

THE PREVENTION AND
MANAGEMENT OF SELF-
HARM/ATTEMPTED SUICIDE AND
THE RECORDING OF INJURIES
AND ITS ROLE IN THE
PREVENTION OF ILL-TREATMENT

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Medical Expert to the CPT

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Higher Prevalence of Mental Health
Problems Among Prisoners and a
Greater Propensity to Self-Harm

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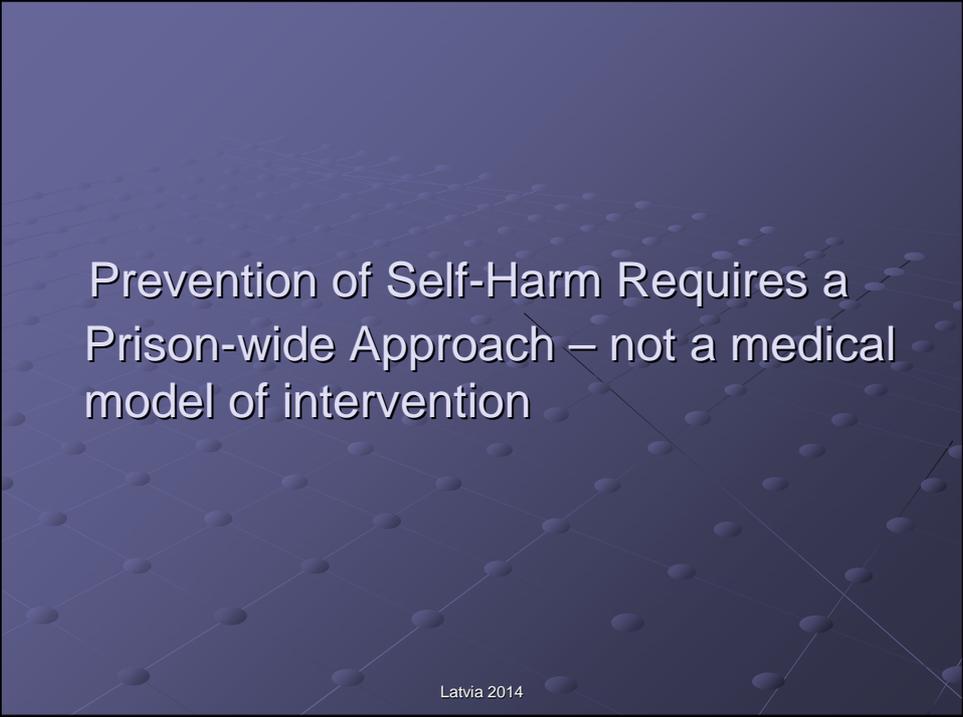
WHY?

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Why might a prisoner self-harm?

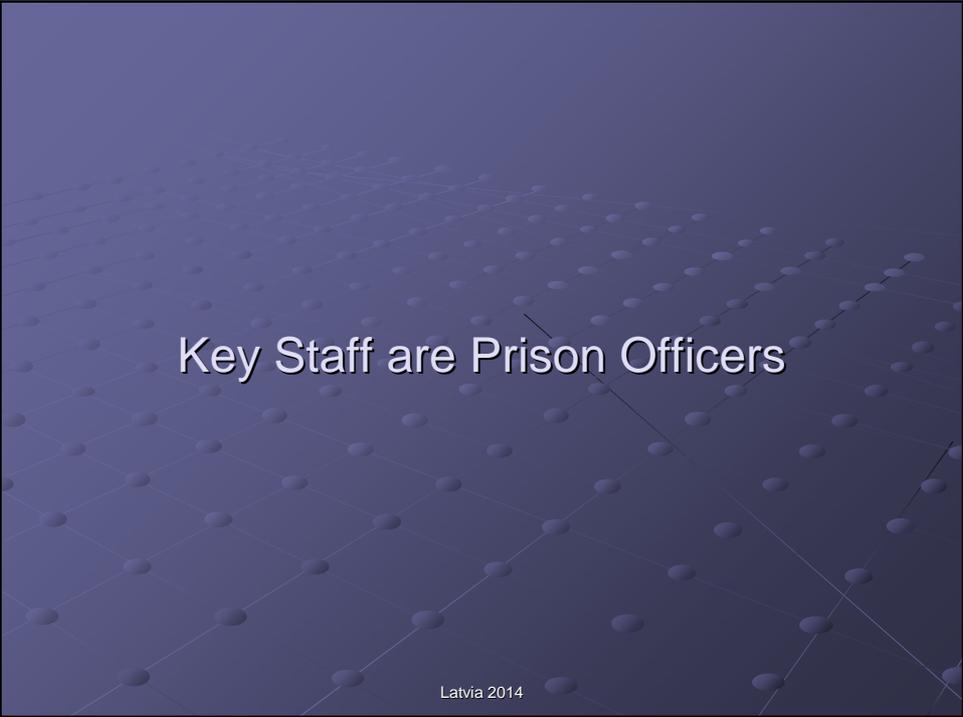
- Bullying
- Debt
- Hopelessness at Situation
- Depressive Illness

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Prevention of Self-Harm Requires a
Prison-wide Approach – not a medical
model of intervention

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Key Staff are Prison Officers

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Experience in Scotland

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Multi-Disciplinary Assessment

- Prison Officer
- Nurse
- Doctor

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Multi-Disciplinary Case Discussion

- Prisoner
- Officer
- Nurse
- Psychologist?
- Doctor?

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- Assessment
- Context
- Management

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Avoid

- Isolation
- Indignity of a bare cell and rip-proof clothing

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Emphasis on

- Understanding the prisoner's problem
- Actively talking with the prisoner
- Agreeing a plan of action

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Consider

- Using other prisoners as 'listeners'
- How to optimise contact with staff and other prisoners

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Always take threats/incidents of self-harm seriously

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Prevention of Ill-Treatment

- Core to the mandate of the CPT

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Medical Examination on Admission

- Nurse
- Doctor

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Safeguard

- For prisoner
- For prison staff

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Ask how detainee has been treated by law enforcement agencies:

- Upon apprehension
- During questioning
- During transfer/transportation
- Upon arrival

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If a detainee alleges ill-treatment it is essential to record the detail of such allegations

- When
- Where
- How
- By whom
- To whom reported

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Istanbul Protocol: (1999)

Manual on the Effective Investigation and Documentation of Torture and other Cruel, Inhuman or Degrading Treatment or Punishment

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To help the medical practitioner, he/she may find it helpful to refer to the definition of torture from the UN Convention Against Torture, Inhuman and Degrading Treatment or Punishment, 1984:

“Torture means

- Any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person
- For such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person, has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind,
- When such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity

It does not include pain or suffering arising only from, inherent in or incidental to lawful sanctions.”

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Relevant International Legal Standards

Relevant Ethical Codes

Legal Investigation of Torture

General Considerations for Interviews

Physical Evidence of Torture

Psychological Evidence of Torture

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Describe any injuries

- Site
- Size
- Colour
- Nature
 - Scar
 - Bruise
 - Burn

If possible photograph all injuries

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Bruising

- Leakage of blood into surrounding tissues

Change over time due to degradation of haemoglobin

- Dark blue/purple
- Blue
- Brown
- Green (4-5 days)
- Yellow (7-10 days)
- Disappears (usually 14-15 days but typically between 1-4 weeks)

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In general small bruises in an otherwise fit and healthy person pass through the spectrum of colour change between 72 hours and one week. The more extensive or deep seated the bruising the longer it takes to disappear

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If bruising is brown/green or yellow it is likely that the injury is at least 18 hours old

Markedly different coloured bruises suggest that they have been caused at different times

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Characteristics of the object causing a bruise cannot easily be determined as blood tends to spread out from the site of injury, particularly along fascial planes.

For example, a scalp injury may result in a black eye

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Different parts of the body are more susceptible to bruising than another

Eyelids → bruise easily

Palms/Soles of feet → rarely bruise

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Tramline Bruising



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Tramline Bruising



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Tramline Bruising

- A solid stick bruise is limited to the convexity of the surface
- A flexible strap or flex will wrap around the convexity producing a larger and often curved tramline bruise

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Cigarette Burn



Source: Knoop KJ, Stack LB, Storrow AB, Thurman RJ: *The Atlas of Emergency Medicine, 3rd Edition*: <http://www.accessmedicine.com>
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Cigarette Burn



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Panda Eyes



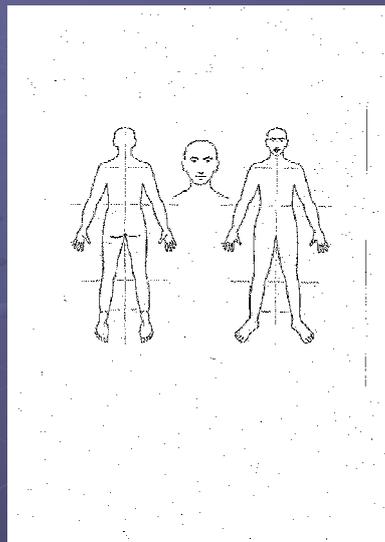
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Panda Eyes



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Body Chart



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Sequelae of Severe Bruising

When there has been severe blunt trauma resulting in deep muscle bruising, rhabdomyolysis can develop, potentially leading to acute kidney injury and death

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Remember

Not all bruising is caused by ill-treatment

- Auto-immune thrombocytopaenic purpura
- Henoch-Schonlein Purpura

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Be alert to ill-treatment that is often not associated with bruising or scarring

- Immersion in cold water
- Sexual abuse

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Health professional's observations in relation to consistency between allegations made and objective medical findings

- Challenges/difficulties in this

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Record

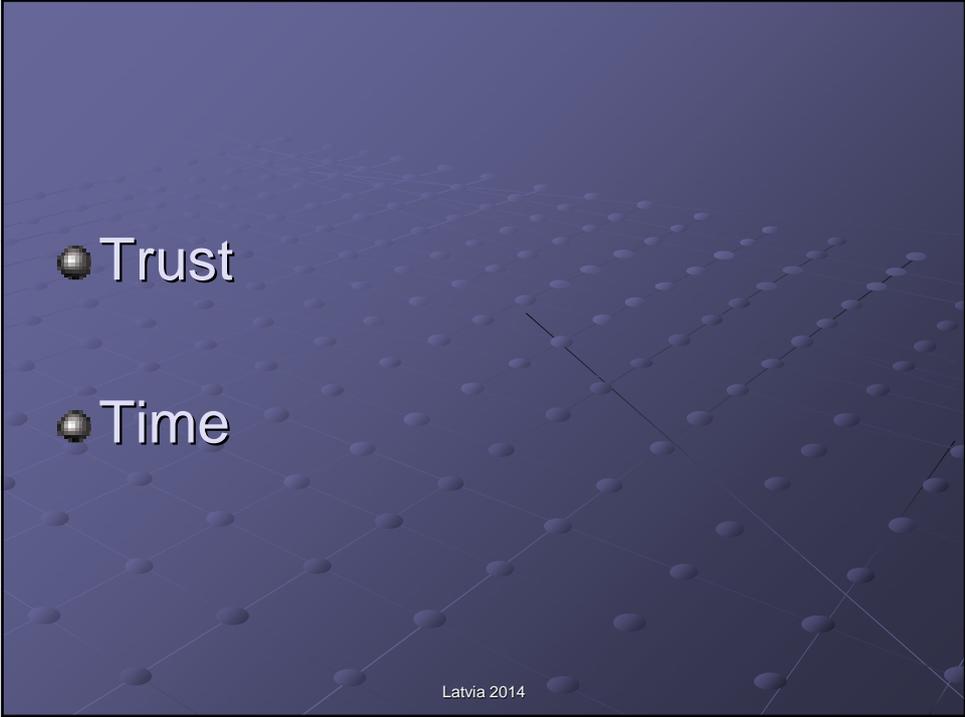
- Any additional examinations carried out such as x-ray
- Any further consultations or treatment

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If believe detainee has been ill-treated

- Copy of medical record to detainee and lawyer
- Bring to the attention of the relevant authority

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- Trust

- Time

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The physician should have confidence in his opinion but not exceed his competence. If you don't know or are not sure → say so!

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Trauma Register

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To accurately record
allegations of ill-treatment
and their sequelae can be
very effective in preventing
the same in future

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**“I’m fed up being
afraid”**

A Prisoner
2012

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