

People with Mental Health and Intellectual Disabilities in Irish Prisons

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The prevalence of major mental illness, substance misuse and homelessness in Irish prisoners: systematic review and meta-analyses

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Aims. To systematically review studies from Irish prisons that estimate the prevalence of major mental illness, alcohol and substance misuse, and homelessness at the time of committal.

Methods. Healthcare databases were searched for studies quantifying the point prevalence for each outcome of interest. Searches were augmented by scanning of bibliographies and searches of governmental and non-governmental websites. Proportional meta-analyses were completed for each outcome.

Results. We found eight, six and five studies quantifying the point prevalence of major mental illness, substance misuse, and homelessness respectively. Considerable heterogeneity was found for each subgroup (except psychosis where substantial heterogeneity was observed) and random effects models were used to calculate pooled percentages. The pooled percentage for psychotic disorder was 3.6% [95% confidence interval (CI) 3.0–4.2%], for affective disorder 4.3% (95% CI 2.1–7.1%), for alcohol use disorder 28.3% (95% CI 19.9–37.4%), for substance use disorder 50.9% (95% CI 37.6–64.2%) and for those who were homeless on committal 17.4% (95% CI 8.7–28.4%).

Conclusions. Estimates for the prevalence of psychotic illness and substance abuse amongst Irish prisoners are in keeping with international estimates of morbidity in prisons, whilst those for affective disorders are lower. The prevalence of homelessness in committal to Irish prisons is higher than some international estimates. Rates for psychoses, alcohol and substance misuse as well as homelessness in Irish prisons are significantly higher than the general population prevalence of these vulnerabilities. A need for service development is discussed.

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Key words: Addiction, homelessness, mental disorder, prison, substance misuse.

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Intellectual disability in Irish prisoners: systematic review of prevalence

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Abstract

Purpose – While individuals with an intellectual disability form a significant minority in the worldwide prison population, their healthcare needs require specialist attention. In Ireland, services for prisoners with intellectual disabilities need development. However, there is little substantive data estimating the prevalence of intellectual disabilities within the Irish prison system. The paper aims to discuss these issues.

Design/methodology/approach – The authors systematically review published data relating to the prevalence of intellectual disabilities in prisons in the Republic of Ireland. The authors searched four databases, governmental websites and corresponded with experts.

Findings – Little published data were elicited from searches except for one nationwide cross-sectional survey which reflected a higher prevalence than reported in international studies. Studies from forensic mental health populations are narrated to contextualise findings.

Originality/value – This study found that there is little data to accurately estimate the prevalence of intellectual disabilities in the Irish prison system and the limited data available suggests that this is likely to be higher than international estimates. The authors highlight the need for further research to accurately estimate prevalence in this jurisdiction, alongside the need to develop screening and care pathways for prisoners with an intellectual disability.

Keywords Ireland, Prison, Learning disability, Intellectual disability, Forensic mental health, Cognitive disability

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Autism spectrum disorder and Irish prisoners

The global prevalence of autism spectrum disorder (ASD) is 62/10 000 (Elsabbagh *et al.* 2012). A large cross-sectional study of schoolchildren (Sweeney *et al.* 2016) estimated the prevalence of ASD as 1% in Irish mainstream schools.

The prevalence of ASD internationally in correctional settings is higher than community estimates. One study in a US maximum security setting (Fazio *et al.* 2012) suggests a prevalence of 4.4%. A more recent systematic review found that the prevalence of ASD in 'forensic populations' varies from 2% to 18% (Rutten *et al.* 2017).

Dein & Woodbury-Smith (2010) report that individuals with ASD, including Asperger's syndrome, who offend represent a small but significant group. People with ASD are overrepresented within the criminal justice system worldwide and failure to detect ASD among offenders is not uncommon (Mouridsen, 2012). However, the relationship between ASD and

potentially higher rates of intellectual disabilities (IDs) as compared to international estimates (Murphy *et al.* 2000; Gulati *et al.* 2018a). ASD is a significant comorbidity in people with ID and 70% of those with ASD will have a comorbid ID. Even if the prevalence of ASD is the same as the community (1%), there should be c.37 individuals with ASD in Irish prisons.

The varied presentations of ASD and the inherent difficulties in researching such a heterogeneous group may account, in part, for a lack of studies. It is further possible that many cases of ASD do not come to the attention of the criminal justice system or psychiatric in-reach services; there may not be a prior formal diagnosis, those dealing with such prisoners may not have the training to recognise ASD and there may be a lack of effective screening tools or a lack of resources to refer suspected cases to. ASD advocacy may therefore have a specific role in this sub-population. Potentially small absolute numbers and limitations to available expertise may explain the lack of studies evaluating quantitative (prevalence) data and qualitative data relating to the experiences of prisoners with ASD.

The core impairments in ASD can have a significant bearing on an individual's journey through the criminal

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Mental healthcare interfaces in a regional Irish prison

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Abstract

Purpose – The purpose of this paper is to study the demographic, clinical characteristics and outcomes for those prisoners referred to secondary mental healthcare in a regional Irish prison and the proportion of individuals diverted subsequently from prison to psychiatric settings.

Design/methodology/approach – The authors conducted a retrospective review of 130 successive psychiatric assessment case records at a regional mixed gender prison serving six southern Irish counties. The authors analysed demographics, clinical characteristics and outcomes. Where diversion out of prison was undertaken, Dangerousness, Understanding, Recovery and Urgency Manual (DUNDRUM) scores were retrospectively completed to assess security need.

Findings – In total, 8.6 per cent of all committals from liberty were referred by a general practitioner and 8.1 per cent subsequently assessed by the visiting psychiatrist. Predominantly, these were young males charged with a violent offence. In all, 42.2 per cent of those assessed by secondary care were diagnosed with a substance misuse disorder and 21.1 per cent with a personality disorder. In total, 20.3 per cent suffered from a psychotic disorder and 10.6 per cent with an affective disorder. Of those seen by psychiatric services, 51.2 per cent required psychotropic medication, 29.2 per cent required psychological input and 59.3 per cent required addiction counselling. In all, 10.6 per cent of those assessed were diverted from prison, the majority to approved centres. Mean DUNDRUM-1 scores suggested that those referred to high and medium secure hospitals were appropriately placed, whereas those diverted to open wards would have benefited from a low secure/intensive care setting.

Originality/value – The multifaceted need set of those referred strengthens the argument for the provision of multidisciplinary mental healthcare into prisons. The analysis of security needs for those diverted from prisons supports the need for Intensive Care Regional Units in Ireland.

Keywords Mental illness, Prisons, Diversion, Psychiatric, Psychosocial

Paper type Research paper

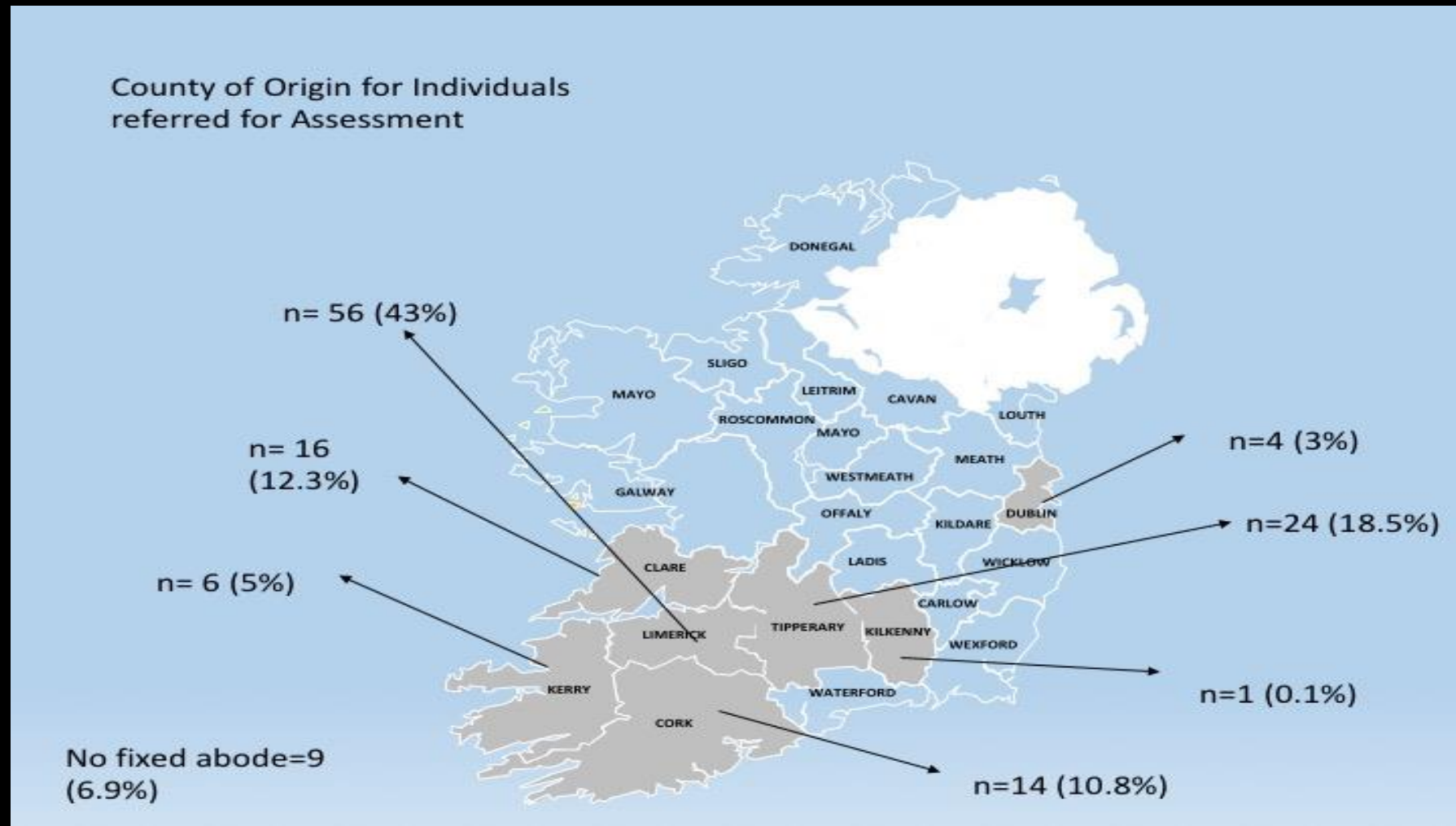
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A novel care pathway for prisoners with intellectual disability designed through a Delphi process

Gautam Gulati, Stephen Quigley, Valerie Elizabeth Murphy, Evan Yacoub, John Bogue, Anthony Kearns, Conor O'Neill, Mary Kelly, Aideen Morrison, Gerard Griffin, Mary Blewitt, Elizabeth Fistein, David Meagher and Colum P. Dunne

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Abstract

Purpose – Individuals with an intellectual disability (ID) form a significant minority in the Irish prison population and worldwide prison populations. There is growing recognition that specialist services for such individuals are in need of development. The purpose of this paper is to propose a care pathway for the management of individuals with an ID who present in prison, based on expert elicitation and consensus.

Design/methodology/approach – A convenience sample of professionals with a special interest in forensic intellectual disabilities was invited to participate in a Delphi exercise. In total, 12 agreed to participation and 10 subsequently completed the study (83.3 per cent). Expert views were elicited using a semi-structured questionnaire. Content analysis was completed using NVivo 11 software. A care pathway was subsequently proposed, based on the outcomes of the analysis, and circulated to participants for debate and consensus. A consensus was reached on management considerations.

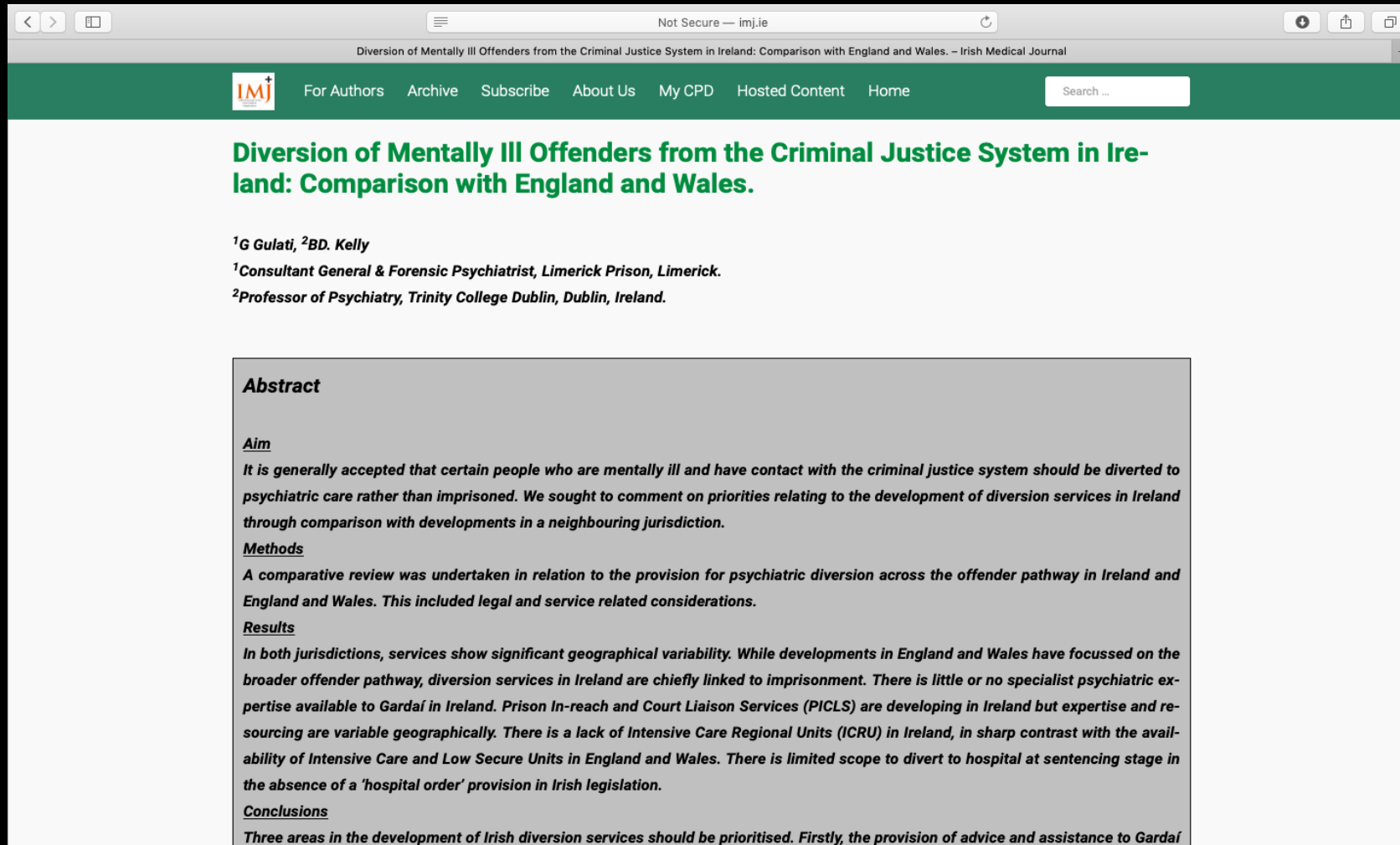
Findings – Ten experts across a range of disciplines with a combined experience of 187 years participated in the study. Current provision of care was seen as limited and geographically variable. The vulnerability of prisoners with ID was highlighted. The need for equivalence of care with the community through multidisciplinary input and development of specialist secure and residential placements to facilitate diversion was identified. Consensus was achieved on a proposed care pathway.

Originality/value – This study proposes a care pathway for the assessment and management of prisoners with an ID and is, therefore, potentially relevant to those interested in this topic internationally who may similarly struggle with the current lack of decision-making tools for this setting. Although written from an Irish perspective, it outlines key considerations for psychiatrists in keeping with international guidance and, therefore, may be generalisable to other jurisdictions.

Keywords Ireland, Prison, Learning disability, Intellectual disability, Mental retardation, Prisoner

Paper type Research paper

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Gulati, G., and Kelly, B.D. Diversion of mentally ill offenders from the criminal justice system in Ireland: comparison with England and Wales. *Irish Medical Journal*, P719. (2018)

Table 1. Pre- and post-training mean Likert scores

	Pre-training (n = 10) [Mean (S.D.)]	Post-training (n = 11) [Mean (S.D.)]	p
Question 1: I have an understanding of what autistic spectrum disorder is	4.9 (1.5)	7.9 (1.4)	<0.0001
Question 2: I understand the common difficulties those with autistic spectrum disorder experience	4.7 (1.7)	8.3 (1.6)	<0.0001
Question 3: I feel I know strategies to help me communicate with those who have autistic spectrum disorders	4.1 (2.1)	9.8 (1.4)	<0.0001
Question 4: I know how to approach those who are experiencing a 'meltdown'	4 (2.2)	8.8 (1.3)	<0.0001
Question 5: This training will help me in my day-to-day work	7.5 (1.6)	8.8 (1.2)	0.0474

Murphy, V., Kelleher, M., & Gulati, G. Letter to the Editor (Autism Awareness Training for An Garda Siochana). *Irish Journal of Psychological Medicine*, 35 (4), 345-346 (2017).



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Intellectual disabilities in Irish prisons: Could Article 13 of the UNCRPD hold the key?



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ABSTRACT

The prevalence of intellectual disabilities amongst adult prisoners in Ireland is higher than international estimates. There is little evidence that the development of diversion services has impacted such prevalence. The authors argue that Ireland's ratification of the UNCRPD presents a timely opportunity to address this problem through an awareness programme aimed at frontline law enforcement officials.

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