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Natalie Laporte, “Deliberate self-harm among violent offenders and forensic psychiatric patients”.

Tid: Fredagen den 29 september, kl. 10.30

Lokal: Psykiatrihuset, Konferensrum 5, Baravägen 1, Lund

Huvudhandledare: Åsa Westrin, docent, universitetslektor, avd för psykiatri, IKVL.

Bihandledare: Märta Wallinius, dr med vet, avd för barn- och ungdomspsykiatri, IKVL

Bihandledare: Sofie Westling, dr med vet, avd för psykiatri, IKVL

Bihandledare: Andrejs Ozolins, docent, Institutionen för psykologi, Linnéuniversitetet, Växjö

Halvtidskontrollant 1: Peik Gustafsson, docent, universitetslektor, avd för barn- och ungdomspsykiatri, IKVL. Peik är överläkare, docent och avdelningschef för Avdelning för barn- och ungdomspsykiatri vid IKVL och har mångårig och bred erfarenhet från tillämpad, psykiatrisk forskning.

Halvtidskontrollant 2: Knut Sturidsson, dr med vet, Institutionen för klinisk neurovetenskap, sektionen för psykologi, Karolinska institutet, Stockholm. Knut är leg. psykolog, med.dr. och studierektor vid Institutionen för klinisk neurovetenskap, Sektionen för psykologi på Karolinska Institutet. Knut har mångårig erfarenhet av såväl tillämpad forskning som kliniskt arbete inom forensiska grupper och ansvarar för kurser i forensisk psykologi vid Karolinska Institutet.

Abstract: Deliberate self-harm among violent offenders and forensic psychiatric patients

Background: Deliberate self-harm behavior (DSH) is a serious self-destructive behavior that implies psychological suffering, can have long-term and profound effects on a person’s quality of life, and challenges the health care system. Rates of DSH in prison settings have been reported to 7-48% and in forensic psychiatry the corresponding number is approximately 30-61%. High rates of impulsive behaviors, anxiety, depression and adverse childhood experiences have been observed among individuals with DSH. Also, forensic populations more frequently report that when emotion regulation strategies fail, they use self-harm as a means of reducing the negative affect state and restoring a sense of emotional balance. Emotional dysregulation and disinhibited behaviors could be

perspectives that may be valuable for forensic settings, yet the knowledge on DSH and its covariates in forensic settings is limited.

Aim: The overall aim is to explore and characterize DSH, including behavioral, emotional and clinical covariates in two groups: violent offenders in prison and forensic psychiatric patients. This thesis will include four manuscripts.

Methods: Data will be collected in two sets. 1. Young adult (18–25 years of age) male violent offenders recruited from prisons (N=270), (paper 1, Laporte et al., 2017). 2. Forensic psychiatric patients (N=100) (manuscript 2-4). For both sets, self-report measures and file reviews were conducted. Participation was voluntary and all participants signed informed consent before participation. For all results, the lifetime occurrence of DSH was reported.

Results: DSH was common among imprisoned offenders (23%) and among forensic psychiatric patients (preliminary results). Among the offenders, DSH was significantly associated with ADHD, mood disorders, anxiety disorders, substance use disorders, being bullied at school, and repeated exposure to violence at home during childhood. Mood disorders, anxiety disorders, and being bullied at school remained significant predictors of DSH in a total regression model. For forensic psychiatric patients, growing up under adverse circumstances was common (preliminary results). The lifetime prevalence of DSH was, in comparison to the general population, elevated both among prison offenders (23%) and forensic psychiatric patients (preliminary results).