A Psycho-Social Intervention Program Provided in the Prison-System for Inmate-Patients with Serious Cognitive Problems

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Introduction

California Men's Colony (CMC) is one of the 33 state prisons in California that has a specialized program for male inmates who suffer from mental illness and/or cognitive disorders.

Over 3000 inmates live at CMC.

Inmate-Patients with Dementia

Of the 3000 prisoners about 170 need special support due to cognitive impairments.

10% of the 170 cognitively impaired prisoners at CMC suffer from severe cognitive impairments due to moderate/severe dementia.

Dementia is diagnosed in the same way as in the community (DSM-IV TR, 2000):

- Significant memory loss
- Significant memory loss and e.g. aphasia, apraxia, agnosia, and/or disturbances of executive functions
Inmate-Patients with Dementia

- Moderate to severe dementia is defined as
  - Improperly putting clothes on, forgetting how to bathe, how to eat, how to find own room
  - Limited ability to express own needs

(Fixed Functional Assessment Staging Test (FAST) Reisberg, 1982)

The Problem

- California Men's Colony (CMC) has been providing specialized activities and education for inmates with serious mental retardation
- Inmates with serious age-related cognitive decline did not have therapeutic interventions that were tailored towards their needs

The Special Needs Program for Inmate-Patients with Dementia

- The Program targets three intervention levels:
  - Physical Environment
  - Social Environment (i.e., staff)
  - Individual Patient
- Each level addresses memory problems and other core symptoms of dementia
- Each level takes into consideration safety regulations (e.g., material that cannot be used as a weapon; no overfamiliarity by staff)

Physical Environment

- Administering visual prompts to compensate for memory problems and poor judgment:
  - Names are attached to the cell doors
  - Arrows highlight the bathroom area of each cell
  - Each sink has "wash-hands" sign
  - Calendars indicate the current date and routine events in the prison
  - Smaller calendars provide information about the current weather and specify what to wear on that day
- Special eating times for the inmate-patients

Social Environment

- Training based on the models of "unmet-needs" and "low-stress-threshold" for custody staff and for nursing staff (Davidson, 2007)
- Custody and nursing staff use visual prompts to assist the prisoners to express their needs
Social Environment (example)

- All prisoners with dementia are scheduled for recreation activities and groups, and - if needed - for activities of daily living
- Ten weekly groups with multi-modality interventions (visual and auditory)
  - Emotion management
  - Compensating for cognitive deficits
  - Sensory training
  - Reminiscence therapy
  - Walking
- Individualized flashcards help each prisoner to cope with stressful situations


Individual Patient

Methodology

- Time-Series design (O’Reilly, Green & Brauling-McMorrow, 1990)
- Effects of interventions are measured several times during treatment
- Effects are replicable across subjects
- Interventions do not impact a “neutral variable” (constant-series control)

Methodology

- No random assignment
- Inclusion consecutively
- Inclusion based on the following criteria:
  - Referred by independent Interdisciplinary Treatment Team
  - Diagnosis of severe dementia (early or late onset)

Assumptions

- Therapeutic interventions lead to differences in:
  - Irritability
  - Social Skills
  - Depression
  - Attention

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Assessments

- Pre-measurement (baseline, before inclusion into program)
- First post-measurement (6 months after inclusion)
- Second post-measurement (12 months after inclusion)
- Third post-measurement (18 months after inclusion)

- Subscores of Nurses’ Observation Scale for Inpatients’ Evaluation (NOSIE-30; Honigfeld et al, 1965)
- Subscale of modified Adult Self-report Scale-V1.I (ASRS-IV; WHO, 2003)
- Number of admissions at Mental Health Crisis Bed Unit

Constant Series Control

Medication Compliance over the Course of 18 Months

Irritability

Results of the NOSIE-Subscore “Irritability” over the course of 18 months

Problematic Social Skills

Results of the NOSIE-Subscore “Social Skills” over the course of 18 months

Depression

Results of the NOSIE-Subscore “Depression” over the course of 18 months

Poor Attention Skills

Results of the ASRS-IV-Subscore “Attention Skills” over the course of 18 months
Number of Admissions at Mental Health Crisis Bed Unit

Number of Admissions over the Course of 18 Months

Conclusions

- Multiple shortcomings
- Decrease in irritability, poor social skills, and depression
  - Prisoners with Dementia significantly improve
- Decrease in deficient attention
  - Prisoners with Dementia significantly improve

Further Steps

- Preliminary Results are promising
- Continue to expand the project at California Men’s Colony
- Further research is necessary