

## Goals

The O1 presents a literature review on the topics of mental health care – with an emphasis on suicide -, aging, and palliative care. The European context was privileged, and data was collected in MenACE partner countries.

## Main results

### **Mental health in prisons**

#### **Depression in prisons**

International studies show a prevalence of depression in prisons from 12,3% (male prison population in Brasil; Andreoli et al., 2014), and 26,2% in the USA (Yi, Turney, & Wildeman, 2016), until 43,8% in Ethiopia (Beyen, Dadi, Dachew, Muluneh, & Bisetegn, 2017). Considering some of the partner countries, a study in Norway with a sample of 26 inmates revealed a prevalence of mild depression and depression around 46% and 19%, respectively (Værøy, 2011). In Portugal, assessing the relationship between depression and prison regime the authors found that inmates in pre-trial show average levels of medium depression, while sentenced inmates, in closed regime show average levels of mild depression. Sentenced inmates in open regime do not show average levels of clinical depression (Carvalho, Lecat & Sendas, 2016).

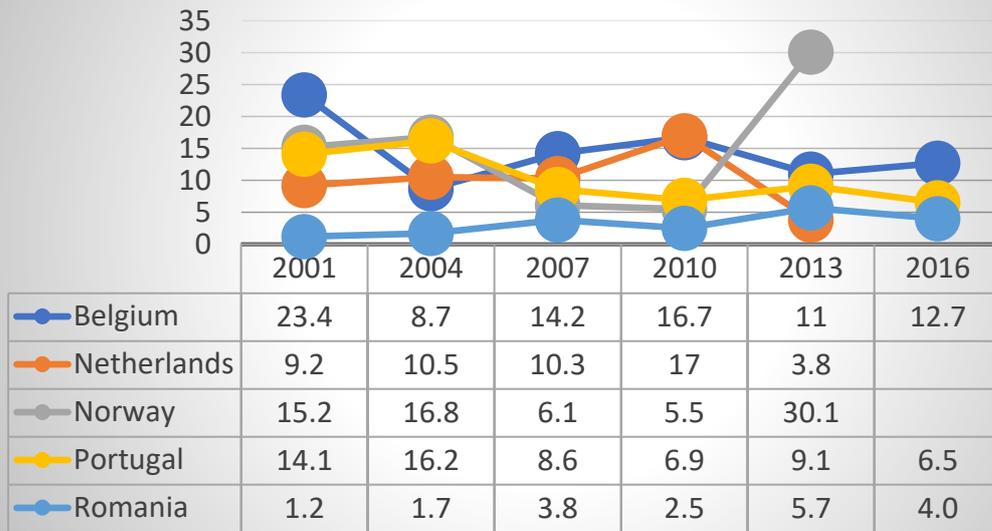
#### **Anxiety disorders in prisons**

Prevalence of anxiety disorders among inmates is also high, particularly among the female population. Watzke, Ullrich and Marneros's (2006) study in Germany shows that 25% of female inmates and 7% of male inmates show phobic and anxiety disorders. In Brazil, anxiety disorders affect 33% of male inmates and 50% of female inmates (Andreoli et al., 2014). In a partner country (Norway) a study revealed a prevalence of clinical anxiety between 31% and 35% among male inmates, depending on the applied anxiety scale.

#### **Suicide in prisons**

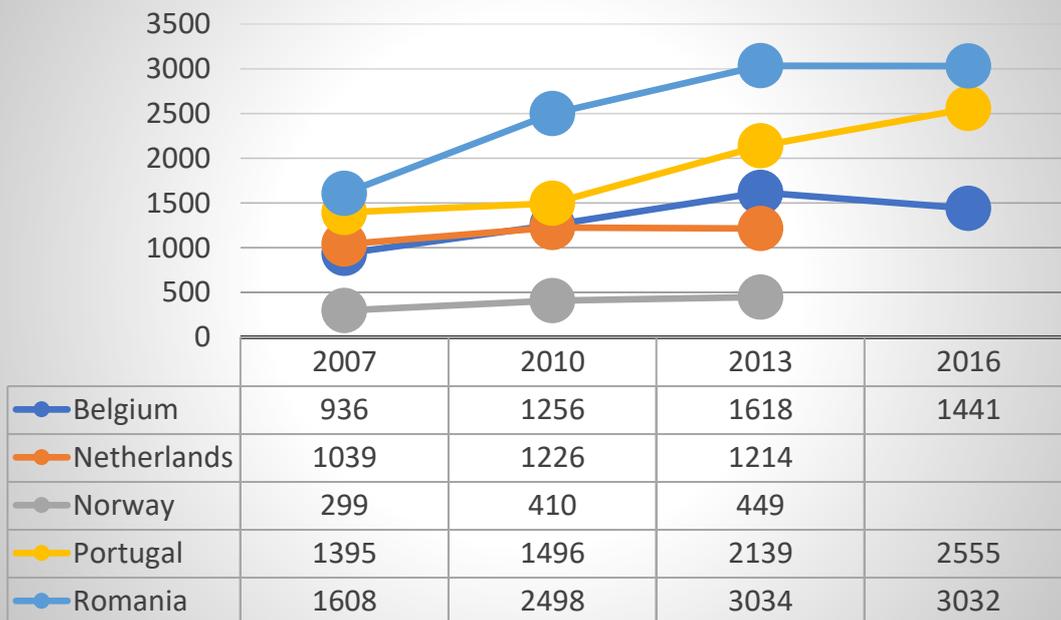
Data about suicide in prisons, at the European level (Aebi, Tiago, & Burkhardt, 2015), shows that suicide explains 21,3% of total deaths in prisons. Countries like France, Sweeden and Germany deal with higher percentages. On the other hand, Greece, Ukraine and Serbia show below average results. Figure 1 show the absolute number of suicides per 10.000 inmates in the partner countries. Values range between 5 and 17 suicides per 10.000 inmates.

**Figure 1 – Suicides per 10,000 inmates**



Relative to the aging of the prison population, focusing of inmates with more than 50-years our data shows that the absolute numbers of older inmates increased, considering the year 2007, 2010, 2013 and 2016 (see Figure 2).

**Figure 2 - Number of older inmates (≥ 50 years)**



This increase is independent from the fluctuation of the overall prison population, considering that even the overall population decreases, the number of inmates with  $\geq 50$  years still increases.

### Conclusions and implications

From the theoretical and empirical work, the conclusions are as follows:

Considering the mental health realm, inmates show a poor mental health, with high rates of depression and anxiety disorders, that led inmates to have a higher demand for health care.

Considering the aging of the prison population, this tendency is affecting all the partner countries with an increase in the percentage of old ( $\geq 50$  years) inmates ranging from 17% (in the Netherlands, for the 2007-2013 term) to 89% (in Romania, considering the 2007-2016 term). The Netherlands and Romania that, in the mentioned periods, saw their prison population decrease by 28 and 7 percent, respectively.

The progressive increase of the number of older inmates makes them a considerable portion of the total prison population. In Portugal, for example, 18,5% of the prison population encompasses inmates with more than 50 years, according to data from 2016.

Regarding palliative care for inmates, with the increase on the number of older inmates, it is expectable that the demand for palliative care will also increase.

The following implications were drawn based on the conclusions:

- Health professionals/inmates' ratio should ensure the provisioning of equivalent care to inmates, when compared with the non-incarcerated population.
- Frontline staff should be part of the needed responses, and therefore should receive training on a regular basis on the topics of mental health.
- A thorough assessment of inmates at intake, particularly in the case of young inmates and women its advised as a suicide prevention measure.
- Responses should be created considering the older inmates needs for palliative care, with multidisciplinary teams that value respect, empathy and compassion, as well as security.

## References

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