

Shedding light on post-incarceration syndrome

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"I'm overly stressed more than anything. I always want to be alone." "I continue to deal with massive amounts of trauma and am prescribed



medication just to deal with the constant anxiety and depression."

"Being behind bars made me lose contact with my loved ones."

These real quotes from formerly incarcerated people provide a glimpse of the toll and mental health effects of incarceration. Many formerly incarcerated people—and their family members and close friends—experience what is called post-incarceration syndrome (PICS) upon their release, but there is little research and understanding of PICS in society at large and within health care and academia.

University of Cincinnati researcher Rachael Nolan and justice advocate Chazidy Robinson are collaborating to learn more about PICS and implementing programs to help those experiencing its effects.

What is PICS?

Nolan's research focuses on grief experienced from losses of any kind, from the death of a loved one to losing a sense of identity or trust. After meeting Robinson in 2019, the two began researching PICS through a pilot project that collects qualitative and quantitative data from formerly incarcerated people.

"There is no difference between me and a person behind bars, other than the person behind bars got caught and I didn't," said Nolan, Ph.D., associate professor in the Department of Environmental & Public Health Sciences in UC's College of Medicine. "My life would be completely different if I had."

Through a checklist and interviews, the team is developing a fuller view of the symptomatology of PICS. While every person experiences PICS in a unique way, Robinson said there are five major components:



- Post-traumatic stress disorder
- Institutionalized personality traits such as distrusting others, difficulty maintaining relationships and problems making decisions
- Antisocial personality traits
- Social sensory deprivation syndrome
- Substance abuse disorder

In practice, Nolan said individuals with PICS may always sit with a back against the wall, have an inability to control their anger, feel helpless or unsafe, experience flashbacks to incidents where they were threatened, experience nightmares and sleep disturbances, or be overly possessive of material things.

Some people experience a disbelief of freedom and may act or dress as if they are still incarcerated, prefer to be in confined spaces, and have a fear of future interactions with law enforcement.

"PICS is not something you can see on their face. Looking at me, you can't see the trauma I've gone through," Nolan said. "I think that's one of the reasons why it's so important to me to study this: because it's there, but a lot of people don't understand it yet."

Robinson said diagnoses of PTSD or anxiety are insufficient at describing the full spectrum of what people with PICS experience, which in turn leads to people not getting the full care they need or even being treated for conditions they do not have.

"If I have clinical depression, you're not going to diagnose me as having back issues and give me something that's going to help me for my back," said Robinson, founder and president of the SOAR 4031 Foundation. "It's not going to help me. So we have to make sure that we are diagnosing folks properly."



In her <u>personal experience</u> when she was supporting a now-former partner who was incarcerated, Robinson said she stopped going to therapy because her therapist did not understand the specific trauma and triggers she was dealing with. Many people who participate in the team's research describe similar difficulties finding a therapist who can relate to their experiences.

Taking action

Nolan said the long-term goal is for PICS to be included in the APA's Diagnostic and Statistical Manual of Mental Disorders (DSM).

"If you have a condition the DSM does not acknowledge, you can't get treatment for it and it can't be covered by insurance," Nolan said. "And nobody knows what it is, and you continue to suffer, and the people around you continue to suffer."

Building the breadth of research to make the case for inclusion in the DSM could take decades, Nolan said, but there are millions of formerly incarcerated people in need of help now. Using insights gained from research, Robinson and the SOAR 4031 Foundation have developed a 12-week program designed to help people experiencing PICS and their loved ones.

The first six weeks of the program walk through the five components of PICS and explain how it can manifest. During the next six weeks, organizers take a <u>holistic approach</u> to addressing PICS through <u>support</u> groups, case management to help connect people to therapy, skill building, workforce development and other initiatives that help formerly incarcerated people reacclimate to society.

"It helps so that they can be able to connect in the family unit, or they can connect with whoever is coming into their home so they can



understand how to communicate with each other," Robinson said. "We help them within that 12-week program to be able to do those things and navigate those pieces that typically they wouldn't be able to do."

Robinson said it is an especially important time to advance research and support around PICS, as the federal First Step Act, correctional officer shortages and other factors are leading to more people being released to home confinement.

"We're not giving more mental health services to people inside of our prisons, and we're not allowing more <u>mental health services</u> in our prisons to decarcerate the mind before they're coming home," she said. "We're not talking about PICS and offering post-incarceration syndrome education before people come home. If we haven't deemed this as a disorder or we are not making folks aware of PICS before they come home, then we may have a bigger issue before people start to come home."

Nolan said she believes it is a collective social responsibility to learn more about PICS and offer better care and treatment for formerly incarcerated people and their families.

"There are individuals that go to prison and they make their amends, and the trauma of prison is enough in my opinion to make amends in many cases," she said. "So to come out into the world and actually find that this world outside of the bars is actually far harder and far more stigmatizing and far more debilitating than it was behind the bars, it's no wonder we have recidivism levels the way they are today."

Provided by University of Cincinnati

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