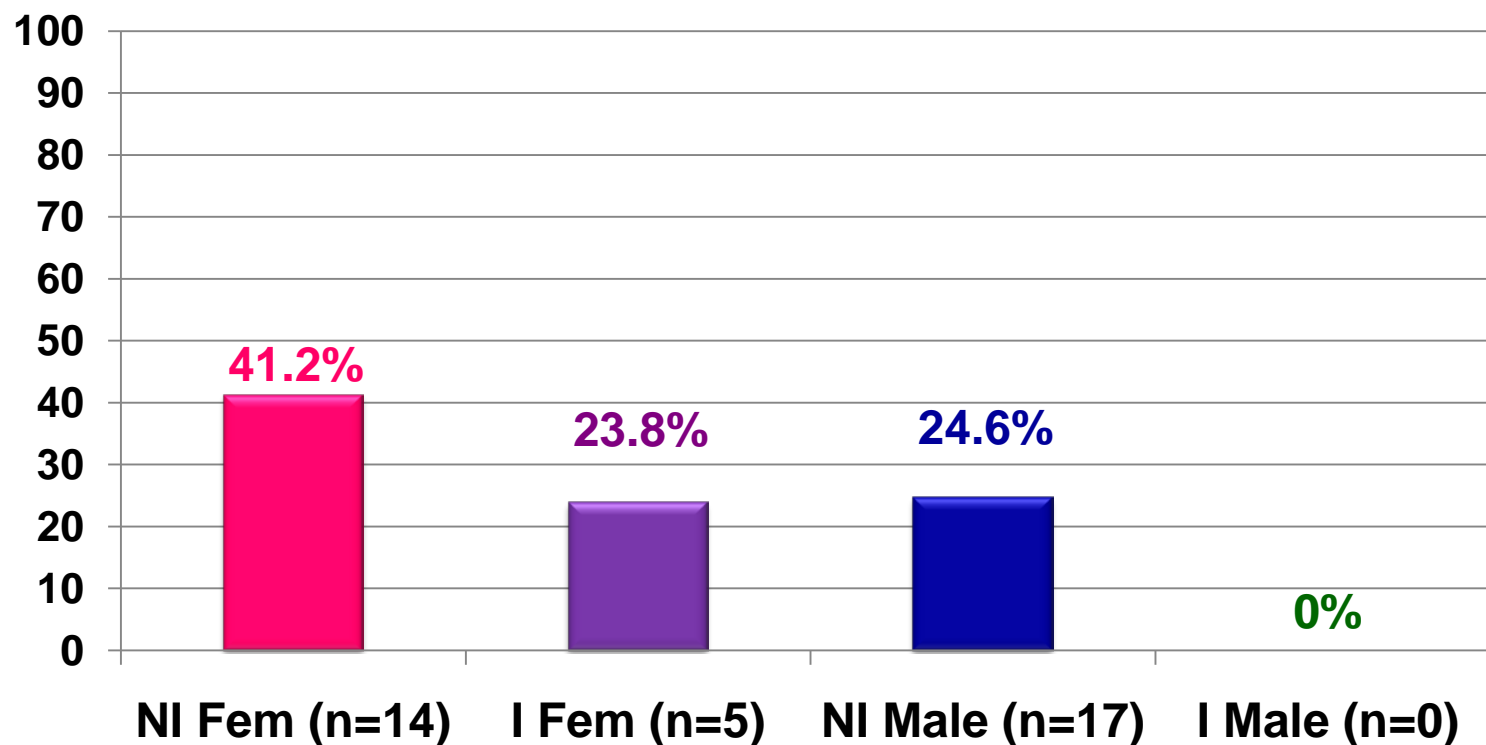
36.3% (N=33) reported being admitted to a psychiatric ward or unit.



What we discovered in HoPE

Currently taking prescribed psychiatric medication

- Almost 1 in 4 participants reported currently taking prescribed psychiatric medication



What we discovered in HoPE

Type of prescribed psychiatric medication currently taken

	Indigenous		Non-Indigenous		Total
	Female	Male	Female	Male	Total
	(n=5)	(n=0)	(n=14)	(n=17)	(N=36)
Antidepressants	5	0	14	9	28
Anti-psychotics	1	0	2	4	7
Mood Stabilisers	0	0	1	1	2
Minor Tranquilisers	0	0	0	1	1
Psycho- Stimulants	0	0	0	1	1
Total ^a	6	0	17	16	39

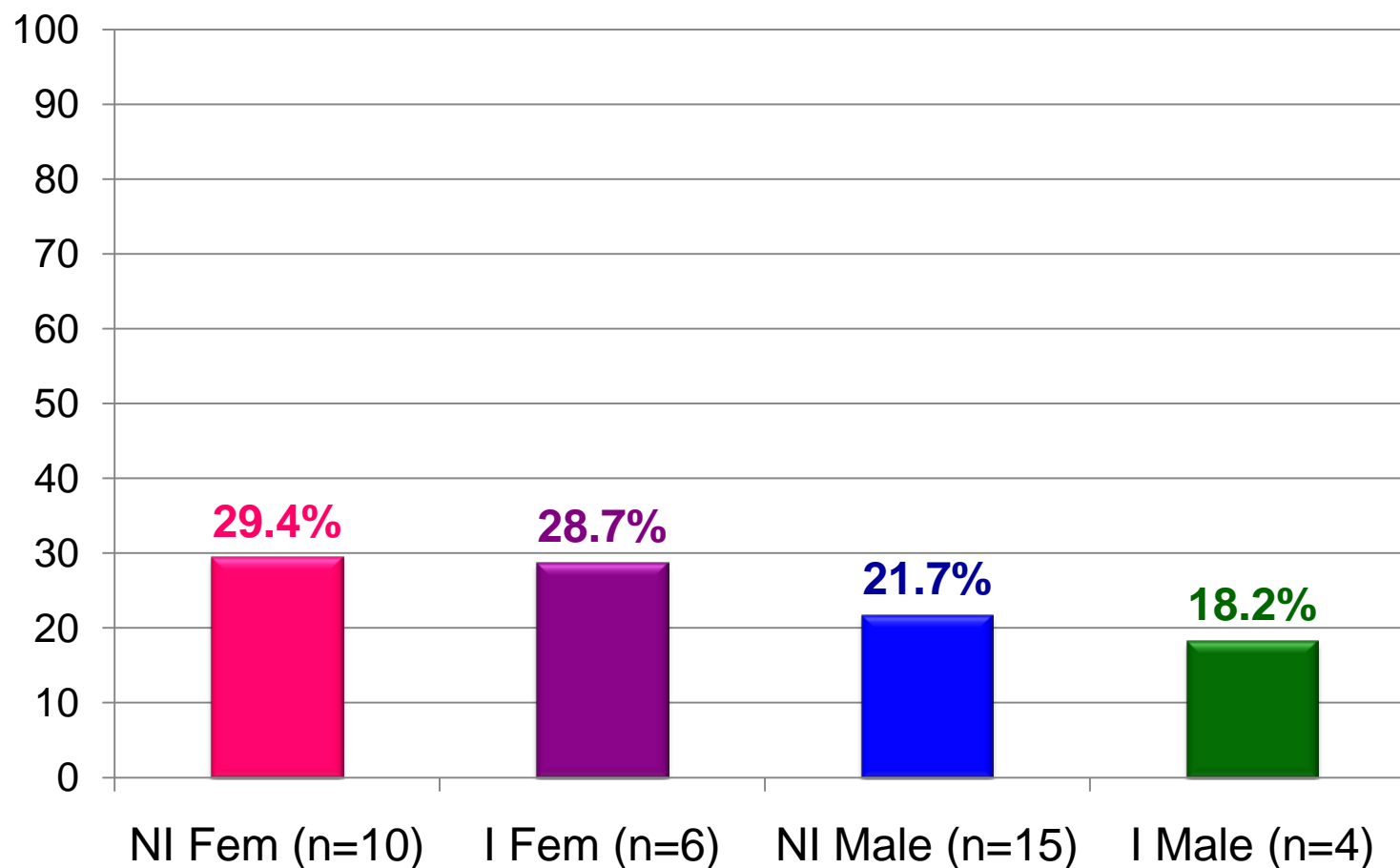
^a Some respondents were prescribed more than one type of psychiatric medication, meaning total numbers may exceed group sizes.

Significant
Non-significant

What we discovered in HoPE

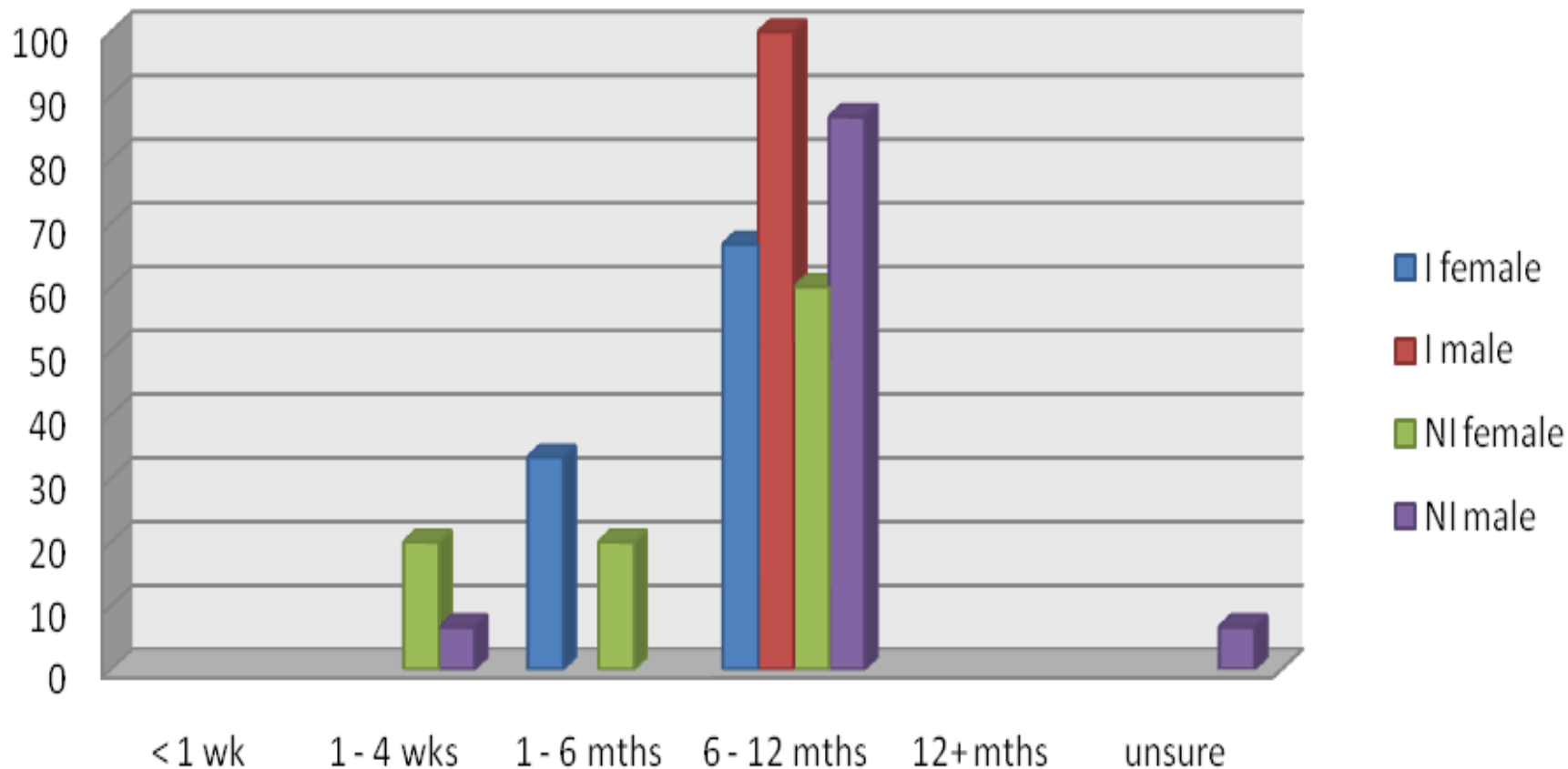
Self Harm

- 24% of prisoners had self harmed before



What we discovered in HoPE

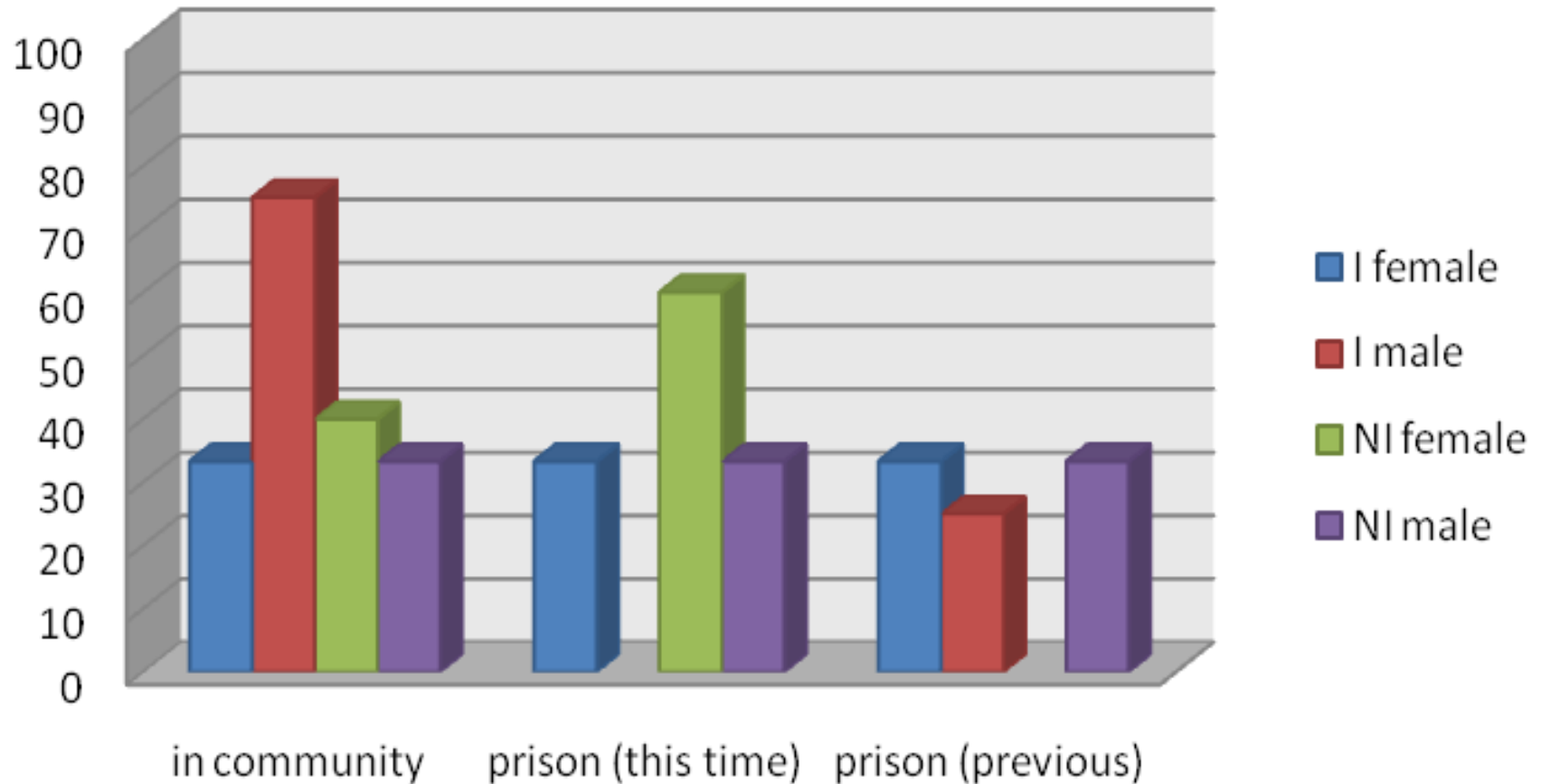
Amount of time since last self-harm attempt



Source: ECU HoPE Collection 2008 [computer file]

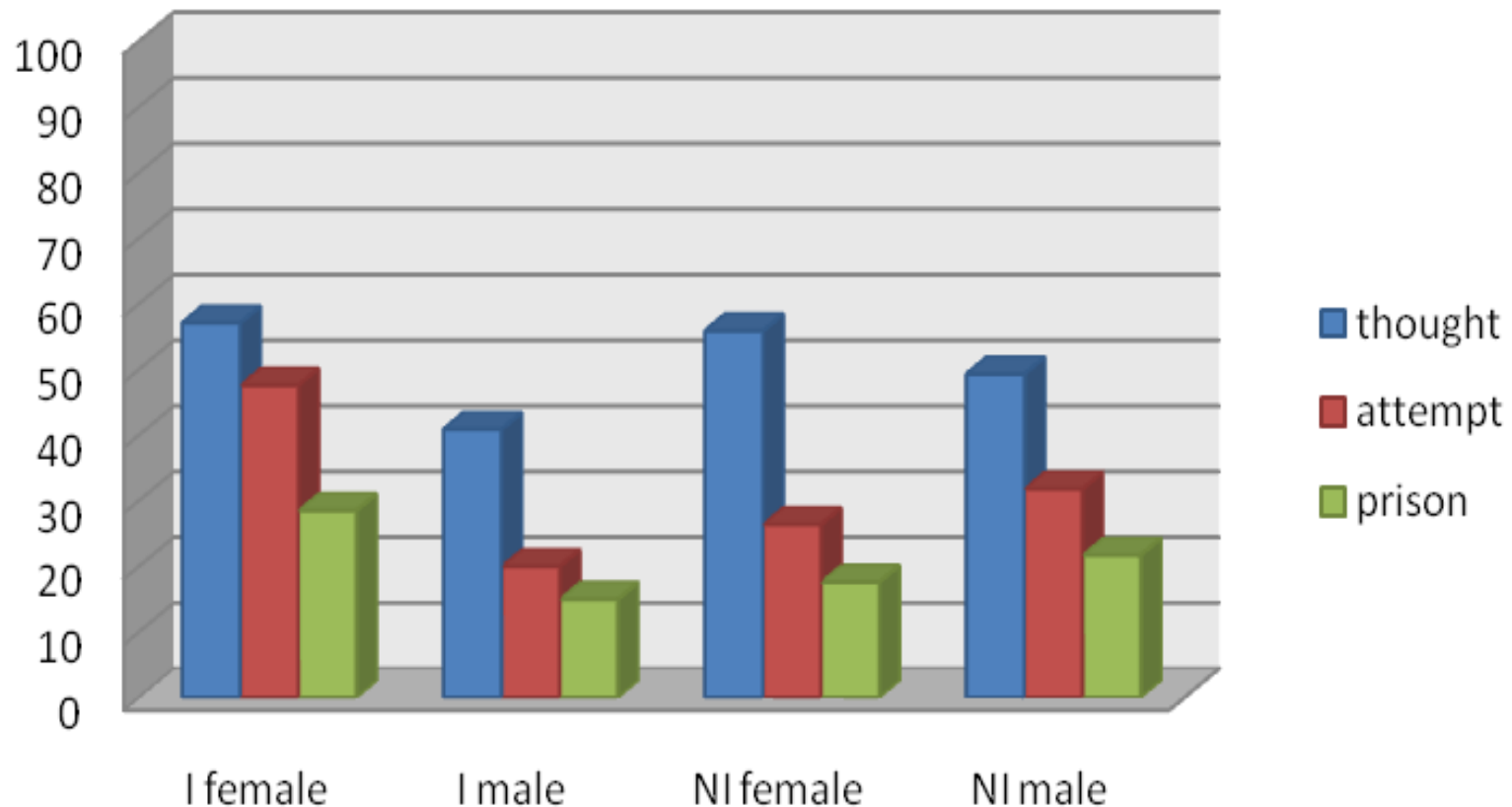
What we discovered in HoPE

Location of last self-harm



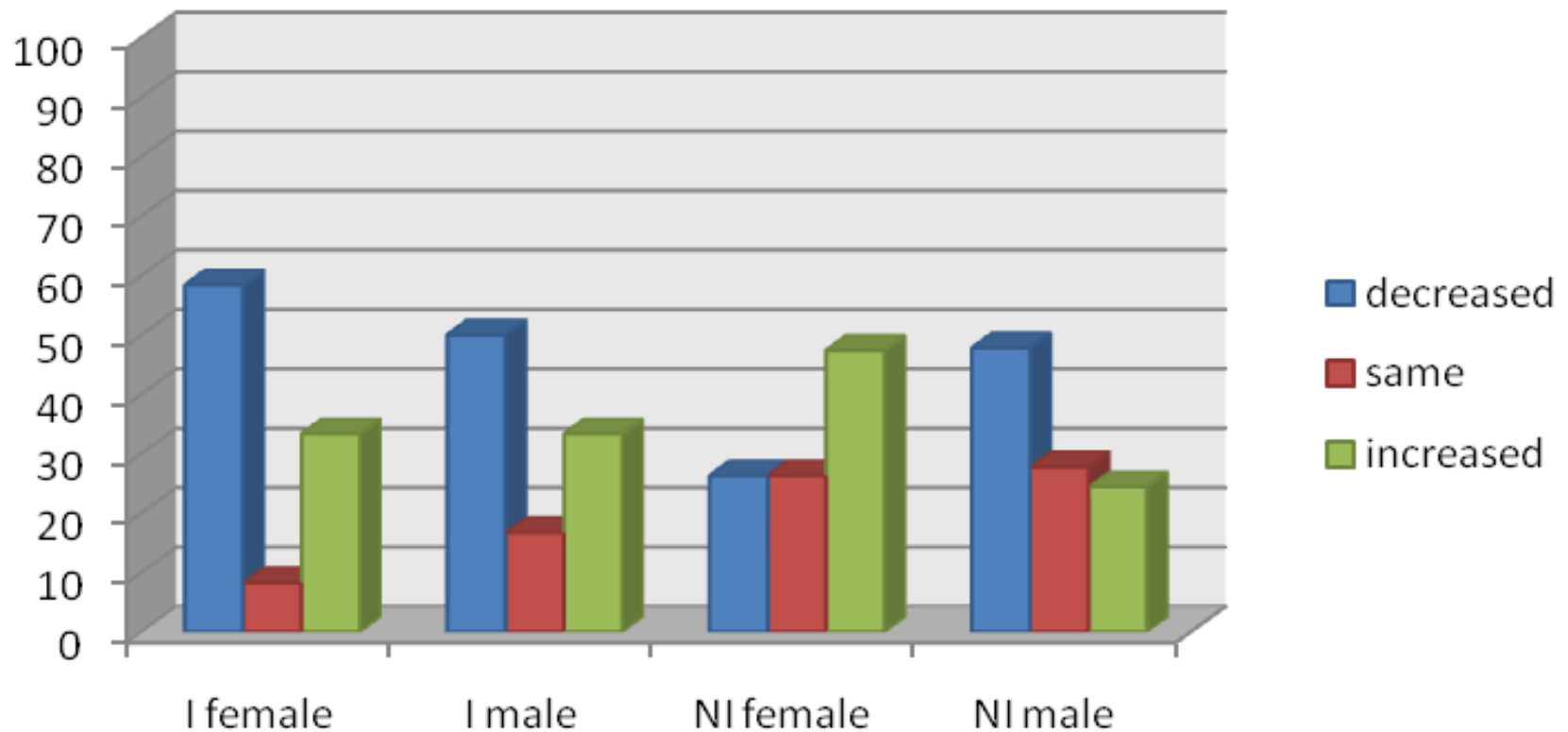
What we discovered in HoPE

Suicide - thought/attempt/location



What we discovered in HoPE

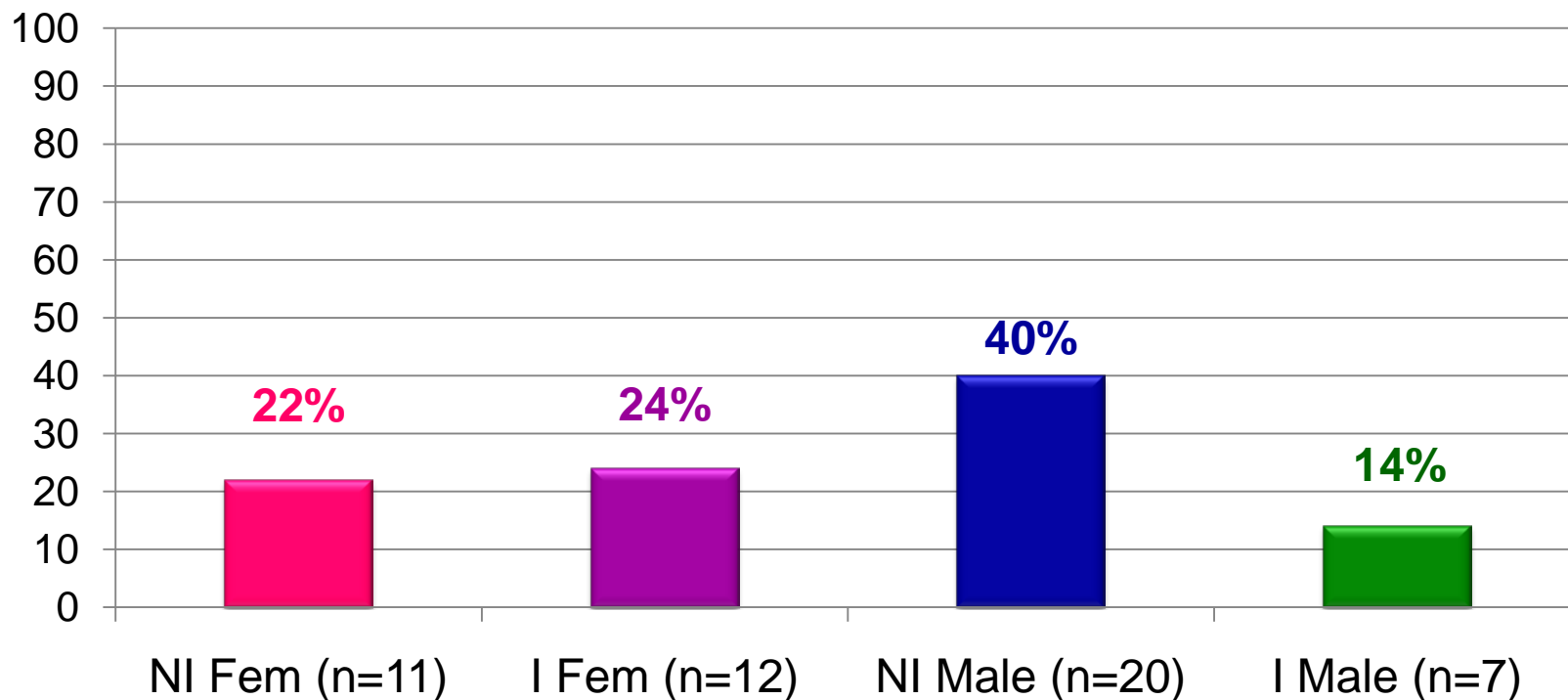
Thoughts about suicide since incarceration



What we discovered in HoPE

Brief Jail Mental Health Screen

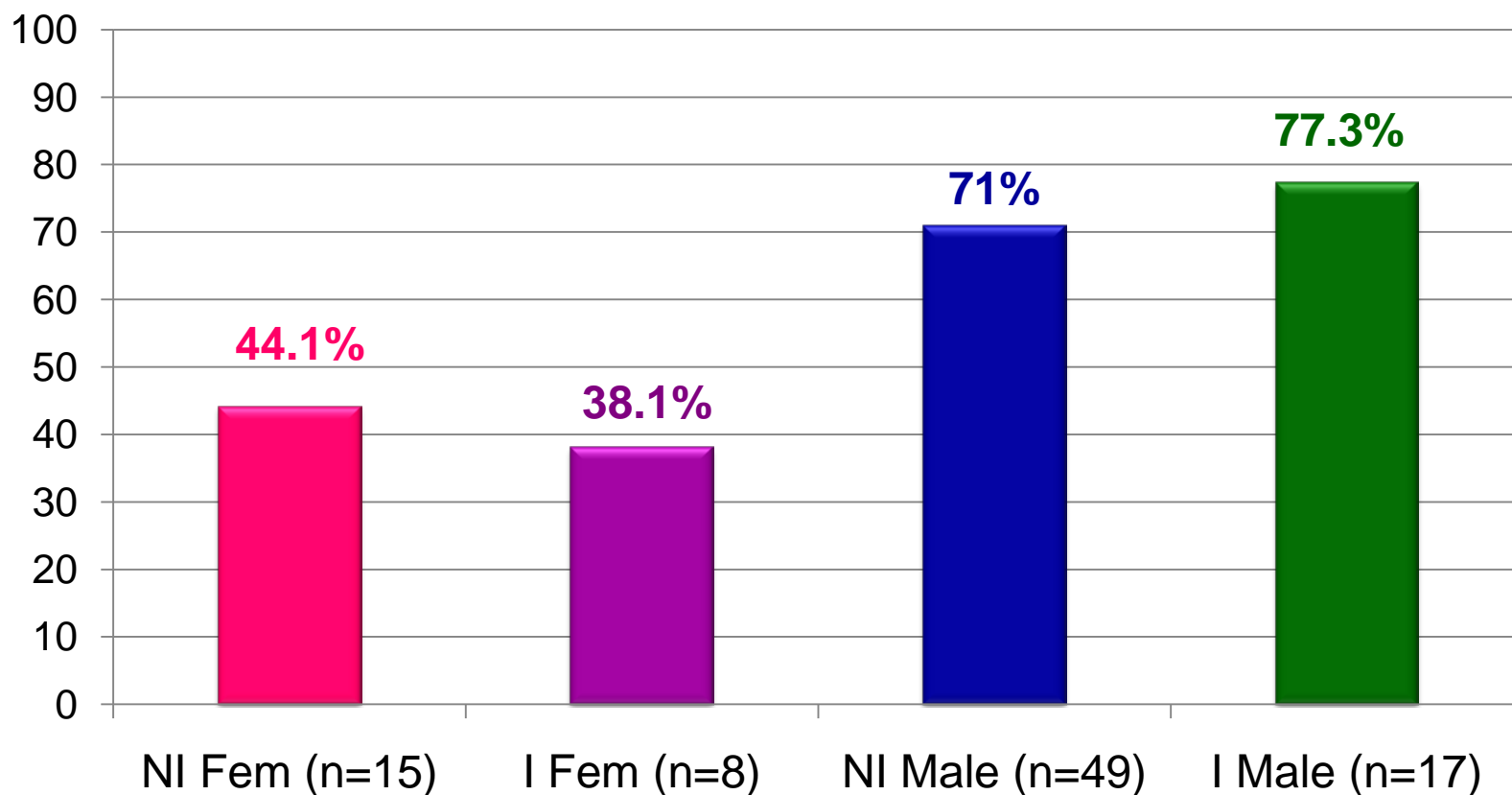
34% (n=50) of participants met the requirements of referral for further assessment



What we discovered in HoPE

Kessler-10

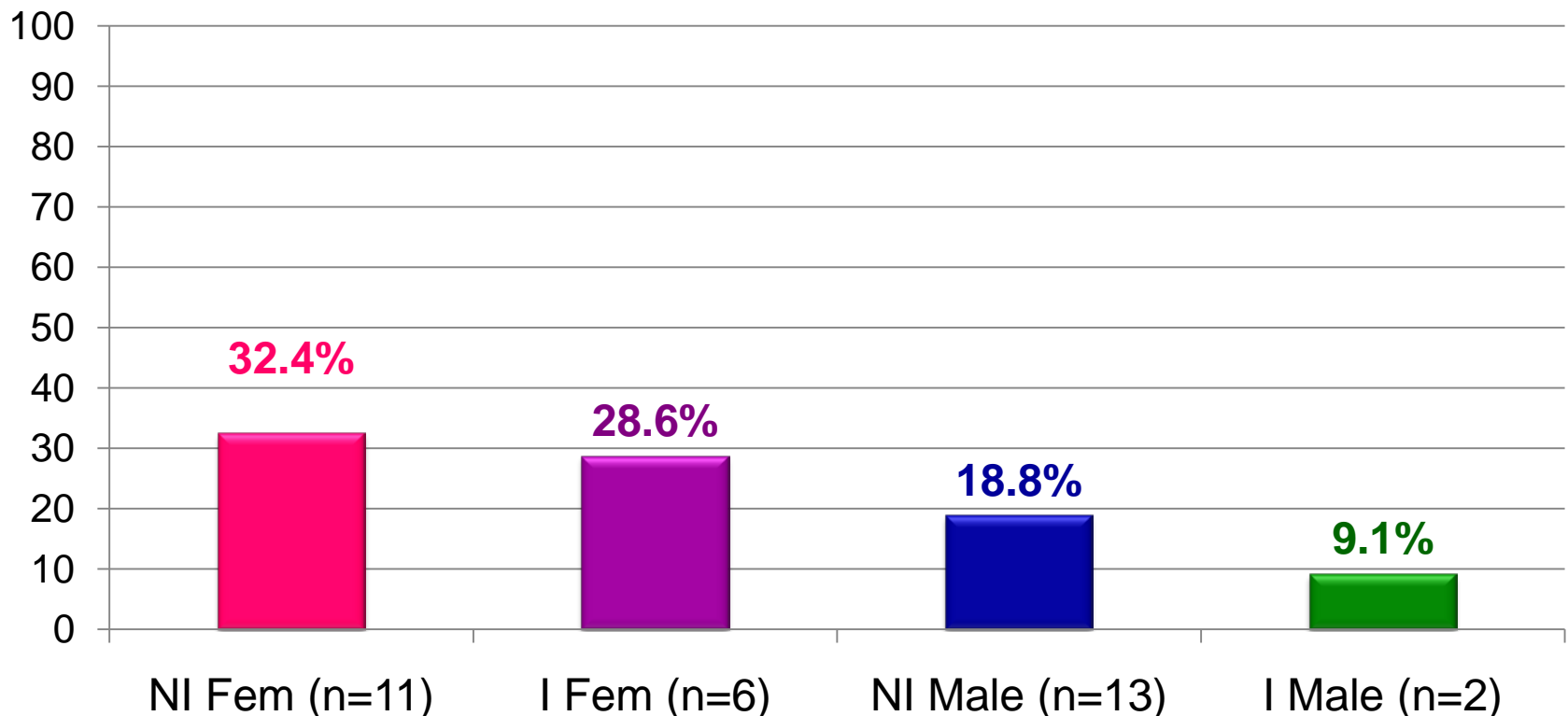
May **not** be experiencing significant feelings of distress



What we discovered in HoPE

Kessler-10

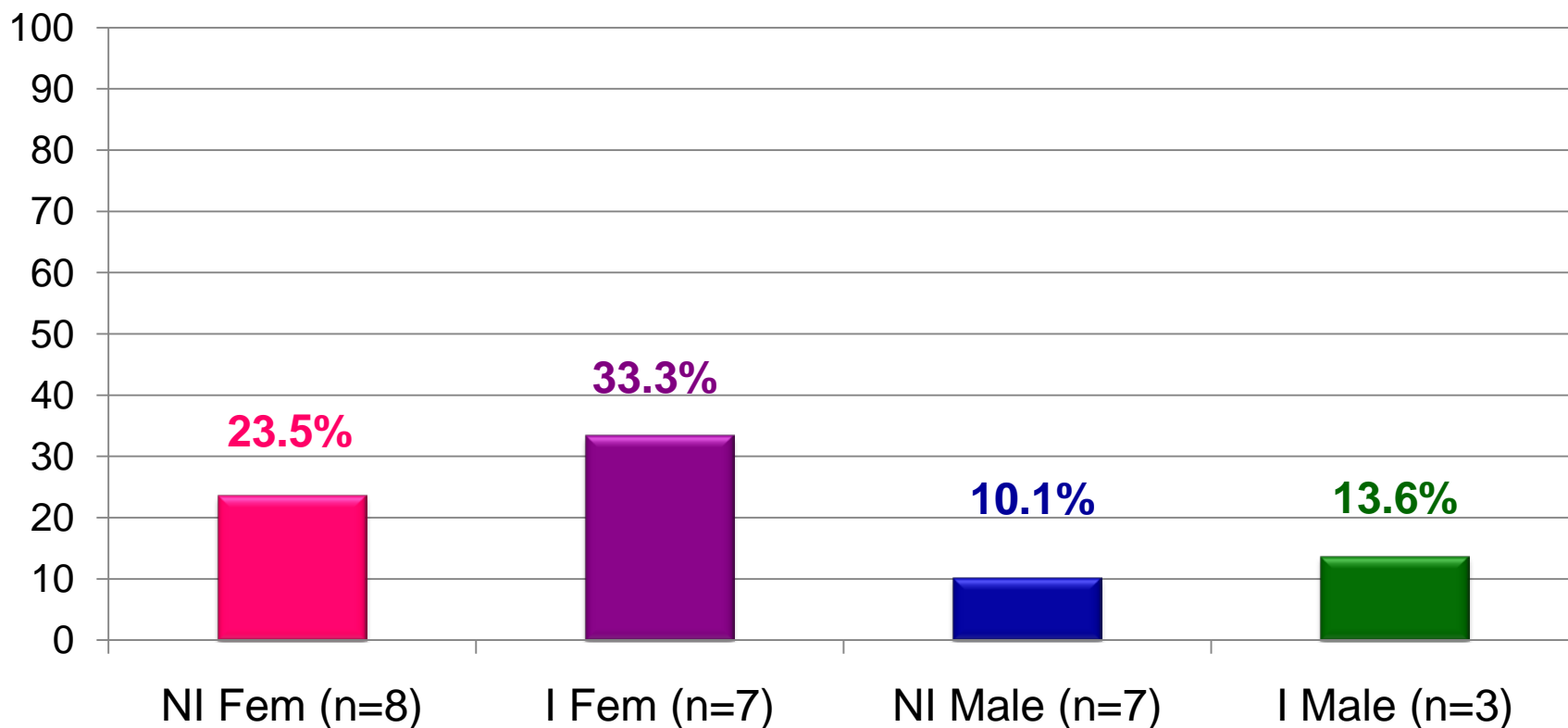
May be experiencing **mild/moderate** levels of distress consistent with a diagnosis of mild/moderate depression and/or anxiety



What we discovered in HoPE

Kessler-10

May be experiencing **severe** levels of distress consistent with a diagnosis of severe depression and/or anxiety



Conclusions

- Almost two-thirds of prisoners had previously received treatment or assessment for mental health problems
- NI people over 3 times more likely to have previously received treatment for a mental health problem
- Ind Females were over 3.5 times more likely than Ind males to have received treatment for a mental health problem
- Females were 2.5 times more likely to be taking psychiatric medication
- Almost $\frac{1}{4}$ of all prisoners had engaged in self-harming behaviours
- Majority of last self-harm episodes occurred in previous 6-12 months

Conclusions

- Over 50% of prisoners had thought about committing suicide and 30% had attempted suicide
- Overall, suicidal thoughts decreased in prison
- 34% of prisoners met the criteria for needing referral for further mental health assessment
- Over 1 in 5 prisoners met criteria for experiencing mild – moderate levels of distress
- 17% of prisoners met criteria for experiencing severe distress

Problems

- There is a limited capacity of community-based mental health services to address the needs of mentally ill offenders
- Provision of appropriate services & impact on recidivism¹⁴
- Other implications...

References

- ¹ Kraemer, S., Gately, N., & Kessell, J. (2009). *HoPE (Health of Prisoner Evaluation): Pilot study of prisoner physical health and psychological wellbeing*. Joondalup, WA: Edith Cowan University.
- ² Australian Institute of Health and Welfare. (2006). *Towards a national prisoner health information system*. Canberra: Australian Institute of Health and Welfare.
- ³ Policy Research Associates, Inc. (2005). *Brief Jail Mental Health Screen*. Delmar, NY: Author.
- ⁴ Kessler, R., Mroczek, D. (1994). *Final version of our non-specific psychological distress scale*. Ann Arbor, MI: University of Michigan Survey Research Center of the Institute for Social Research.
- ⁵ Butler, T., Andrews, G., Allnutt, S., Sakashita, C., Smith, N. E., & Basson, J. (2006). Mental disorders in Australian prisoners: A comparison with a community sample. *Australian and New Zealand Journal of Psychiatry*, 40, 272-276.
- ⁶ Australian Bureau of Statistics. (2009). *Mental health*. Australian Social Trends (No. 4102.0). Canberra, ACT: Author.
- ⁷ Australian Institute of Criminology. (2009). Mental disorders and incarceration history. *Crime Facts Info* (No. 184). Canberra, ACT: Author.
- ⁸ Mullen, P.E. (2001). *Mental health and criminal justice: A review of the relationship between mental disorders and offending behaviours and on the management of mentally abnormal offenders in the health and criminal justice services*. Canberra, ACT: Criminology Research Council.

References

- ⁹ Alexander, G.M., & Peterson, B.S. (2001). Sex Steroids and Human Behavior: Implications for Developmental Psychopathology. *CNS Spectrums*, 6, 75-88.
- ¹⁰ Junginger, J., Claypoole, K., Laygo, R., & Crisanti, A. (2006). Effects of serious mental illness and substance abuse on criminal offenses. *Psychiatric Services*, 57, 879-882.
- ¹¹ Kariminia, A., Butler, T., & Levy, M. (2007). Aboriginal and non-Aboriginal health differentials in Australian prisoners. *Australian and New Zealand Journal of Public Health*, 31, 366-371.
- ¹² Human Rights and Equal Opportunity Commission. (1993). *Human rights and mental illness: Report of the national inquiry into the human rights of people with mental illness (Part III People with particular vulnerabilities)*. Retrieved from http://www.hreoc.gov.au/disability_rights/inquiries/mental.htm
- ¹³ Australian Bureau of Statistics. (2008). *Prisoners in Australia, 2008* (No. 4517.0). Canberra, ACT: Author.
- ¹⁴ White, P., & Whiteford, H. (2006). Prisons: mental health institutions of the 21st century? *The Medical Journal of Australia*, 185, 302-303.

Contact Details

Jenny Kessell

j.kessell@ecu.edu.au

(08) 6304 2312

Natalie Gately

n.gately@ecu.edu.au

(08) 6304 5930

Sharan Kraemer

s.kraemer@ecu.edu.au

(08) 6304 5889