



environments for people under the age of 18 years. Offenders below this age should be admitted to specialised institutions. The College also recommends that anti-bullying programmes should be mandatory in all prisons.

The Chief Inspector draws favourable attention to prisoner participation observation schemes for suicide prevention. The College agrees and suggests that several schemes be considered.

The thematic review concludes with a chapter on healthy prisons, which is strongly endorsed by the College. The Chief Inspector's key constituents for healthy prison are a safe environment, treating people with respect, a full constructive and purposeful regime and resettlement training to prevent re-offending.

Overall, the College welcomes the thematic review, but stresses further points:

- too many mentally disordered people are being sent to prison
- there is a need for a more appropriate model of mental healthcare delivery within prisons
- there is a need for better screening for suicidal ideas and propensities at reception and for further assessment and treatment
- there are inadequate treatment facilities for mentally disordered offenders (MDOs) outside of prison, and mental health services in the community need to be amplified so they can play a bigger role in the care of MDOs
- NHS authorities need to provide more beds for acute psychiatric care, to make court diversion schemes a practical possibility
- there needs to be a greater provision of secure beds in the NHS
- there needs to be more and better liaison between the prison health care service and the NHS.

As an aside, the College draws attention to the fact that the whole of the

criminal justice system, not just the prisons, is implicated in the mental health problems seen in prisons and that judges and other lawyers should learn more about psychiatry, psychology and criminology.

The College concludes by emphasising the mental hygiene issue of socialisation, which is so difficult in prisons, and the importance of ensuring that mentally distressed people are not kept in isolation. Special attention is drawn to the need for all suicidal prisoners to be in close contact with other people.

HOME OFFICE (1999) *Suicide is Everyone's Concern. A Thematic Review by HM Chief Inspector of Prisons for England and Wales*. London: Home Office.

Psychiatric Services for Black and Minority Ethnic Elders

Council Report 103. £5.00. 14 pp.

Psychiatric services for black and minority ethnic elders have to-date received little attention. This is understandable, as the 1991 census revealed the number of white elders as 10 times greater than that of elders from all minority groups. This quantitative relationship may change with the 2001 census. The diversity of ethnic origins in small cohorts scattered throughout the UK, and the lack of knowledge about how to access services has led to an under-representation of the psychiatric needs of this population. To compound this situation, traditional beliefs held by ethnic elders and a firm view that support will be forthcoming from the extended family are frequently not shared by the younger ethnic minority population. Information about mental health issues is currently not effective, as it relies on translated leaflets and posters rather than on more appropriate

mechanisms such as disseminating information through GPs and other stakeholders.

It is recommended at present that all acute psychiatric services for ethnic elders involving assessment and treatment should remain within mainstream psychiatric services. An emphasis of ethnic awareness and sensitivity by training staff in culturally sensitive issues is to be encouraged. Services providing continuing care in the community should be developed specifically for the appropriate user group. Efforts could be made to recruit a racial mix for multi-disciplinary staff reflecting the population served. Two earlier Council Reports (CR10 and CR48; Royal College of Psychiatrists, 1990, 1996, respectively) and a recent working party chaired by Professor John Cox reinforced by the *National Framework for Older People* (Department of Health, 2001) made the point that ethnic elders need accessible and appropriate mental health services.

There is an urgent need to establish a reliable and informative database of good practice for ethnic elders. A way forward is to create a website linked to the Faculty of Old Age Psychiatry's website at the College. This new development will also serve the purpose of offering interested specialist registrars opportunities for their special interest sessions and could lead to research defining the appropriate services for ethnic elders. There is a wealth of projects still to be explored.

DEPARTMENT OF HEALTH (2001) *National Service Framework for Older People*. London: Department of Health.

ROYAL COLLEGE OF PSYCHIATRISTS (1990) *Psychiatric Practice and Training in British Multi-ethnic Society*. Council Report CR10. London: Royal College of Psychiatrists.

— (1996) *Report of the Working Party to Review Psychiatric Practice and Training in a Multi-ethnic Society*. Council Report CR48. London: Royal College of Psychiatrists.