

A STATE OF THE PARTY OF THE PAR

PC-CP

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

PC-CP Working Group

11-12 May, 2021





Preliminary findings of the questionnaires

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







Summary



1. RANGE OF RESPONSES

Overall number of responses



2. INITIAL FINDINGS

• First analysis of the responses received by members states



3. SUMMARY

Highlights and interesting practices



4. NEXT STEPS

Analyzing qualitative information and full report





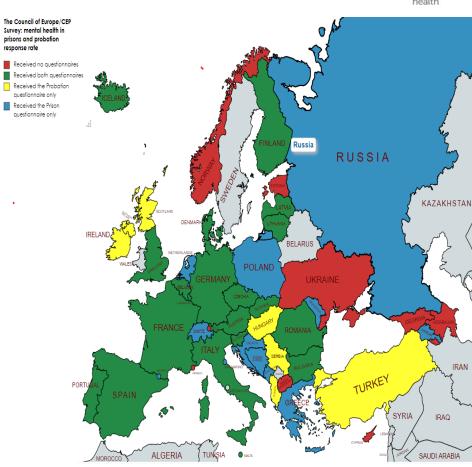


Mental health

Initial findings

Table 1 – Response

	Prisons	Probation Services
Number	Note: Germany sent 10	Note: Germany sent 11
of Total	different responses (out of	different responses (out of
Returns	a possible 16), Spain sent 2	a possible 16), Belgium sent
		3 and Spain sent 2. The UK sent 3/4.
	Thus, there was a possibility of 67 'Response Units'	Thus, there was a possibility of 67 'Response Units'
	Data is reported from 42 out of a possible 67 'response units'	Data is reported from 42 out of a possible 67 'response units'
% Overall Response	63%	63%







Initial findings

Table 2 – Receiving mental health awareness training

	Prisons	Probation Services
Number receiving training	31	14
No. of Valid responses	42	38
% 'Yes' training received*	73.8%	37%
Range	N/A	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 Clearly half the proportion trained in probation compared to prison (74% vs 37%)

Initial findings

Four countries presented

> estimated budget for the

treatment of

mental health

Most of the rest mentioned that the budget for this area is included in the general budget

disorders in

prison





Table 3 – Total budget for mental health expressed per head of prison/probation population

	Prisons	Probation Services	
No of valid responses	4	29 22 = unknown 7 = other (listed below)	
List budgets for all replying countries	 Iceland - 450,000 Euros Malta - 1,5 Million Euros The Netherlands - 15,5 Million Euros Finland - 20 Million Euros 	 Baden-Wurttemberg (Germany): 12,50 Euro per employee per year Iceland: 450,000 euros Albania: No budget Ireland: No budget Malta: No budget Northern Ireland: No budget Slovakia: No budget 	



Only two services knew anything about the costs of treating mental health disorders in probation





Mental health

Initial findings

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

Prisons

No of valid responses	26 (61.9%)
List estimates by Country/Jurisdiction	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%

Probation

No of valid	
responses	:

21 (50%)

List estimates by Country/Jurisdiction

Austria: 2.5% received a forensic order; Belgium (French speaking): 30%; Belgium (German speaking): 8%; Catalonia: 7%; Czech: 11.6%; Denmark: 50%; England: 11%;

Brandenburg (Germany): 50-60%; Hessen

(Germany): 15%;

Niedersachsen (Germany): 20%; Nordrhein-Westfalen (Germany): 13%; Hungary: 13.55%; Iceland: 15%; Ireland: 40%; Northern Ireland: 65%; Portugal: 50-60%; Schleswig-Holstein (Germany): 15-25%; Thüringen (Germany): 10%; Scotland: 70-90%; Slovakia: 2% certified;

Slovenia: 15%

■ Range – 2% - 90%







Initial findings



- Most countries rely on the MoJ to provide care inside prison
- Nevertheless, in some countries MoH is performing treatment as well

 The bulk of mental healthcare provide outside of probation



Table 5 – Organisations providing mental health care in prisons and probation services

	Prisons	Probation Services (n=36 valid responses)
Ministry of Justice	a) 42,8%); b) 73,8%	7 (19%)
Healthcare	a) 14,3%); b) 21 (50%)	31 (86%)
Voluntary sector	b) 4 (9,5%)	10 (28%)
Other	a) 8 (19%); b) 2,3%	8 (%)

- Only institution providing mental health care
- Combined with other institution





health

Initial findings

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

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



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

Table 7 – When does screening take place in probation

 Most screening takes place at the court stage in probation although prisons important too



Probation	
36	

Valid responses	36
Arrest	15 (42%)
Court	34 (94%)
Prison	31 (86%)
Probation	16 (44%)





Mental

Initial findings

Table 8 – How often are prisoners screened for MH problems

Frequency of Prisoner screening for mental health problems

	joi mentar nearth problems
By request of the	28 (66,6%)
prisoner	
By medical order	28 (66,6%)
Once a year or less	24 (57,1%)
Every two years or	28 (66,6%)
more	



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

Table 9 – Who usually screens for mental health disorders in prison and probation?



 Many countries stated that screening for mental heath problems are conducted at least once a year

 Mostly psychiatrists and psychologists screen



	Prison	Probation Services
Valid responses	42	36
Prison Staff	12 (28,5%)	
Probation staff		10 (28%)
Other criminal justice staff	5 (11,9%)	2 (6%)
Nurse	16 (38%)	3 (8%)
General Practitioner	32 (76,2%)	11 (31%)
Psychiatrist	33 (78,5%)	22 (61%)
Psychologist	35 (83,3%)	22 (61%)
Social Worker	17 (40,4%)	9 (25%)
Other *	1 (2,3%)	7 (19%)





Initial findings

Table 10 – What is the role of prison/probation services in providing mental health care

	Prison	Probation
Valid responses	42	37
Proving	35 (83,3%)	5 (14%)
interventions/treatment		
themselves		
Inviting external services to	27 (64,2%)	4 (11%)
work on the premises		
Referring people to external	26 (61,2%)	31 (84%)
services working elsewhere		
	23 (54,7%)	7 (19%)
Mixture of the above		





 Most prison organizations provide treatment themselves, but also invite external services (mainly specialists), as well refers to the health services in the community By far the largest role is referring on to external agencies although there are several examples of psychology services offered within probation (N Ireland and Malta)





health

Initial findings

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

	Prisons
No of valid responses	42
% stating 'yes'	29 (69%)

Table 12 – Does the service, prison or probation, have any special order/requirements for people with mental health disorders?

	Prison	Probation services
No of valid responses	42	37
% stating 'yes'*	16 (38%)	12 (32%)



- About the same number of countries have special requirements (Law orders, acts, internal guidelines) for treatment of this inmates
- Overall only one-third of probation services have specific mental health treatment orders







Menta health

Initial findings

Table 13 - Do you collate the number of deaths by suicide nationally

	Prisons	Probation
		services
Valid responses	42	37
% stating 'yes'*	38 (90%)	5 (14%)

Major difference between prisons and probation



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

	Prisons
Valid responses	42
% stating there is	37 (89%)
such a	
programme	



- 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



Initial findings



Table 15 – Do your organisation work in co-operation with the community on resettlement plans?

	Prisons
Valid responses	42
% stating there is such a	37 (88%)
programme	



Most countries have cooperation with community, some including families, in order to prepare the reintegration of offenders

Table 16 - Is there specific work with families?

	Prisons	Probation services
Valid responses	42	37
% reporting yes and countries listed	19 (45,2%)	5 out of 37 (14%)
		France; Italy; Spain;
		Turkey; Northern Ireland

Table 17 - Is there a gender approach?

	Prisons	Probation services
Valid responses	42	37
% reporting yes and countries listed	20 (47%)	10 out of 37 (27%)
		Belgium (German speaking); Berlin (Germany); Brandenburg (Germany), Hessen (Germany); Iceland; Italy; Turkey; Northern Ireland; England; Scotland



- Small proportion include families
- Gender not addressed in 73% of services



Mental health in probation

Summary



- There was good response to the survey boosted by the returns of 11/16 German states.
- Half the proportion of probation staff received mental health awareness training compared to prison staff (74% vs 37%)
- Estimates of the prevalence of mental health problems in probation varied from 2% (Slovakia) to 90% (Scotland) with a median of 15%.
- Robust research indicates that the figure is closer to 40% so largely probation services seriously under-estimated the prevalence although may be problems of definition
- Only 4 jurisdictions collected prevalence data routinely.
- By far the most common model for probation clients to access mental healthcare was through the use of external healthcare agencies (86%), 10% accessed services in the voluntary sector.
- Screening for mental health disorders was most likely to take place in the court (94%) or in prison (86%). Psychiatrists (61%) and psychologists (61%) were mostly involved although GPs were involved in nearly one-third of cases (30%)

- Most probation responses indicated that the role of probation services was to direct probationers to external services (as above). It should be noted that two countries, Malta and Northern Ireland, used an 'in-house' treatment service run by psychologists. England had a one-off initiative for offenders with a personality disorder.
- 12 (32%) countries/jurisdictions had specific treatment orders for mental health. More detail of those will be written up from the qualitative data
- 5 (14%) of countries jurisdictions monitor suicide rates in probation (Bulgaria, N Ireland, France and Ireland) but provide no data. England provides a website address showing that probation suicides have been examined for a number of years.
- A small number of probation services work with families (14%) and 27% provide a gender approach to probation.
 More detail given in the qualitative data.

A STATE OF THE PARTY OF THE PAR

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 specials 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





Next steps



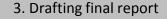
1. Improving the quality of the information

- Coming back to members states to support filling the gaps in the reports
- Clarify concepts and definitions in specific questions in order to align the scope of all answers



2. Confirming data

- Complete the data base with updated information
- · Review findings and re-circulate initial report







Thank you for your attention!

For more information:

www.coe.int/prison