

# LEAVE THE WORLD: MULTICENTRIC ANALYSIS ON SUICIDE ATTEMPTS AND NON-SUICIDAL SELF-INJURY ACTS IN PRISON

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#### Introduction

The starting point of this research is an eloquent fact: in Italy detainees kill themselves or self-injure between 9 and 21 times more than the free population. Suicide and deliberate self-harm are the most common form of death within detention facilities. Phenomena related to self-inflicted aggressivity in prison have vary peculiarities: they need a multidisciplinary analysis to be addressed. Detainees live in contexts with high level of bio-psycho-social vulnerabilities and that increases exponentially suicidal and self-harm behaviours as expression of freedom and self-control<sup>1</sup>. Data in literature showed that suicide rates within penitentiary facilities were significantly and globally higher than in the free population <sup>2;3</sup>.

### **Objective**

Knowing how inmates commit suicide, make Suicide Attempt (SA) and how they self-injure can help operators to develop preventive projects. Moreover, data and reflections upon that can be used as support for judiciary and social-health operators; they often are the first ones to cope with these phenomena within penitentiary facilities, adapting their work to insufficient resources to face this delicate problem.

## Methods

The "Suicide risk assessment form" developed by Professor Francesco Ceraudo was used within the prison walls to identify the presence of risk factors predisposing to suicide and/or self-harm behaviours.

The completed forms were placed on a database built with Google Drive software and analysed with Office Excel and Stata SE14 software.

Continuous variables were expressed as mean±standard deviation and range, categorical variables as proportions.

The prevalence of individual pathologies was expressed as a percentage and the 95% confidence interval (95% CI) was calculated for the prevalence of each individual pathology.

#### Results

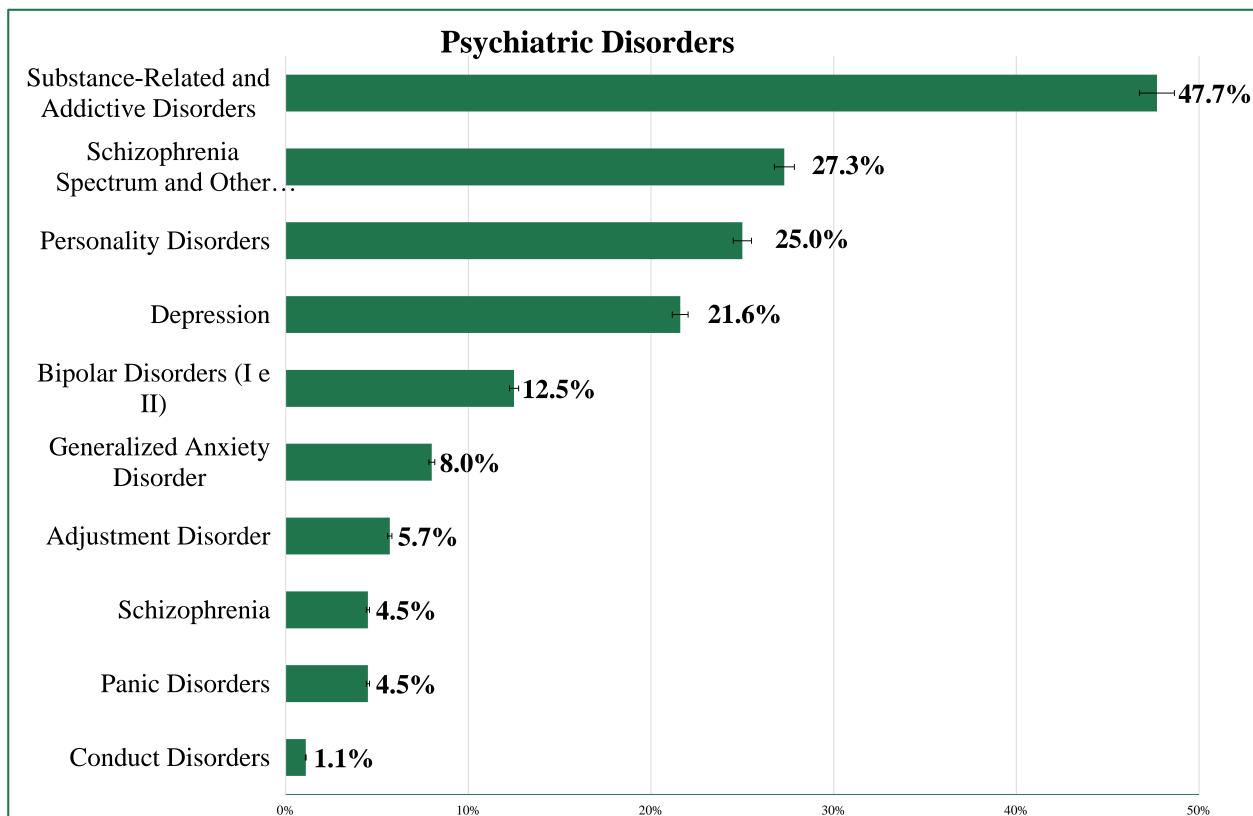
Our sample consisted in 88 prisoners' files collected from prisons of Trani, Foggia, Matera and the detainees' section of A.O.U. Polyclinic of Bari. The collected files referred to the years 2014-2018.

96.6% (N.=85) of the sample was male and 3.4% (N.=3) was female. 97.7% of the detainees were Italian. The total average age of the sample was 40.8 years.

Data about psychiatric disorder diagnosis, motivations underlying SA and NSSI acts, and methods of self aggressiveness are reported in the graphics and table below.

#### **Psychopathology**

Statistical analysis showed that 79.6% (N.=71) of the subjects had a diagnosis of psychiatric, ongoing or previous pathology (*Graph 1*).

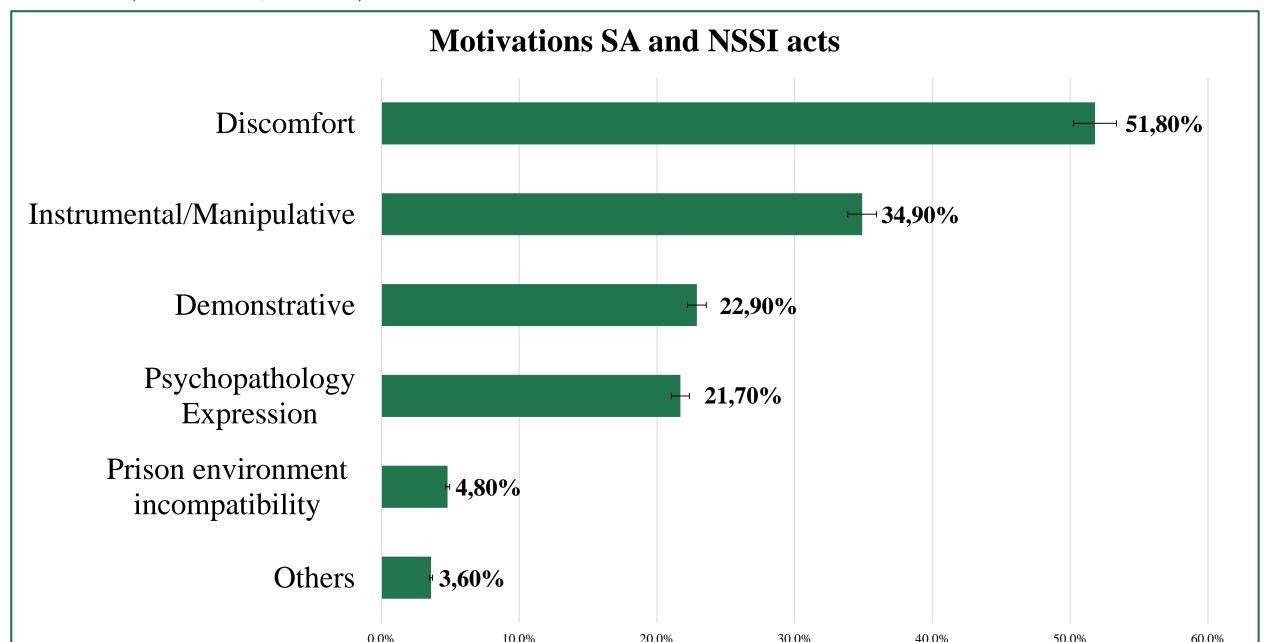


Graphic 1. Psychiatric pathology prevalence (%), ongoing or present, for specific disorder.

## Motivations

Motivations underlying SA and NSSI acts that we found the most are different and are reported in *Graph 2*.

The discomfort experienced by the inmate in the prison context is the most frequent purpose of the acts (N.=43/83; 51.8%).



Graphic 2. Motivations of SA and NSSI acts in total sample.

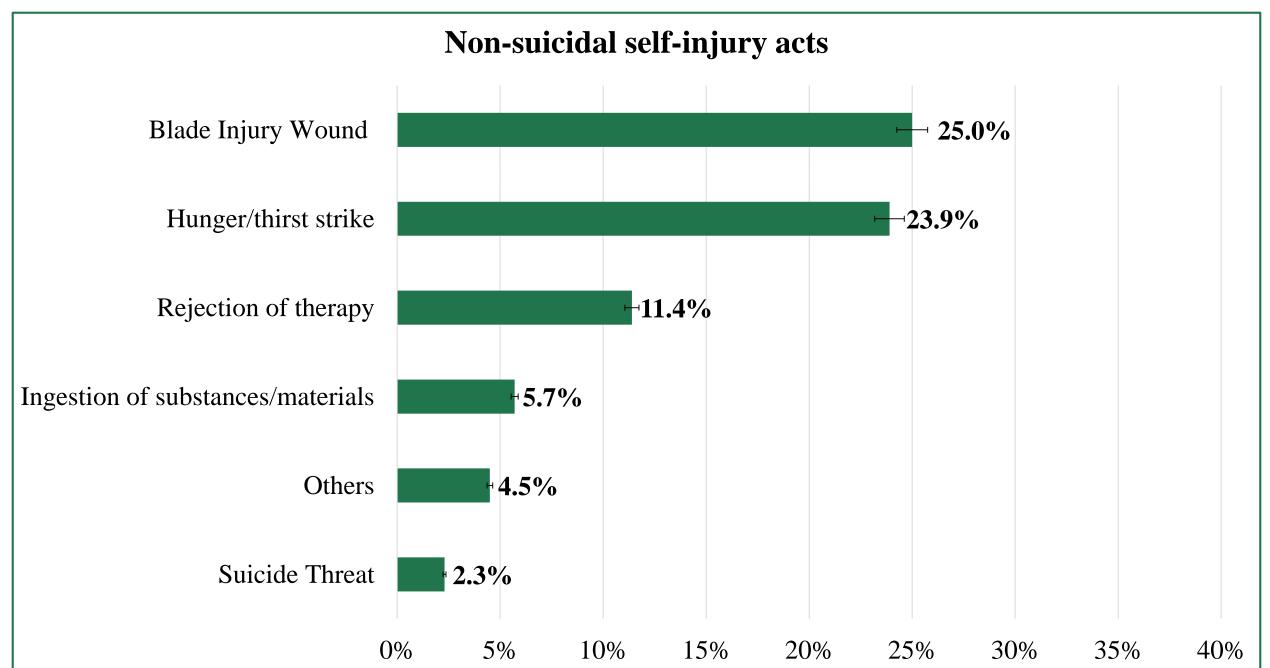
### Methods of self aggressiveness

The analysis of SA showed that 46.6% of the total sample carried out at least one serious SA; 65.9% of these at least two SA and, for 51.9%, at least three SA or more.

Methods	Attempt n.1*		Attempt n.2**		Attempt n.3***	
	n	%	n	%	n	%
Asphyxiation (hanging, suffocation, inhalation)	22	55.0	6	27.3	3	33.3
Ingestion of substances/materials	11	27.5	10	45.5	3	33.3
Cutting blood vessels	4	10.0	4	18.2	2	22.2
Others	3	7.5	2	9.0	1	11.2

*Table 1.* Known mode of SA, as adopted in individual attempts; [\*] 40/41 (97.6%) inmates who attempted suicide at least once. [\*\*] 22/27 (81.5%) detainees who attempted suicide at least twice; [\*\*\*] 9/14 (64.3%) inmates who attempted suicide three times or more.

Concerning NSSI acts, 69.8% of the sample performed at least one self-harmful behaviour during detention. For 86.7% of them method used for NSSI acts is known: the blade injury wound was the most frequently encountered method (N.=22; 25.0%; *Graphic 3*). 23.1% (N.=12) of the subjects whose self-injurious act was known have put in place more than one NSSI act.



Graphic 3. Proportion (%) of subjects whose modality of self-healing act is known (n=60), by methods.

## Discussion

The most interesting data emerged from the analysis of the psychiatric disorders' prevalence in our sample, presented in 80% of prisoners. The highest prevalence in our simple is Substance Abuse Disorders. Fazel (2012) found in the inmate population that Alcohol Addiction Disorders was present in 17-30% of men and 10-24% of women and Substance Abuse Disorders respectively 10-48% and 30-60%<sup>2</sup>. An Italian study conducted by Macciò et al. (2015) show that 58.7% of inmates had at least one ongoing or previous psychiatric condition compared to 8.7% of the general population. Of these, about 70% were diagnosed with Substance Abuse Disorder<sup>3</sup>.

A Personality Disorder diagnosis was present in 25% of our sample. Italian studies of personality disorders prevalence in SA and NSSI acts authors were lacking. One of the most recent study showed that the prevalence of Personality Disorders was 14.6% in inmates who have carried out NSSI acts, while for SA the prevalence was 16.2%<sup>4</sup>.

As to the NSSI acts methods, Bazzerla et al. (2015) identified the blade injury wound as the most widely used method for NSSI acts (59.7%). Hunger strike seemed to be used mainly by men who often use this method as a protest to the prison administration. The trend of our work also confirms this analysis<sup>4</sup>.

Our results were confirmed by literature, in which was clearly showed that hanging asphyxiation (about 85%), gas inhalation/intoxication (about 7%) and suffocation (about 3%) were the most frequently used methods<sup>4</sup>.

## Conclusions

This survey supports the hypothesis that the presence of psychiatric pathology is not the only origin of non-suicidal self-injury and suicidal behaviors. In fact, it was found that feelings of despair acta as precipitating factor for such behaviours.

In fact, the underlying motivation of NSSI acts and SA is the discomfort experienced by inmates within the prison environment, rather than for endogenous and pathological reasons.

For what concern methods used for SA and NSSI acts, the wide variety of utilized modalities makes it necessary to restructure prison's spaces and environments in order to reduce the number of phenomena.

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