The current practice of insomnia management in England and Wales prisons

Introduction
Sleep problems, and clearly defined insomnia, in prison populations are common complaints. Yet, there is a paucity of evidence upon which to base effective intervention. Furthermore, despite the availability of non-pharmacological interventions for the general population it is not known what interventions, if any, are offered across the UK prisons. This makes it difficult to determine the scale and nature of the problem and how well insomnia is managed in prison. To fill this gap, we aimed to establish current practice in insomnia management across the prison estate.

Method
An initial questionnaire was sent to all adult prisons (18+) in England and Wales (n=115). Questions detailed the importance of insomnia in clinical management, current screening tools and implemented management strategies for insomnia (e.g. medication and non-pharmacological treatment). An additional 12 telephone interviews were completed with staff in selected prisons that showed developed and less developed management strategies for insomnia.

Results
Almost three-quarters of the prisons completed and returned the questionnaire (73.0%; n=84). Questionnaire results showed that the majority of prisons used medication to treat insomnia (88.2%) and zopiclone was the most common (83.5%). Prisons offered non-pharmacological alternative to medication but this was usually basic sleep hygiene advice. Nonetheless, some prisons offered alternative therapies such as acupuncture, mindfulness and Indian head massages. Prisons with a developed strategy for the treatment of insomnia offered an innovative non-pharmacological intervention, had written guidance and/or had a clear means of identifying sleep problems.

Discussion
To the author’s knowledge, this is the first study to establish the current practice of treating insomnia in prison. Identifying prisons with a developed practice in insomnia management can lead to the possible implementation of knowledge, strategies and interventions in prisons that are less developed in these areas. As a result, prisoners may benefit from improved sleep management.