Original Research Paper

Prevalence of Mental Illness in Inmates of District Jail of Etawah

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Abstract

This paper presents the prevalence rates of mental illness like schizophrenia and major affective disorders by age, substance abuse and nature of offence among male jail detainees. This study was aimed to study socio-demographic profile of prisoners of district jail and to find out the current prevalence of mental illness among prisoners. This study was carried out on total 1200 male prisoners in district jail of Etawah. We included only those prisoners who were clinically diagnosed as suffering from some mental health problem and were under psychiatric treatment for the same. Out of the total 1200 prisoners only 79 were found to be suffering from some sort of mental illness. A large part of mental morbidity was contributed by substance abuse and its related consequences. We have observed that most of the mentally disturbed individuals are involved in commission of violent offences. There could be a significant reduction in crime rates if such individuals were timely diagnosed and treated thus we recommend regular checkup of all prisoners by a psychiatrist for early diagnosis and treatment.

Key Words: Mental Illness, Schizophrenia, Offence, Substance abuse, Prisoners

Introduction:

In today's competitive world mental distress or mental illness has increased significantly, primarily owing to stressful lifestyle.

Personality disorders and behavioral disturbances are seen so commonly among children and young adults, leading to increase in crime rate and severe violence on slight provocation. Talking about the individuals who are imprisoned in jails, mental distress may occur in otherwise normal individuals in response to stress of imprisonment.

Simultaneously there may be exacerbation of preexisting mental illness in vulnerable individuals when they are exposed to stress environment as seen in prisons. In India we do not have a clear understanding of the extent and patterns of mental health problems so frequently encountered in prisons. [1]

Keeping this key issue in mind, we have tried to evaluate the prevalence of common mental health problems encountered in District Jail of Etawah.

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Material and Method:

A descriptive cross sectional study was conducted among the psychiatric inmates in District jail, Etawah, Uttar Pradesh, India. There were a total number of 1200 male prisoners in district jail of Etawah. Among them there were total 79 male prisoners which have been clinically diagnosed with mental illness.

Mental Health problems were defined by two criteria-a recent history or symptoms of a mental health problem. A history of mental health problem included a clinical diagnosis or treatment by a psychiatrist.

Symptoms of a mental health disorder were assessed on criteria specified in the Diagnostic and Statistical Manual of Mental Disorders, fourth edition (DSM-IV). [2]

We have not considered the statistics of female prisoners because of insufficient data.

The study subjects comprised of pre diagnosed psychiatric prisoners present in Etawah jail. [3, 4] Permission to conduct the study was obtained from the Director, RIMS &R, Saifai; Jail superintendent of district jail of Etawah, Medical officer in charge of district jail, Etawah, Uttar Pradesh, India. Ethical approval for conducting the study was taken from the psychiatrist who was associated in the treatment of prisoners with mental illness. [5]

The study procedure was systematically carried out for a period of 6 months from the month of July to December 2014. All the psychiatric patients with symptoms of mental

disorder, and who were approved by the psychiatrist based on criteria specified in the DSM fourth edition, were surveyed for presence of mental illness.

An 18 item, predesigned, structured questionnaire was used to obtain information on age, education, marital status, social status, and type of psychiatric disorder, medication used for illness, nature of crime, duration spent in the jail, alcohol and tobacco addiction, drug abuse if any, and frequency of violence or aggression among other inmates.

Observations and Results:

Out of the total 1200 prisoners residing in District jail, Etawah, Uttar Pradesh, India, 79 were diagnosed with having a psychiatric illness. (Fig.1) A large part of mental morbidity is contributed by substance abuse and its consequences.

Total 22.5% of the mentally ill prisoners had alcohol dependence, 13.7% had addiction to tobacco, 23% had ganja addiction and 11.2% had opioid (smack) dependence. (Table 1)

In this study 1.4% of prison population had a diagnosis of primarily schizophrenia.

Prevalence of schizophrenia and bipolar disorder (severe mental illness) was highest in age group of 25-44 years, followed by 18-25 yrs and was lowest in 45-65 yrs. (Table 3)

The prevalence of schizophrenia was 1.4%, bipolar disorder was1%, anxiety disorder was 1.6%, and substance induced psychosis 0.4%, organic psychosis 0.5%. (Table 2)

A higher rate of incidence of common mental symptoms was noted among under trials and first time offenders. In our study out of 79 prisoners with psychiatric morbidity 1.1% had depression; panic attack in 0.3%, phobia in 0.3% and one had OCD and two inmates had PTSD.

Age and Mental Illness:

The incidence of mental illness among prisoners was found to be highest among young age group of 18-24 years which showed 27 cases with mental disease followed by 25 to 34 years group with 21 cases, followed closely by the 35-44 years age group with 20 cases.

The prevalence of mental illness declined significantly in the higher age group of 45-54 years with only 9 cases of mental disease.

Only 2 cases of mental morbidity were reported in prisoners of more than 55 years of age. We have also tried to study the association of psychiatric illness with the nature of offence.

Out of the 79 prisoners with mental illness, 44 were convicted for committing violent offences. There were six cases of IPC 302, nine cases of IPC 304B, eight cases of sexual

offences (IPC 375, IPC 376), out of which one was charged under POSCO Act. There were seven cases of robbery (IPC 39), 13 cases of physical assault and six cases of 498A. (Fig. 2)

There were total 20 cases of property offences comprising of 13 cases of theft (379 IPC, 27) and 7 cases of fraud, 9 cases of IPC 25, 429, 411). There was only one case of illegal drug trafficking under NDPS Act, eight prisoners were convicted for the offence of kidnapping (IPC 363,364, 366), seven were charged with public order offence, two were imprisoned for causing riots (IPC 147,148) and one was punished for trespassing (IPC 352).

Four mentally ill prisoners were charged with abetment to suicide (IPC 306) which seems to be rare offence for a mentally unstable person

Fig. 1: Mentally III Prisoners

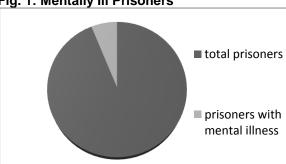


Fig. 2: Type of Offence Committed by Prisoners

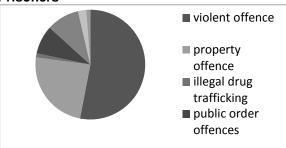


Table 1: Substance Abuse seen in Mentally III Prisoners

S.N.	Substance Abuse	Mentally III Inmates
1	Alcohol	18
2	Tobacco	11
3	Ganja	18
4	Opioid	9

Table 2: Diagnosis of Psychiatric Illness

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S.N.	Psychiatric disorder	Current diagnosis		
1	schizophrenia	17		
2	Bipolar disorder	12		
3	Acute neurosis	19(1.6%)		
4	Panic attack	4(0.3%)		
5	Phobia	4		
6	PTSD	2		
7	Depression	14(1.1%)		
8	OCD	1		
9	Drug induced psychosis	2		
10	Organic Psychosis	6(0.5%)		

Table 3: Age wise Distribution of Mental Illness

S.N.	Age Group (Yrs)	Mental Illness
1	18-24	27
2	25-34	21
3	35-44	20
4	45-54	9
5	55 and above	2

Discussion:

Our study provides reliable data relating to prevalence of mental disorders among male inmates of district jail in Etawah, Uttar Pradesh.

The observed jail incidence of Schizophrenia, BPD, depression, neurosis was found to be two times higher than normal population. Our results do not help us to determine whether mental illness was the triggering cause of crime commission or it was simply an after effect of the choking living conditions under confinement in the prison.

As we have not done the initial psychiatric assessment of prisoners at the beginning of their entry in jail, we cannot directly comment upon the effect of prison environment in aggravating the mental illness in predisposed individuals. Though we have found a predominance of violent offences among mentally ill prisoners, but it would be unfair to comment on the exact relationship between mental illness and criminal behavior.

In a study by Math et al [14] of 5024 prisoners, 79.6% of individuals were found positive for presence of mental illness or substance abuse in some form. They have also linked majority of mental morbidity with substance abuse and its consequences.

According to the record maintained by prison psychiatrist, 2.2% cases had a diagnosis of psychosis, 1.1% had schizophrenia. [7]

it was found that in our study 6.6% of prisoners were having psychiatric disorders which seems to be consistent with findings of Way et al. [8] According to a study by Herman et al in Australia, the prevalence rate of mental illness among male detainees came to be 6%. [9] Bhojak et al found a very high prevalence rate of 33% among prisoners in Rajasthan. [10]

A similar study by Goyal et al in state of Punjab found a prevalence rate of 23.8%. [11] In our study substance abuse was found among 70.8 % mentally ill prisoners, which is consistent with other studies. [11-13]

We were not able confirm whether the mentally ill patients were addicted to drug abuse before being diagnosed with mental illness or was the drug dependence an after effect of mental illness. A very interesting finding in our study was the inverse relation of mental illness

with increasing age. Maximum cases of psychiatric illness among prisoners were seen in the younger age group 18-24.

According to Bangalore prison study the prevalence rate was highest in 25-44 years followed by age group 18-25 years. [14]

Conclusion:

In our study we have observed that most of the mentally disturbed individuals are involved in commission of violent offences. There could be a significant reduction in crime rates if such individuals were timely diagnosed and treated, thus an early pick up rate by consultation with a psychiatrist is strongly recommended.

Prisoners have a right to get proper treatment just like any other human being. Thus the jail administration should make proper arrangements for psychiatric consultation and treatment of prisoners as per their needs.

Jail administrators should incorporate routine mental health evaluation of prisoners and screening of all incoming detainees by a psychiatrist once or twice in a week for early detection and treatment. This would help the prisoners to stand the complicating procedures of court trials also.

References:

- Nurse J, Woodcock P, Ormsby J. Influence of environmental factors on mental health within prisons: Focus group study. BMJ 2003;327:480- 5
- American Psychiatric Association, Diagnostic and Statistical Manual of Mental Disorders, fourth edition (DSM-IV), 1994.
- James DJ, Glaze LE. Mental Health Problems of Prison Inmates. Special Report of the Justice Statistics. 2006.US Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, Washington DC
- Kumar V, Daria U. Psychiatric morbidity in prisoners. Indian J Psychiatry 2013;55:366-70
- Mishra et al. Attitude towards Psychiatric Research. Indian J Med Res 139, February 2014, pg. 246-251
- PSA Pillai. Criminal law (IPC)as per the criminal law amendment Act 2013,12th edition 2015
- Math SB, Chandrashekar CR, Bhugra D. Psychiatric epidemiology in India. Indian J Med Res 2007;126:183- 92
- Way BB, Sawyer DA, Lilly SN, Moffitt C, Stapholz BJ. Characteristics of inmates who received a diagnosis of serious mental illness upon entry to New York State Prison. Psychiatric. Serv. 2008; 59:1335–1337
- Herrman H, McGorry P, Mills J, Singh B. Hidden severe psychiatric morbidity in sentenced prisoners: an Australian study. Am J Psychiatry 1991; 148: 236-9
- Bhojak MM, Krishnan SR, Nathawat SS, Bhojak M. Psychiatric and psychological aspects of convicted murderers and non- murderer. Indian J Psychology 1998; 26:98- 103
- Goyal SK, Singh P, Gargi PD, Goyal S, Garg A. Psychiatric morbidity in prisoners. Indian J Psychiatry 2011;53:253- 7
- Mason D, Birmingham L, Grubin D. Substance use in remand prisoners: A consecutive case study. BMJ 1997; 315:18-21.
- Gavin N, Parson S, Grubin D. Reception screening and mental health needs assessment in a male remand prison. Psychiatric Bulletin 2003;27:251- 3
- Math SB, Murthy P, Parthasarathy R, Naveen Kumar C, Madhusudhan S. Mental health and substance use problems in prisons: Local lessons for national action. Publication, National Institute of Mental Health Neuro Sciences, Bangalore