



Pathology/Biology Section - 2016

H81 In-Custody Deaths in Sweden: 1992-2014

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After attending this presentation, attendees will have a better perception of how manner of death differs between short-time and long-time incarceration and of how deaths in custody may be prevented.

This presentation will impact the forensic science community by increasing knowledge regarding deaths of persons in custody in Sweden.

Jail and custody are controlled environments where the contents of the immediate surroundings as well as the supervision of the inmates are tightly regulated. Despite this, a number of deaths occur each year in these confined spaces. The purpose of this study was to investigate the characteristics of deaths in custody suites, jails, and prison in Sweden. Suicide methods were of specific interest, considering the obviously excellent possibilities of prevention.

In Sweden, there are three types of facilities used to incarcerate a person. The system for how these are used differs somewhat from that of other countries, and the definitions of “custody suite,” “jail,” and “prison” used in this presentation will be presented.

Using the database of the National Board of Forensic Medicine, all cases from 1992 through 2014 in which the words “police,” “custody,” “cell,” “institution,” “custody suite,” and “prison” were used in the “site of death” box in the death certificate were scrutinized, generating a total number of 222 relevant cases. A complete review of the police reports, medical records, and the autopsy report was performed in cases from 2007 through 2014.

Among the 222 deaths in 1992-2014, there were 28 natural deaths, 77 accidental deaths, 116 suicides, and 1 homicide. Twenty-five out of the 28 accidental cases where data was available involved alcohol and/or licit or illicit drugs. Of the 27 accidental deaths where data was available, 22 occurred in a custody suite. In 11 out of 15 accidental deaths, the time of death was within four hours of incarceration.

In all but four suicides, hanging was the method used (n=50). Of the 54 suicides, 11 occurred in a custody suite and 43 in jail. In 27 out of 38 suicides, the deceased were found between 6:00 a.m. and 12:00 p.m. In all except four suicides from 2007 through 2014, hanging was the method used (n=50). In two cases, the method was suffocation, in one case the method was strangulation, and in one case the deceased had cut his throat. The annual suicide incidence increased from 4.13 (1992-2006) to 6.75 (2007-2014).

A clear distinction between custody suite and jail regarding the manner of death was observed, with accidental and natural deaths dominating the former and suicides most frequent in the latter.

In one-fourth of the accidental deaths (2007 through 2014), accidental intoxication *contributed* to death, with disease as the underlying cause of death. It is obviously important to distinguish between acute inebriation/intoxication and the deterioration of an already manifest disease.

The reason most suicides were discovered in the morning is probably because the inmates are alone and unsupervised during the night. The increased risk of suicide within the incarcerated population compared to the general population is consistent with studies from other countries. Although preventive measures were applied by the Swedish Prison and Probation Service in 2007, the annual incidence of suicide has not decreased, indicating that more effort regarding suicide prevention is needed. The reason for the increase cannot be accounted for in this study and demands further analyses.

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