A LONGITUDINAL STUDY OF PRISONERS ON REMAND: PSYCHIATRIC PREVALENCE, INCIDENCE AND PSYCHOPATHOLOGY IN SOLITARY VS. NON-SOLITARY CONFINEMENT

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DESIGN ISSUE

While acknowledging the socio-political nature of the topic of solitary confinement, the authors of this study aim to examine the mental health implications of the practice. Specifically, this research studied prisoners in custody in Danish prisons. Its objectives were to:

1) Compare occurrences of psychiatric ill-health among groups of prisoners in solitary confinement (SC) and groups who were not (non-SC).
2) Relate pre-existing psychological disorders to occurrences after imprisonment.
3) Relate pre-existing and present occurrence of psychological disorders to quantitative measures of psychopathology.

BACKGROUND

According to the authors, scientific research on the impact of SC in prisons is inconclusive. However, there is much interest in the matter in the Danish popular media. The authors note that a prisoner is confined to solitary imprisonment as a punitive or protective measure. Research studies do not concur on the mental effects of SC on prisoners - studies of remand prisoners indicate that SC is a stress factor; studies of sentenced prisoners indicate that there is no difference in the effects of the two types of imprisonment. (Remand prisoners are those awaiting trial in jails; sentenced prisoners are those serving time in prisons after conviction.)

RESEARCH METHOD

A longitudinal study design was adopted. The research method involved gathering data through multiple interviews, survey responses, and results of psychopathological tests, from the same set of subjects over time. The research subjects were prisoners on remand randomly chosen a day after their imprisonment. The prisoners varied in age from 18 to 30 years and were of both sexes. A total of 228 prisoners agreed to participate, of whom 95 were from the non-SC group and 133 were from SC.

Soon after being selected for the research study, the prisoners were examined and interviewed by two psychiatrists over the next six days. On the day after the interview the prisoners were administered cognitive tests by a psychologist. Follow-up interviews were conducted by the same psychiatrist after three weeks, and every month thereafter for up to 9 months. The interviews were all

semi-structured, guided by questions pertaining to the prisoners' present state, their dependence on drugs, on their social, familial, criminal, medical, and psychiatric history and background. The prisoners were administered tests that measured anxiety, depression, and intelligence. They were also required to fill out questionnaires that addressed their general health and personality. In addition, the authors also examined records from the Danish Register of Criminality and the prisoners' medical records. This examination format was followed at all the interviews. The data were analyzed using both parametric and non-parametric statistics.

FINDINGS

Major findings include:

1) Imprisonment results in stress, for both solitary and non-solitary types of confinement.
2) Solitary confinement poses a higher risk of developing a psychiatric disorder.
3) Solitary confinement remains a predictor of psychiatric disorder even taking into account potential confounding factors. The only confounding factors demonstrating influence were number of previous confinements (higher number of confinements associated with lesser chance of developing psychiatric disorder), and age (higher age associated with greater chance of developing psychiatric disorder).

The authors suggest providing better access to recreational activities and social contact, solely from a medical point of view.

IMPLICATIONS FOR DESIGN PRACTICE

For design teams embarking on a new or renovation correctional project, consider the following:

- Discuss this article and its implications with the client during programming.
- Consider providing enhanced opportunities for recreational activities and social contact for prisoners in protective custody.

LIMITATIONS

Limitations noted by the authors include:

1) The findings may only be considered valid for remand prisoners in western societies.
2) Validity and reliability issues pertaining to the measures used in the study have not been formally tested for the specific population in question.
3) One of the outcomes tested – adjustment disorder – is less precise than the others.
4) The article did not fully describe the physical design features and attributes of the setting they studied, limiting its applicability.

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