From Bad to Worse: Mental Health in the Correctional System in Colombia, South America

Guillermo M. Cadena, MD, DLFAPA and Miguel Alvarez-Correa, MA, JD
Universidad del Bosque, Bogota, Colombia

Abstract

Criminal activity is not necessarily related to mental illness but mental health is an important component in the management of individuals in correctional settings. It is important to adopt universally accepted nomenclature to establish psychiatric diagnoses and standards of care. There have been no systematic reviews in the Colombian literature as to the psychiatric disorders in individuals in jails and prisons in Colombia. A review was conducted of institutional records of individuals in two of the most important prison centers in Colombia focusing on diagnostic nomenclature and prescribed treatments. Colombian prisons have not adopted standard nomenclature and there appears to be no use of guidelines for the treatment of the diagnosed detainees.

Goal: Identify a tentative diagnosis about the approach and assessment of the current circumstances of mental health in Correctional Institutions in Colombia.

Methods

Two prisons were selected with a total number of approximately 8000 inmates. Total number of inmates in Colombian prisons is estimated to be about 118124 of which 3468 receive Psychiatric care. We undertook a review of the Archives of the National Institute of Jails and Prisons as well as a literature review. 147 male inmates were administered

- a semi structured interview
- Hare PCL-R Psychopathic interview
- Questionnaire for sentenced inmates in different Detention Centers (IPDE)

A focus group was also held with personnel working in prisons.

Results

The lack of standard diagnosis in matters of Mental Health and Care of Mental Disorder became quite evident. A deficient mental health care was present in inmates found other than in the Incompetent to proceed and a significant absence of prevention and/or intervention in matters related to Substance Use Disorders. There was inadequate trained Staff as well as a notorious lack of resources to attend to these problems and a lack of Specialists in Mental Health and the presence of undergraduate students from different Universities.

Age Range of Inmates in Two Large Prisons

Diagnostics	%
Mental and behavioral disturbance due to the use of multiple drugs and to the use of other psychoactive substances	24
Paranoid Schizophrenia	21
Unspecified mental disorder due to a lesion or cerebral dysfunction and physical condition	5
Mild mental retardation with behavioral disturbance	5
Asocial Personality disorder	5
Mixed Anxiety and depressive Disorder	4
Schizophrenia	3
Residual Schizophrenia	3
Bipolar Disorder	3
Unspecified Personality Disorder	3
Depressive Disorder	3
Psychotic Disorder due to drugs	2
Psychotic Dissocial Disorder	2
Adjustment Disorder	1
Unspecified Persistent Personality change	1
Mentally Compensated	1
Mentally Compromised	1
Vascular Dementia with acute onset	1
Mental Retardation and depressive episode	1
Undifferentiated Schizophrenia	1
NR	1
PTSD	1
Recurrent Depression	1
Unspecified Psychotic Disorder with Mild Mental Retardation	1
Mixed Anxiety and Depression Disorder	1
Adjustment Disorder Depressed	1
Delirious (Disorder)	1
Unspecified Organic or Symptomatic Disorder	1
Somatization Disorder	1
Psychotic Disorder	1

Patients in Treatment for Drug Dependency and Other Diagnoses

The care of Mental Health Disorders of detainees in Correctional Centers require the administration of appropriate instruments by trained personnel to identify needs and risks that will reliably help in the placement and level of care of individuals at high risk of suicide or of abstinence syndromes. Strengthening of the few psychosocial support programs and a need to adopt clear pathways for the identification and delivery of mental health care for individual in need is recommended.

References

ÁLVAREZ-CORREA M., CADENA G. (2019). *Del Timbo al tambo*. Revista Salud Bosque Vol. 9, number 1.

ÁLVAREZ-CORREA M., MATHE F., VALENCIA O., PARRA S., PEDREROS F., GONZÁLEZ J. (2011). *Laberinto de Papel. Justicia premial, justicia transicional, salud mental y calidad de vida en operadores del sistema penal acusatorio, peritación psicosocial, ministerio público IEMP*.

ÁLVAREZ-CORREA M. VALENCIA O.L. (2012). El daño Oculto. Bienestar, salud mental y política pública en trabajadores del sector justicia – Estudios de casos: la conciliación en equidad, el conflicto armado y los delitos sexuales. IEMP – Minjusticia.

INPEC. Ruta de atención en salud mental (2017). INPEC.

INPEC. (2014). Código Penitenciario Ley 1709 de 2014.

SCOPPETTA D-G. O. BARRETO N. G. et. Al. (2016). *Estudio nacional de consumo de sustancias psicoactivas en población penitenciaria y carcelaria en Colombia*. Minjusticia – INPEC – UNODC.