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ABSTRACT

Self-harm in correctional settings is a prevalent public safety and public health problem affecting not only custodial and mental health staff, but also incarcerated individuals' overall existence (Fagan et al., 2010). There are little to no standardized tools to effectively assess self-harm in correctional settings. For this presentation, seven risk assessment tools are reviewed for their efficacy in correctional settings. Noteworthy is that none of them were normed for the population of incarcerated individuals. Our research highlights this problem and offers ideas for future awareness and research.

INTRODUCTION

- ❖ Correctional settings have living environments that bring unique challenges for humans to cope. Attempts to cope can manifest in self-injurious behavior (Mangall & Yurkovich, 2008).
- ❖ Self-harm is prevalent in correctional settings, causing not only pain for the offender, but for the entire community (O'Shea et al., 2014).
- ❖ Suicide represents a small portion of the acts of self-harm among incarcerated individuals (Fagan et al., 2010). However, suicide can be an unintended result of non-suicidal self-harm (Mangnall & Yurkovich, 2008).
- ❖ Multiple risk assessment tools have been validated for examining non-suicidal self-harm, however there are none (to our knowledge) that have been normed on a population of incarcerated individuals.

INTRODUCTION (CONT.)

- ❖ Aside from suicide, there is no nomenclature or agreement in the correctional community on how to assess and treat self-injurious behavior.
- ❖ Self-harm has been strongly associated with assignment of inmates to solitary confinement (Kaba et al., 2014).

CLEAR DEFINITION OF SELF-HARM

- ❖ Self-harm is the intentional infliction of physical injury to oneself, without intent to kill oneself (Mangnall & Yurkovich, 2008).
- ❖ Suicide represents a small portion of the self-harm among incarcerated individuals (Fagan et al., 2010) and should be distinguished from non-suicidal self-harm.

UNIQUE TO CORRECTIONAL SETTINGS

- ❖ **Examples of inmates' self-harm:** cutting themselves with sharp objects; swallowing harmful objects like pins, razor blades, nails, etc.; inserting harmful objects into body orifices; amputating body parts; and/or banging their heads against walls or other hard objects (O'Shea et al., 2014)
- ❖ **Dichotomy** of labeling inmates who self-harm as either *suicidal* or *manipulative* (Kaba et al., 2014)
- ❖ **Self-harm as a way to cope in prison:** to alleviate tension and anxiety, relieve anger, avoid more threatening compulsions, express loathing (Mangall & Yurkovich, 2008)
- ❖ Correctional staff use the term "bing-beaters" to describe an inmate engaging in self-harm to manipulate the system and avoid solitary confinement (Kaba et al., 2014).



Assessment Tools:

- Violence Risk Appraisal Guide (VRAG; Quinsey et al., 1998)
- Psychopathy Checklist – Revised (PCL-R; Hare, 1991)
- Historical Clinical Risk Management – 20 (HCR-20; Webster et al., 1997)
- Deliberate Self-Harm Inventory (DSHI; Gratz, 2001)
- Self-Harm Behavior Questionnaire (SBHQ; Guttierrez, Osmon, Barrios, & Kopper, 2001)
- Self-Injury Motivational Scale-II (SIMS-II; Osuch et al., 1999)
- ReACT Self-Harm Rule (Steege et al., 2012)

This review showed HCR-20 and DSHI to be most prominently used in correctional settings. Overall, none are useful in predicting self-harm for this population. We should stop generalizing the efficacy of DSHI and HCR-20 on mental health patients to the population of inmates.

PROPOSED SOLUTIONS

- ❖ Awareness that self-harm in correctional settings is a problem in and of itself, and also precipitates further problems (a trickling down of more issues and a draining on resources)
- ❖ Clear definition of 'self-harm in a correctional setting' (distinguished from 'suicidal in a correctional setting')
- ❖ Acknowledgement and knowledge transfer to correctional staff regarding the realness of self-harm for coping. (elimination of the dichotomy of *suicidal* or *manipulative*)
- ❖ Further research on risk of self-harm in inmates
- ❖ Further research and awareness regarding solitary confinement as a precursor to self-harm

DISCUSSION

- ❖ Although there are multiple validated self-harm assessments tools, none have been normed for the population of incarcerated individuals.
- ❖ The challenges of living in a correctional setting are unique enough to warrant self-harm inventories normed for that specific living environment.
- ❖ Further awareness and proactive measures to assess risk would not only benefit the employees of the correctional facility and alleviate drains on resources, but could prevent unnecessary harm and pain for incarcerated individuals using self-injury as a coping mechanism.