



## Protecting Lives: Comprehensively Addressing the Oath of Office

By Sheriff Kevin Joyce and Mrs. Sandra D. Guajardo

The profession of public safety perpetually places law enforcement officers, correctional officers, and other support staff in the position of protecting the sanctity of life. This is commonly perceived to occur when victims and potential victims need safeguarding from criminal elements, natural disasters, or rescue from accidents. However, the more perplexing circumstance exist when an individual intends to harm themselves and requires intervention, specifically when they are in custody or are being detained for law enforcement related reasons. In fact, suicide is the second leading cause of death in jails and the third leading case in prisons. Suicides accounted for almost 30% of deaths in jails, 6% of state prison deaths, and 5% of federal prison deaths. CALEA Standards related to this issue are found in Standards for Law Enforcement Agencies Manual, 6th Edition – Chapters 71 Temporary Detention and 72 Holding Facilities.



When considering the professional importance of the oath of office taken by public safety personnel, it is critical to acknowledge suicide risks for inmates and those in detention. To that end, the National Center on Institutions and Alternatives (NCIA) released a major study on jail suicide. The study, commissioned by the U.S. Justice Department's National Institute of Corrections, identified 696 jail suicides in 2005 and 2006 combined. Of those suicides, 612 deaths occurred in detention facilities and 84 occurred in holding facilities. Substantial changes in the demographic characteristics of inmates who commit suicide is noted in the study. The data suggests less than a quarter of suicides in jails occur within the first 24 hours, with an equal number of deaths occurring between 2 and 14 days of confinement. Violators jailed on personal and/or violent charges accounted for 43% of suicides and 20% of individuals committing suicide were intoxicated at the time of confinement. This type of statistical data is important as administrators make policy decisions about identifying at-risk populations

and implementing procedural actions to protect the lives of those in detention.

Research suggests that suicide can occur at any time during an inmate's confinement, creating a challenge for public safety personnel. Intake screening for the identification of suicide risk upon entry into a facility should be viewed as time limited because inmates can be at risk for suicide at any point during confinement. Suicide should be viewed as requiring a continuum of comprehensive suicide prevention services aimed at collaborative identification, continued assessment, and safe management of inmates at risk for self-harm.

Although there are no absolutes when attempting to identify those that will attempt suicide, it is important to know that certain attributes increase the chances of this occurring. As examples, when inmates are segregated from contact with others or when they are being incarcerated for the first time, they are statistically more likely to engage in suicidal behaviors. This is also true when they have no meaningful daytime activities or when they have expressed appreciable shame or guilt for their criminal involvement.

Although these statistically linked attributes are important to consider, it is also critical for those responsible for supervising those in detention settings to listen for comments that provide clues regarding an inmate's state of mind. Comments like "this will all be over soon" or "I don't want to be a problem anymore" may be diagnostic of a deeper seeded intent to do personal harm as a resolution to their circumstances. When coupled with the above-denoted statistical references, the ability to identify those at risk with greater acuity is possible. Furthermore, behaviors such as removing personal items from view in their housing area or writing lengthy letters may also be an indication of state of mind concerns. Other behavior indicators of concern might be a notable change in attitude or behavior,

specifically when the transition is to more subdued, to include reduced eye contact during interactions with others.

Because there are no absolutes in the prediction of suicidal behavior for those in custody, the application of sound procedures should be consistently invoked to help prevent such actions. **These include monitoring the behavior of inmates at least every fifteen minutes with inconsistent time intervals for those who have expressed a desire to die but have not formulated a specific plan.** This should also be applied for those that have a recent history of self-destructive behavior. Inmates that are actively engaging in self-injurious behavior and/or have threatened suicide with a specific and feasible plan and intent must be constantly monitored with regard to direction provided by mental health authorities.

It is also important for detention personnel to be aware of inmate diagnosis implications provided by mental health professionals. And, recommendations for monitoring by mental health authorities should be strictly followed. Specifically watching for behavioral issues denoted previously in this writing are important for the entire inmate or detention population, with clear protocols for reporting behaviors or observations that might be indicative of potential suicidal risks.

Policies are always the foundation for effective suicide prevention within jails and prisons. However, training personnel on a regular basis is important and leadership contributing positively to an environment of prevention is critical to recognizing policy intent. Efforts to connect mental health providers to detention professionals during in-service training and as resources are broadly recognized as a strategy to promote comprehensive suicide prevention and a technique to prevent communications shortcomings.

Suicide prevention within the correctional environment is a real “life-saving” responsibility and those serving in the public safety industry have the opportunity to significantly assist those at-risk from becoming a victim of their own personal struggles. Although it is difficult to accurately know what you prevent from occurring in this spectrum, it is important to recognize that through sound leadership, professional policy, and procedures, and maintaining a culture of strong awareness and communication, lives can be saved. At its core, this is the public safety oath...and complements every professional objective in the industry.

## References

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