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Prophylaxis of suicidal behavior in conditions of penitentiary isolation from the perspective of Transactional Analysis

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Abstract

Suicidal behaviors in society, regardless of their final result, are an important topic that requires many preventive actions. In specific conditions, such as the conditions of imprisonment, it is even more important to prevent and counteract the negative effects of isolation which may increase an already high risk of suicide. In penitentiary establishments, suicidal prevention is carried out on the basis of detailed instructions on the prevention of suicide of imprisoned persons. The article discusses individual provisions of the aforementioned instruction and the manner of their implementation. It is also an attempt to present the actions taken and their effects with the use of Transactional Analysis terminology.

Keywords: suicide attempts and suicide in prisons, suicidal behavior prevention, Transactional Analysis.

The issue of suicidal behaviours and risk factors

On its webpage www.who.int, the World Health Organisation states that nearly 800 thousand people commit suicide every year, and there are 20 suicidal attempts to each committed suicide. It is almost the number of inhabitants given on Wrocław's website www.wroclaw.pl, which is home to 825 thousand people.

This comparison unquestionably points to the significance of the issue concerning suicidal behaviours in society.

The publication of 2018 (Hołyst, 2018, p. 18) lists risk factors linked with the healthcare system and society, community and interpersonal relations, as well as individual ones. There are the following risk factors concerning the healthcare system and society in general: difficult access to healthcare and obtaining proper treatment, easy access to means enabling one to commit suicide, wrong media information policy on suicide which is shown in a sensational way, increasing the risk of suicide among “followers,” stigmatising people seeking help due to suicidal behaviours, mental issues or substance abuse. As far as risk factors pertaining to community and interpersonal relations are concerned, one can list war and natural disasters, acculturation stress (experienced by e.g. indigenous inhabitants or refugees), discrimination, feeling of isolation, harassment, violence, conflict relationships. Risk factors at an individual level include former suicide attempts, mental disorders, alcohol abuse, financial loss, cases of suicide in a family.

Detention by means of putting someone in a penitentiary institution is a factor that increases suicide risk three times,¹ hence, among many forms of penitentiary influence, there are procedures that aim to prevent suicidal behaviours and to pick out individuals who run the biggest risk of making a decision to take their own life.

The three-degree model of suicide prevention implemented in 2010 (Lizińczyk, 2014, p. 27) is efficient as since it was introduced, the number of suicide attempts among individuals in the conditions of penitentiary isolation has decreased.

The last decade is not free from successful suicide attempts among prisoners, hence a constant need to analyse the effectiveness of undertaken measures, which would make it possible to look anew at this issue, and maybe offer new systemic solutions facilitating more efficient prevention measures.

Transactional Analysis and life in confinement

From the perspective of Transactional Analysis, the relation between the Parent-Child ego states constitutes a starting point of the prisoners – prison guard officers relation. A prison as a total institution imposes many bans and orders. Everything that happens within its walls is described in directives, instructions, rules, official and unofficial (subculture) ones. It lets us assume that the normative Parent and the adapted Child will be the most frequently used ego states in interactions. It can be noticed in relations between prisoners and prison personnel, where nothing happens without given consent, prisoners’ options depend on officers’ actions, and behaviours exceeding the approved regulations are corrected

¹ Cf. The World Health Organisation, the Polish Suicidological Society, Suicide Prevention. A Manual for Prison Guard officers, Geneva–Warsaw 2003.

by code penalties. Similar rules regulate relations in informal structures, i.e. in criminal subculture, the so-called kiting, where compliance with a series of norms and rules is required from group members under the pain of penalty, e.g. social isolation, stigmatization. Generally speaking, in order to show the framework of prison relations, it can be stated that while performing their duties, prison officers react in accordance with the Parent ego state, punishing and praising, criticizing and encouraging, being responsible for upbringing, tradition, values, ethics and conscience (Rolgoll, 1995, p. 14). On the other hand, prisoners, to adjust to new circumstances, react complementarily, displaying behaviours coming from the Child ego state.

Taking into account the analysis of suicidal behaviours in Polish penitentiary institutions (Lizińczyk, 2014), it is worth remarking on the fact that prisoners making a successful suicide attempt demonstrated decreased activity. They received fewer regular prizes and were subject to fewer disciplinary measures, they served their sentence in an ordinary system, where prisoners are not given any duties and rehabilitation tasks, they also kept in direct touch with a smaller number of close people (Lizińczyk, 2014, p. 37). The aforementioned fact suggests that withdrawal might be the main way of structuring such people's time and might significantly influence an increase in suicide risk, limiting possibilities of getting into interactions and obtaining signs of acknowledgement. Moreover, the results of the aforesaid analysis show that prison personnel should pay particular attention to persons demonstrating oversubmissive behaviour, being obedient, and, like it is called in prison characteristics, showing the victim traits. Paradoxically, prisoners causing trouble by their behaviour (showing their rebellious side more often) get much more attention and consequently various signs of acknowledgement from prison personnel. Due to numerous interventions of prison officers, they have more opportunities to communicate directly or indirectly their experienced difficulties and there is more chance that someone will listen to them and respond to this hidden cry for help. It shows that prisoners' functioning should be diagnosed as far as their time structuring and economics of signs of acknowledgement are concerned, which makes it possible to estimate factors defending them against behaviours putting directly their lives at risk.

As far as penitentiary work is concerned, the stable Adult ego state of specialists running rehabilitation programmes is crucial. The nature of a rehabilitation group, including the character of committed crimes, has an impact on prison officers/ workers and their beliefs, moral norms, opinions on punishment suitable for particular crimes. Letting these elements constantly influence one's way of thinking without maintaining an appropriate distance and without being aware of one's own processes may lead to minimizing difficulties reported by prisoners, ignoring problems experienced by them, overlooking warning signals, which might result in erroneous intervention, or even worse, lack of it when the situation becomes dangerous.

Prophylaxis of suicidal behavior – adopted procedures

Currently binding Prison Service Order no 10/20 issued by the Director General, concerning the prevention of suicide cases among imprisoned people is the third version of the provisions introduced for the first time in 2010. It divides suicidal prophylaxis into the 1st, 2nd and 3rd degree one (the Order 10/2020 DGSW).

The further part of the article shall focus on particular order provisions and their relation to particular activities and their understanding in terms of Transactional Analysis.

Pre-suicidal prophylaxis of the 1st degree

Prophylaxis of the 1st degree is directed to all prisoners and includes several activities mainly based on widely-understood psychoeducation and prevention of negative effects of confinement.

The tasks classified in the Order 10/20 as activities within the framework of the 1st degree prophylaxis can be divided into those focused on three coexisting elements of penitentiary reality: prisoners, living conditions and prison officers.

Activities concerning living conditions

Activities concerning living conditions are directed towards “creating favourable conditions for preserving mental health, ensuring access to healthcare, education and psychological support, ensuring access to technical means of saving life” (Order 10/2020 DGSW). To fulfil these tasks, daily timetables executed in prisons offer a daily possibility of going for a walk and various cultural and educational activities. A clear and available daily timetable helps prisoners to order their activities and organize their time in a constructive way. It lets prisoners experience other than usual time structuring as imposed organization of activities during the day/ week is often the only plan they realise in their life. The necessity to adjust to this internal prison organization facilitates the development of new habits, which may result in changes concerning time structuring (more activity than withdrawal), types of signs of acknowledgement one receives (more opportunities to get positive conditioned/ unconditioned signs of acknowledgement), and changes in the structure of the Parent (P₃) ego state and the Adult ego state in the form of new scripts (beliefs and information) (Joines, Stewart, 2016, pp. 42–49).

Activities concerning prison officers

Activities concerning prison officers fulfil the need “to pay attention to critical moments in isolation conditions, to sensitise prison officers to reported prob-

lems, change in a given prisoner's behaviour or situation, and to educate them in the area of detecting behaviours signaling the possibility of autoimmunity and providing first aid to people who took their own life" (Order 10/2020 DGSW). Cyclical workshops run at different institutional levels of the Prison Service contribute to broadened knowledge about signals pertaining to the suicide crisis and binding procedures. Detailed analyses of committed suicide cases lead to eliminating lacks in the system. In the ideal world, it would mean the elimination of the suicide issue in the conditions of penitentiary isolation. In fact, it results in the decrease in successful suicide attempts over the years, from 40 cases a year in 2006–2009 (Głowik, Matyba, 2010) to 23–25 cases a year in 2017–2019 (Supreme Audit Office Report, 2020, p. 54). Broadening one's knowledge with new information and analysing cases that can be used when it is necessary to take a decision enrich the resources of the Adult ego state, thanks to which it is easier to act on the basis of one's knowledge and experience in crisis situations, and to efficiently manage emotions experienced in difficult situations. The belief that "the procedure protects" may constitute a protecting factor which makes it easier to soothe fear occurring together with awareness of responsibility for other people's lives.

Activities concerning prisoners

The main emphasis of the Order is put on activities that are "to limit negative effects of confinement, develop affirmation of life, intolerance of autoimmunity, teach self-control, provide social support, relaxation techniques and socially accepted ways of solving problems and conflicts, eliminating cases of intolerance, discrimination and social isolation, and preventing negative ways of adjusting to penitentiary isolation" (Order 10/2020 DGSW). Following the aforesaid guidelines is possible when a given prison officer uses the positive Protective Parent ego state in their relation with a prisoner, and their help and care are shown with genuine respect for a person who is helped (Joines, Stewart, 2016, p. 34). While contact filled with empathy and understanding is generally attributed to psychology, the necessity of such intervention in contact initiated by educators or ward heads might not be so obvious. Prison guards work in constant contact with prisoners, providing their services all day round, directly in their cells. They realise tasks concerning constant monitoring of prisoners. They are unconsciously one of the main sources of signs of acknowledgement, while realising everyday activities connected with, amongst other things, monitoring meal distribution, organizing daily walks or controlling telephone conversations (in closed prisons) (KKW, 1996). Even listening to a prisoner, which is one of the ways to give a positive sign of acknowledgement, is an activity bringing about effects significantly exceeding the invested energy. Understanding and clarifying other per-

son's feelings and point of view produces a few results: it engages the Adult ego state of the listening prison officer and facilitates collecting information useful in preventive activities, reduces the number of negative behaviours in a managed training group as when we lack positive signs of acknowledgement, we start looking for negative ones, allows for releasing accumulated strong emotions in a constructive way, expected from the perspective of the rehabilitation process.

Providing prisoners with knowledge about effective ways of reducing tension and more constructive ways of managing difficulties requires the engagement of the Child ego state that is interested in what they are told. This task is mainly realized in the form of group work regularly run by both psychologists and educators. Each cycle of workshops with a new group includes the stage of complaining about the penitentiary system, behaviour of some prison officers and general hopelessness and powerlessness in conditions of isolation. It is a form of an invitation to the game whose result affects the further course of workshops. Exposing unutterable expectations and anxieties and defining clear rules for the workshops – i.e. activating the Adult ego state – allows for effective running of group sessions and engaging prisoners in the content conveyed. Positive contact with a psychologist also positively influences the quality of cooperation in case of subsequent individual contact (Joines, Stewart, 2016, pp. 341–350).

Teaching how to create and use a support network requires emphatic understanding of a given prisoner's way of thinking and experiencing the world. It is impossible without the positively reacting Protective Parent ego state. Imprisoned people are often individuals with a very modest support network or without any. Lost relations with the closest relatives are often lost forever, hence it is so important to show in relations with prisoners possibilities of benefiting from various forms of support, not only material one. Regardless of a support type provided, without the Protective Parent ego state that shows empathy and is focused on another person's wellbeing the aim cannot be reached.

Pre-suicidal prophylaxis of the 2nd degree

Pre-suicidal prophylaxis of the 2nd degree is addressed to “a group of prisoners requiring more attention due to increased risk of suicide” (Order 10/2020 DGSW). When suicidal tendencies are noticed, the document called *Prisoner at Risk of Suicide Card* is completed. It contains a series of guidelines how to deal with a particular prisoner.

A diagnosing psychologist is to determine risk factors of committing suicide, protective factors thanks to which it will be possible to change a given prisoner's behaviour and individual mechanisms of potential autoimmunity. They are also to issue recommendations suitable for this prisoner's therapy.

The most frequent risk factors are: a former diagnosis of mental disorders, undergone hospital treatment, addictions, self-mutilation or suicide attempts, and

behaviour in the so-called critical moments of isolation (Order 10/2020 DGSW) that includes: first 14 days of isolation, the occurrence of serious problems in family relations, relations with other close relatives and prisoners, serious health issues, breakthrough moments marked with dates of court rulings, decisions of courts and prosecutors and administrative decisions.

The main protective factors were determined as increased monitoring and educational, psychological and psychiatric care (Order 10/2020 DGSW). They are principally based on increased control of the prisoner's behaviour, more frequent contact with them initiated by penitentiary personnel, paying close attention to problems and difficulties the prisoner deals with. Whereas recommendations addressed to the security department workers and educators are within the framework of crisis intervention (Badura-Madej, 1999, p. 58), recommendations addressed to psychologists go beyond the aforesaid intervention. Apart from regular monitoring of the prisoner's mental state and undertaking activities that are to reduce their emotional tension, psychological influence aims at supporting the prisoner in developing their support network, teaching them particular techniques of dealing with difficult situations or suicidal warning signals. The efficiency of these activities depends on the quality of relation with the prisoner.

The actions taken concentrate on the period preceding a suicide attempt, which is characterized by narrowing, suppressed aggression directed to oneself and suicidal fantasies (Badura-Madej, 1999, p. 176). A diagnosis of a pre-suicidal syndrome allows for proper estimation of suicide risk and employing suitable measures. The aforesaid narrowing refers to personal capacities, the world of values, interpersonal relations and emotions.

Experiencing one's environment as a threatening one that we have no influence on and the feeling of being trapped accompanying the experience of *narrowing the scope of one's personal capacities* (Badura-Madej, 1999, p. 176) can be strengthened by penitentiary isolation, hence monitoring prisoners' mental state during their first 14 days of confinement is so crucial. The feeling of being trapped in penitentiary conditions is quite real as the level of control over prisoners is high. Prisoners serving their sentence, regardless of their stage of imprisonment, can experience loneliness and the feeling of defeat. In such situations, the interventions and anxiety coming from the Child ego state and critical judgement of the Parent ego state can be balanced by interventions coming from the Protective Parent ego state of prison officers having direct contact with a given prisoner. Mechanical execution of one's professional duties offers no possibility of exchanges that could be a source of positive signs of acknowledgement coming from the Protective Parent ego state, e.g. I can see that you're facing difficulties, I can see it's hard for you, I can see something has changed/ nothing has changed, do you need any help?

Emotional narrowing (Badura-Madej, 1999, p. 176) resulting in the occurrence of obsessive resignation thoughts or autoimmunity can happen in response

to the situation of confinement or other changes in a prisoner's life. Negative emotions directed towards suicidal thoughts can lead to depression or indifference. Nevertheless, in case of prisoners it is important to know if diagnosed symptoms of depression and a limited ability to experience positive emotions are related to the current situation of a given prisoner or whether they result from a long-standing addiction. A prison psychologist's experience allows to state that in the latter case suicide risk can be considered a bit lower, especially if it concerns penitentiary reoffenders as their stay in prison can be a constant element of a realized script and it may be rather protective than threatening. That is why the diagnosis of a prisoner's life story is so important in assessing suicide risk.

People being subject to penitentiary isolation are not only sentenced to serving their time in prison but also to limiting their interpersonal relations (Badura-Madej, 1999, p. 176). Despite visits, telephone talks or internet communicators, their contact with relatives is limited, becomes superficial or even ceases completely. Quite frequently prisoners are also faced with lack of understanding from the side of their relatives without any prison experience. They cannot comprehend rights and rules governing prison life. That is why the very nature of penitentiary conditions increases suicide risk.

In this case presence and availability of personnel seems to be the most important thing. Someone who knows what is going on, understands, is familiar with prison reality. Thus, eliminating this source of suicide risk shall consist in providing support of the empathic and understanding Protective Parent ego state.

A proper selection of cellmates shall not be underestimated either. Prisoners with similar life stories, family situation, attitude to life can naturally support each other, which might be enough at a given moment. They might naturally strengthen penitentiary and protective influence, informing e.g. about a given cellmate's abnormal or life-threatening behaviour.

It seems important to undertake actions deriving from a thorough analysis of information about a given prisoner. While working with prisoners in crisis, it is easier to initiate actions motivated by fear rather than by conclusions deriving from evaluation of a given prisoner's current mental state. It is crucial to refer to facts and conducted observations to maintain the available Adult ego state, to verify changes, analyse the effects of undertaken actions and consider available options. Due to the fact that a given rehabilitation group is led by a team of many people having various tasks, experience and education, it is possible to look at a given prisoner's situation from many perspectives.

Post-suicidal prophylaxis of the 3rd degree

Post-suicidal prophylaxis of the 3rd degree concerns prisoners who have experienced a failed suicide attempt. It consists in providing such prisoners with

help, carrying out a psychological examination in order to determine motives for making a suicide attempt, to check if there is a need of further psychological help and its scope, to develop guidelines concerning further educative activities (Order 10/2020 DGSW). In practice, after suitable medical treatment and a psychological examination, the *Prisoner at Risk of Suicide Card* is implemented and a given prisoner is subject to increased preventive activities. The psychologist's job is largely based on crisis intervention, like in the case of prophylaxis of the 2nd degree, and preventive measures consist usually in placing a given prisoner in a cell, often a single one, equipped with day and night behaviour surveillance. Such measures maximally limit the prisoner's contact with their prison mates, hence initiating conversations by prison personnel and their availability is important.

Analysing the type of measures belonging to pre-suicidal prophylaxis of the first degree, it can be concluded that the quality of these measures can positively influence a decrease in suicide risk and decrease the number of prisoners in need of prophylaxis of the second and third degree. Initially this conclusion is confirmed in the comparative analyses already conducted (Lizińczyk, 2014), where the therapeutic system of imprisonment focused on highly-specialised measures i.e. a bigger number of prison officers for a given population of prisoners, turned out to be optimal for the realization of pre-suicidal prophylaxis goals.

The awareness of occurring transactions, investing in particular ego states of prison officers and prisoners or the economy of signs of acknowledgement allow for more comprehensive and more efficient realization of tasks regulated by appropriate provisions.

Leaving the maze of relations and obligations regulating prison life and all the rules and guidelines describing preventive measures, what we focus on is, first of all, a relation with a human being. It is a relation where the awareness of internal and external processes, the ability to make choices and take responsibility for them and the ability to maintain this relation while experiencing authentic emotions linked with fulfilment and frustration let one be OK and suggest that others are also OK.

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Profilaktyka zachowań samobójczych w warunkach izolacji penitencjarnej z perspektywy Analizy Transakcyjnej

Streszczenie

Zachowania suicydalne w społeczeństwie niezależnie od ich ostatecznego rezultatu są ważnym tematem wymagającym wielu działań prewencyjnych. W specyficznych warunkach, jakimi są warunki odbywania kary pozbawienia wolności, tym bardziej ważna jest profilaktyka i przeciwdziałanie negatywnym skutkom izolacji, które mogą podnosić i tak już wysokie ryzyko samobójcze. W jednostkach penitencjarnych prewencja suicydalna prowadzona jest w oparciu o szczegółową instrukcję w sprawie zapobiegania samobójstwom osób pozbawionych wolności. Artykuł stanowi omówienie poszczególnych zapisów wspomnianej instrukcji i sposobu ich realizowania oraz próbę przedstawienia podejmowanych oddziaływań i ich skutków w terminologii analizy transakcyjnej.

Słowa kluczowe: próby samobójcze i samobójstwa w więzieniach, profilaktyka zachowań suicydalnych, analiza transakcyjna.