

# NEBRASKA

# JAIL BULLETIN

November/December 1999

NUMBER 150

The *Jail Bulletin* may be used as a supplement to your jail in-service training program. If officers study the material and complete the attached "open book" quiz, they may receive **one hour of credit**. The bulletin and quiz may be reproduced for staff use as necessary. **We welcome any material you would like to contribute to the Jail Bulletin.**

## JAIL SUICIDES (REVIEW) - PART II

### WHY JAIL ENVIRONMENTS ARE CONDUCTIVE TO SUICIDAL BEHAVIOR

From the inmate's perspective, there are certain unique characteristics of jail environments which enhance suicidal behavior.

1. Fear of the unknown
2. Authoritarian environment
3. No apparent control over the future
4. Isolation from family and significant others
5. Shame of incarceration
6. Dehumanizing aspects of incarceration

### POTENTIAL SUICIDE PREDISPOSING FACTORS

In examining potentially suicidal behavior, the following predisposing factors are commonly found:

1. Recent excessive drinking and/or use of drugs
2. Recent loss of stabilizing resources
3. Severe guilt or shame over the offense
4. Same-sex rape or threat of such
5. Current mental illness
6. Poor physical health or terminal illness
7. Approaching an emotional breaking point

### HIGH RISK SUICIDE PERIODS

Experience has shown that there are certain high risk suicide periods for the inmate which correlate with phases of their incarceration or steps in the criminal process. These periods include:

1. The first 24 hours of confinement
2. Intoxication/withdrawal
3. Trial and sentencing hearings
4. Impending release
5. Decreased staff supervision
6. Weekends and holidays
7. Bad news from home

### **WARNING SIGNS AND SYMPTOMS OF SUICIDAL BEHAVIOR**

Experts generally agree that certain signs and symptoms exhibited by the inmate often foretell a possible suicide and, if detected, could prevent such an incident. What the individual says and how they behave while being arrested, transported to the jail, and at booking are vital for detecting suicidal behavior. An individual may exhibit warning signs and symptoms that include:

1. Depression (Physical Signs)
  - a. sadness and crying
  - b. withdrawal or silence
  - c. sudden loss or gain in appetite
  - d. insomnia
  - e. mood variations
  - f. lethargy
2. Intoxication/withdrawal
3. Talking about or threatening suicide
4. Previous suicide attempts
5. History of mental illness
6. Projecting hopelessness or helplessness
7. Speaking unrealistically about the future and getting out of jail
8. Increasing difficulty relating to others
9. Not effectively dealing with present, is preoccupied with the past
10. Giving away possessions, packing belongings
11. Severe aggressiveness
12. Paranoid delusions of hallucinations

### **SUICIDE PREVENTION SCREENING**

Properly trained correctional personnel can effectively assess suicidal potential both at the booking stage and during subsequent phases of

the inmate's incarceration. During the booking stage, intake screening is imperative to suicide prevention. In addition to assessing suicide potential, intake screening serves to detect any medical or mental health problem and addresses classification needs. **Intake screening must be performed on every detainee immediately upon entry into the jail facility.** Those detainees that refuse such screening or are unable (due to their intoxication) to participate, should be temporarily housed in a holding cell and placed under special supervision until such time as intake screening can be completed. Although intake screening can be utilized to detect a great portion of potentially suicidal behavior, inmates can become suicidal at any stage of their incarceration. Therefore, continued observation and awareness of potentially suicidal behavior is an added key to prevention.

Intake screening is not meant to be an in-depth, time consuming evaluation of an inmates' health needs. It should be utilized by the booking officer as a form of triage<sup>1</sup> to detect the following:

1. Suicidal behavior
2. Physical injuries/trauma and infectious diseases
3. Chronic and acute mental illness
4. Medications taken and special health requirements
5. Alcohol or drug intoxication

The state of New York, under the auspices of the Office of Mental Health, Commission of Corrections, and Ulster County Community Mental Health Services, is currently implementing suicide prevention screening guidelines in all of its jails and lockups. Inquiry is made into the following areas:

1. **Observation of transporting/arresting officer**
2. **Personal Data**
  - a. Detainee lacks close family or friends in the community
  - b. Detainee has experienced a significant loss within the last six months (e.g., loss of job, loss of relationship, death of close family member.)
  - c. Detainee is very worried about major problems other than legal situation (e.g., serious financial or family problems, a medical condition or fear of losing job.)
  - d. Detainee's family or significant other (spouse, parent, close friend, lover) has attempted or committed suicide.
  - e. Detainee has psychiatric history.
  - f. Detainee has history of drug or alcohol abuse.
  - g. Detainee holds position of respect in community (e.g., professional, public official and/or alleged crime is shocking in nature.
  - h. Detainee is thinking about killing himself.
  - i. Detainee has previous suicide attempt.

- j. Detainee feels that there is nothing to look forward to in the future (expresses feelings of helplessness or hopelessness.)

### 3. **Behavior/Appearance**

- a. Detainee shows signs of depression (e.g., crying, emotional flatness.)
- b. Detainee appears overly anxious, afraid or angry
- c. Detainee appears to feel unusually embarrassed or ashamed.
- d. Detainee is acting and/or talking in a strange manner (e.g., cannot focus attention, hearing or seeing things which are not there.)
- e.
  - 1. Detainee is apparently under the influence of alcohol or drugs.
  - 2. If YES, is detainee incoherent, or showing signs of withdrawal or mental illness?

### 4. **Criminal History**

No prior arrests

## **DISPOSITION/REFERRAL**

Each facility should develop a disposition checklist in accordance with its procedures and resources. The following checklist is one model approach under recognized practices.

- 1. Emergency care outside facility.
- 2. General population

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<sup>1</sup>triage: The sorting of an allocation of treatment to patients especially batter and disaster victims according to a system of priorities designed to maximize the number of survivors.

- 3. Sick call
- 4. Special supervision
  - a. no isolation
  - b. increased monitoring
  - c. constant observation
  - d. audio/video(cctv) monitoring

## **CONCLUSION**

Experience has clearly demonstrated that almost all jail suicides can be averted with implementation of a prevention program which includes staff training, intake screening, communication between staff, and human interaction. The key to prevention remains capable and properly trained staff, the backbone ingredient of a facility. Such a system, however, will not come to fruition without a pro-active administrator who not only maintains an awareness of jail suicide as a national problem, but takes initiative to prevent such an occurrence in their own facility.

The contents of the ***Jail Bulletin*** represent the views of the author(s) and do not necessarily reflect official views or policies of the Nebraska Crime Commission or the Nebraska Jail Standards Board

Material prepared by Daniel Evans, Field Representative, Jail Standards Division, Nebraska Crime Commission. This material is reprinted from "Jail Suicide Update" by the Jail Suicide Prevention Task Force, Lindsay M. Hayes and Joseph R. Rowan, Co-Directors. If you or your agency wish to contribute to the ***Jail Bulletin*** or have a special subject to be addressed through the bulletin, please contact: Jail Standards Division, P.O. Box 94946, Lincoln, Nebraska 68509-4946, FAX 402-471-2837.

## QUIZ

Nebraska Jail Standards require that jail staff receive eighteen (18) hours of in service training each year. The Jail Bulletin may be used to supplement in service training if an officer studies the bulletin, completes the quiz, and this process is documented by the jail administrator for review during annual jail inspections.

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**NOVEMBER/DECEMBER 1999**  
**SUBJECT: JAIL SUICIDES - PART II**

**NUMBER 150**

**NAME:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

1. What are six physical signs of depression?
  - 1) \_\_\_\_\_
  - 2) \_\_\_\_\_
  - 3) \_\_\_\_\_
  - 4) \_\_\_\_\_
  - 5) \_\_\_\_\_
  - 6) \_\_\_\_\_
  
2. What are the six characteristics of jail environment that enhance suicidal behavior.
  - 1) \_\_\_\_\_
  - 2) \_\_\_\_\_
  - 3) \_\_\_\_\_
  - 4) \_\_\_\_\_
  - 5) \_\_\_\_\_
  - 6) \_\_\_\_\_
  
3. Would an intoxicated inmate who has been in jail for three hours on a Saturday night be considered a high or low suicide risk?

High	Low
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4. Which of the following are holidays considered?
  - a. Low risk periods for inmate suicides
  - b. High risk period for inmate suicides
  - c. Same suicide risk period as a weekday
  
5. List eight of the suicide warning signs and symptoms.
  - 1) \_\_\_\_\_
  - 2) \_\_\_\_\_
  - 3) \_\_\_\_\_
  - 4) \_\_\_\_\_
  - 5) \_\_\_\_\_
  - 6) \_\_\_\_\_
  - 7) \_\_\_\_\_
  - 8) \_\_\_\_\_

4)

8)

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**ANSWER SHEET SHOULD BE RETAINED BY JAIL ADMINISTRATOR OR TRAINING OFFICER**

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**CREDIT: One Hour credit for jail in service training requirement.**

# QUIZ

## Answer Sheet

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NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

1. What are six physical signs of depression?  
1) Sadness and depression                      4) Insomnia  
2) Withdrawal or silence                      5) Mood variations  
3) Sudden loss or gain in appetite                      6) Lethargy
2. What are the six characteristics of jail environment that enhance suicidal behavior.  
1) Fear of the unknown                      4) Isolation from family and significant others  
2) Recent loss of stabilizing resources                      5) Shame of incarceration  
3) No apparent control over the future                      6) Dehumanizing aspects of incarceration
3. Would an intoxicated inmate who has been in jail for three hours on a Saturday night be considered a high or low suicide risk?  

**High**                      Low
4. Which of the following are holidays considered?
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5. List eight of the suicide warning signs and symptoms.

- |   |  |
|---|--|
| 1) Depression                                 | 7) Speaking unreal istical ly about the future                     |
| 2) Intoxication/withdrawal                    | 8) Increasing  |
| 3) Tal king about/ threatening suicide        | 9) Not effectively dealing with present, is preoccupied with past  |
| 4) Previous suicide attempts                  | 10) G i v i n g a w a y p o s s i s s i o n s , packing belongings |
| 5) History of Mental Illness                  | 11) S e v e r e aggressiveness                                     |
| 6) Projecting hopel essness or hel pl essness | 12) P a r a n o i d delusions of hallucinati ons                   |

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