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**Trauma-Informed Practice: Exploring the
role of adverse life experiences on the
behaviour of offenders and the
effectiveness of associated criminal justice
strategies.**

Alexandria Bradley

PhD

2017

**Trauma-Informed Practice: Exploring the
role of adverse life experiences on the
behaviour of offenders and the
effectiveness of associated criminal justice
strategies.**

Alexandria Bradley

A thesis submitted in partial fulfilment of the
requirements of the University of
Northumbria at Newcastle for the degree of
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Abstract

The traumatic adverse life experiences of men and women in prison have not featured within the critical victimological research agenda. Yet, these experiences have long-term and pervasive behavioural impacts. Therefore, this research examines the ways in which trauma manifests within the challenging behaviours of both men and women in prison, through a critical victimological lens. The thesis reports the findings of in-depth qualitative interviews conducted with former prisoners (N=17), Prison Staff (N=24) and Third Sector Staff (N=12).

First, the findings indicate that the complex manifestations of trauma can be associated with some of the complex and escalating issues prevalent within the UK adult prisoner populations. Second, the findings recognise the way in which the prison environment can further exacerbate prior experiences of trauma and as such, trauma survivors will feel the pains of imprisonment (Crewe, 2015) much more substantially.

There has been a significant reduction in safety across the UK prison estate (Ministry of Justice 2016c). As a response to the lack of safety and the growing multiple and complex needs across the prisoner population, the findings of this research advocate for a trauma-informed penal approach. The findings of this research shed light onto an under-researched area within victimology. This furthers our understanding of the complex and long-lasting experiences of trauma. In addition, the findings demonstrate that the emotional needs of prison staff are not yet being considered a prison service priority, despite the likelihood of staff experiencing vicarious trauma at work. The experiences and contributions of former prisoners, prison staff, and third sector staff collectively advocate for a greater recognition of trauma and the need for a trauma-informed penal approach.

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Abbreviations

ACE	Adverse Childhood Experience(s)
ACCT	Assessment, Care in Custody and Teamwork
BME	Black and Minority Ethnic
BTI	Becoming Trauma-informed
CAQDAS	Computer Aided Qualitative Data Analysis Software
CJS	Criminal Justice System
FMI	Five Minute Intervention
HMCIP	Her Majesties Chief Inspector of Prisons
IMB	Independent Monitoring Board
IEP	Incentives and Earned Privileges
KPI	Key Performance Indicators
LCSOSFJ	Lord Chancellor Secretary of State for Justice
M&C	Multiple and Complex
MOJ	Ministry of Justice
NOMS	National Offender Management Service
NPS	New Psychoactive Substances
POELTS	Prison Officer Entry Level Training
POA	The Professional Trades Union for Prison, Correctional and Secure Psychiatric Workers
PSI	Prison Service Instruction
PSO	Prison Service Order
SAMSHA	Substance Abuse and Mental Health Services Administration
SCWS	Staff Care and Welfare Service
SIB	Self-Injurious Behaviour
TIP	Trauma-informed Practice
UK	United Kingdom
USA	United States of America

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Declaration

I declare that the work contained in this thesis has not been submitted for any other award and that it is all my own work. I also confirm that this work fully acknowledges opinions, ideas and contributions from the work of others.

Any ethical clearance for the research presented in this thesis has been approved. Approval has been sought and granted by the Faculty Ethics Committee on 10th July 2015 and National Offender Management Service, National Research Committee on 25th May 2016.

I declare that the Word Count of this Thesis is 79,493 words

Name: Alexandria Bradley

Signature:

Date:

Chapter One

Introduction

1.1 Introduction

The traumatic adverse life experiences of men and women in prison, have not yet been explored within victimology. There is only one study in existence, emerging from the United States of America (USA), and this loosely applies critical victimological theorising to male prisoner trauma histories (Katz and Willis, 2016). This research provides the first United Kingdom (UK) based critical victimological study into the way in which trauma manifests within prisoner behaviour. Until now, the greatest insights into understanding the experiences of trauma survivors¹ in prison, can be located within the discipline of psychology. Through adopting a critical victimological lens, this research demonstrates that it is possible to explore the trauma experiences of prisoners within victimology. The discipline of victimology, does not naturally lend itself towards researching and exploring the experiences of offenders. More recent nuanced research conducted by Katz and Willis (2016) has demonstrated that it is possible.

The critical victimology theory is underpinned by feminist traditions. It emerged in order to challenge the notions of the positivist victimology. This research argues that positivist victimological thinking influences the way in which we see victims as either ‘deserving’ or ‘non-deserving’. This way of thinking also impacts upon our punitive stance and our drive to punish the guilty offender. However, critical victimology, with the support of trauma theory (Covington, 2015b; Harris and Fallot, 2001) enables this research to explore the blurred lines between victim and offender; in order to progress our knowledge of the complex and challenging manifestations of trauma.

The critical victimological stance underpins this research and I continue to discuss this within the prison scholarship. As the theoretical position that actively challenges positivist victimological

¹ I utilise this term within this research as some of the former prisoner participant’s referred to themselves in this format. This term also reflects the language used by trauma-informed practitioners and the associated scholarship (Covington, 2015b; SAMSHA, 2014).

theory, it is the most appropriate standpoint for this research. To build the theoretical framework, I have combined victimological theorising, trauma theory and prison scholarship in order to explore the experiences of the participants within this study.

The contribution of the late scholar Nils Christie has been affectionately referred to as ‘Nils Criminology’ (Wagner, 2015). His work within victimology and criminology has emphasised why the voices of prisoners have been underexplored within the victimological agenda. Not only was Christie’s critique of the notion of the ‘ideal victim’ significant, but too was his position of punitive minimalism (Lomell and Halvorsen, 2015). I argue that the contributions he made can be combined in an original way, for my research. Although Christie was not a radical abolitionist, his moral axiom was that “it is right to strive for a reduction of man-inflicted pain on earth”, and this was discussed in relation to our punitive society (Christie, 1981:10-11). Christie argued that our punitive stance is entirely dependent upon what we know about the individuals whom we believe deserve punishment. He claimed;

“If we come close to the people in prison for punishment we become more doubtful. We become more open to new ways of integrating that person into everyday life. It is very easy to create a monster of a stranger” (Cited in Wagner, 2015:No Page).

In light of this, I argue that the concept of the ‘ideal victim’ and the positivist victimological stance, not only permeates victimological thinking, but also societal understanding and the prison policy rhetoric. Therefore this results in a lack of consideration and understanding of the multiple and complex (M&C) needs of trauma survivors in prison. To address this, the original amalgamation of critical victimology, the sociology of imprisonment and trauma theory attempts to explore some of the complex and challenging behaviours and trauma needs within the prison estate at a crucial time. More recently, the levels of safety for both staff and prisoners are at a critical low (Ministry of Justice, 2016c).

In response to the above, as well as the needs of trauma survivors and staff working in prisons, Trauma-Informed Practice (TIP), is being rolled out as a strategic priority in all female prisons and high security male prisons in the UK. This approach has emerged from the USA within the work of

Covington (2015a; 2015b) and Harris and Fallot (2001). Further, it seeks to recognise, respond and support the manifestations of trauma within the behaviour of prisoners, to facilitate an environment based on five core values including; safety, trustworthiness; choice; collaboration and empowerment, for all individuals. This research and the trauma-informed approach, has come at a critical time, as there has been a steady, yet significant increase in self-harm incidents, deaths in custody, New Psychoactive Substances (NPS) use and violence (Ministry of Justice, 2016c). In addition, the pressures placed onto prison officers has resulted in a reduction of prison staff morale and disempowerment (Sim, 2008; Tait, 2011).

I will now attend to the terminology that I intend to use within this research. The term trauma has begun to creep into victimological scholarship (McGarry and Walklate, 2015; Spencer and Walklate, 2016). However, very little is known about the complex behaviours and vulnerabilities that arise from experiences of trauma. More specifically, for individuals who are sentenced to imprisonment, these pre-existing and imported experiences will be further exacerbated during their prison sentence. Therefore this research adopts a critical victimological lens, to explore the pains of imprisonment and the pervasive impact of trauma on the lives and experiences of men and women in prison.

To incorporate a broad range of adverse life experiences and victim experiences, the term trauma can provide inclusivity. This term recognises the individualistic and diverse experience of trauma survivors. Harris and Fallot (2001) utilise this term in order to represent a broad range of adverse life experiences, including victimisation experiences, emotional abuse, neglect, as well as challenging childhood experiences, such as living in a household where parents are addicted to substances, or experiences of being placed in local authority care. Additionally, trauma has been used to explore the enduring and pervasive impact of such experiences on an individual's life, behaviour and the way in which they see their world (Covington, 2015b). Brown, Harris and Fallot (2013:26) posit that when a traumatic experience occurs, trust is broken, as "trauma violates our beliefs that the world is a safe place". Therefore the behavioural and coping adaptations that arise from such experiences may not always fall within the expected expressions of trauma. Some of the behavioural and/or coping strategies associated with previous trauma include issues with substance

misuse, self-harm and anger (Covington, 2015b; Harris and Fallot, 2001; Walker and Towl, 2016). These issues are specific safety concerns relating to the escalating issues within the prison context (Her Majesties Chief Inspector of Prisons, 2017). However, there has not been a substantial or specific scrutiny into these issues within either the political or academic domain.

Therefore, this research inquiry will present four key original contributions to areas of knowledge and practice. First, I will explore the experiences of trauma within the lives of former prisoners, to challenge the dominant positivist perspective within victimology, and to consider the pervasive nature of trauma. Second, through a critical victimological lens, I will explore the pains of imprisonment, to argue that prisoners who have experienced trauma prior to imprisonment, will feel such pains much more harshly and due to complexities associated with the manifestations of trauma, this adds additional challenges when attempting to *recognise* and *respond* to an individual's vulnerability.

The literary review of the sociology of imprisonment and more specifically, the pains of imprisonment, indicates that prison is psychologically painful and can produce traumatic experiences. Therefore a solution to support all prisoners, regardless of an individual's prior trauma history, is required. As such, the final key original practical and theoretical contribution to knowledge is the exploration of TIP. This feminist informed approach utilises the knowledge of trauma, to help staff better accommodate and support the varying vulnerabilities and manifestations of trauma. In addition, this approach recognises the subsequent needs of the staff who work with trauma survivors.

There is very little research exploring TIP within prisons across the UK, and there has been no mention of this practice within victimology, until this inquiry. In this research, I posit that TIP has the potential to not only challenge the positivist assumptions that continue to permeate victimological, penal and societal thinking, but to also increase prison staff morale and in doing so, this can improve the experience of prison for all individuals within the system.

Covington (2015a; 2015b) and Harris and Fallot (2001), argue that trauma should become the expectation, as opposed to the exception. They propose that all staff that work in institutions or

human services² should consider the role that violence and trauma plays on the lives of the individuals accessing their services. Therefore, this approach aims to accommodate the vulnerabilities of trauma survivors, to better enable the support of such individuals, in order to avoid re-traumatisation (Brown, Harris and Falot, 2013).

Whilst this research makes several theoretical contributions within academia, the passion behind the research was rooted within my former practitioner reflections, to locate potential solutions, in order to effectively recognise and respond to prisoner experiences of trauma. As such, having a practical value is also a key focus of this research.

1.2 Research Aims and Objectives

In order to explore some of the varying manifestations of previous trauma, I wanted to incorporate the voices of three groups of participants. I wanted to discover the complexities and behaviours that they had experienced or supported during their lives and/or careers. Further, I wanted to identify whether services were able to fully implement trauma-informed approaches successfully, as demonstrated within the literature, and the small empirical studies that are available (Covington, 2015b; Sweeney et al., 2016).

When I entered the research field in October 2015, I was driven by my overarching research question;

1. In what ways can victimisation, vulnerability and trauma manifest within offender behaviour?

This will be explored within the existing literature, to identify what we already know and also from the perspectives of the three participant sample groups. To help build upon the gap in knowledge, I also considered the following sub-questions:

2. How does the prison service recognise and respond to the needs of prisoners who are trauma survivors?
3. How are staff working with trauma survivors supported?

² A human service is used to describe the objective of meeting an individual's need through interdisciplinary and person-centred approaches. For example this could include drug and alcohol services or mental health services.

These questions are rooted within the foundations of the methodological approach that I used. Further, the questions steer my analysis and discussion sections, and they are at the heart of the inquiry and my overall reflective conclusions.

1.3 Thesis Layout

Here, I briefly present how the chapter formation of the thesis will appear.

In Chapter Two, I present the first literature review. Within this chapter I explore the worth of critical victimology and how this theory can facilitate the inclusion of the trauma experiences of men and women in prison. I draw heavily on the critical victimology emerging from the work of Mawby and Walklate (1994), Walklate (2007), Walklate and Spencer (2016) and Katz and Willis (2016). I also explore some of the more nuanced work that has started to include trauma within victimological discussion. However, to add to this area, I introduce trauma-informed approaches, to broaden victimology's understanding of trauma and how the legacy of trauma can manifest in complex expressions of vulnerability.

In the second literature review in Chapter Three, I explore the prison context from the early 1990's. Here I interrogate scholarly literature, prison policies and evolving prison practice, to establish how the prison service supports prisoners who have experienced previous trauma. I also examine if the environment of prison has the potential to further exacerbate and trigger trauma symptoms. The journey towards penal reform is discussed, in order to highlight some of the key developments that have resulted in the complex and contradictory journey towards establishing effective rehabilitation rhetoric. Drawing upon the body of work within the sociology of imprisonment, I explore how the pains of imprisonment (Crewe, 2011a; Crewe 2015; Crewe et al., 2017; Sykes 1958) are felt more acutely by prisoners who have experienced trauma. Following this, I move on to explore the importance of the role of the prison officer. Here, I pay specific attention to the staff-prisoner relationship and how this is a powerful dynamic within the prison environment (Crawley, 2004a; Crewe, 2009; Liebling, Price and Shefer, 2011). Finally, I attend to the implementation of TIP

within the prison estate for women³, to explore the objective and potential impact, in supporting the manifestations of previous trauma, as well as how it can attend to the needs of prison staff.

In Chapter Four, I explore my methodological strategy and the ways in which my interpretivist and feminist positions impacted the research design. By creating a trauma-informed methodological strategy, I explore how I incorporated core values of feminist inspired trauma-informed approaches, to increase the safety and protection of the participants included in this research. Further, I include personal reflections on some of the challenges of collecting emotive and sensitive data, to present the importance of prioritising researcher self-care.

Chapter Five is the first of my findings chapters where I explore the pre, peri and post⁴ experiences of prison that emerged from the reflective biographical narrative interviews collected with former prisoners. I explore the victimological literature in order to test its utility and the associated challenges that I argue have halted the inclusion of the trauma experiences of prisoners. First, I attend to 'Life before Prison', where the adverse life experiences of the participants were explored, in relation to behaviour changes and substance misuse. Second, in the 'Life in Prison' section, I acknowledge 'The Gendered Pains of Imprisonment' and I present the challenges participants disclosed during interviews. Finally, I explore participants' reflections of their 'Life after Prison' and the hurdles they have experienced. Participants were encouraged to look towards the future, to acknowledge their goals and consider the value of trauma-informed approaches within their recovery and desistance journeys.

In Chapter Six, I explore the perspectives of prison staff. An original feature of this focuses on the ways in which staff discuss how their skills and experiences help them to recognise, respond and support the needs of trauma survivors in prison. Following this, I consider the challenges and hurdles discussed by prison staff, and I suggest that more support should be offered to staff. This support should ensure that staff are effectively supported and resourced to attend to the multiple

³ The implementation of trauma-informed practice has been ongoing since September 2015 in the female prison estate. The implementation into the high security male prison estate began in July 2017 and very little information is available. This approach has not yet been implemented into adult male category B, C or D prisons. See Appendix Sixteen for implementation plan.

⁴ I refer to pre, peri and post experiences of prison as Pre (previous to) Peri (during) and Post (afterward).

and complex needs of the prisoner population. I then highlight how the journey towards 'Becoming Trauma-Informed' (BTI) will be impacted, in light of the issues raised by prison staff.

Therefore I propose that the needs of prison staff should be a priority, in the interest of improving the safety and efficiency of the prison service, as well as improving the all-important staff-prisoner relationship. In the final section of this chapter, I integrate the findings from interviews with third sector staff working within trauma-informed organisations. Here I demonstrate how staff support is an important priority within the trauma-informed culture shift in community settings. As such, I posit that the prison service could learn from prior examples of successful trauma-informed implementation.

In my conclusion in Chapter Seven, I revisit my original research questions and reflect on my key research findings. I highlight the theoretical, methodological and practical insights and, most notably, the increased understanding of the varying ways manifestations of trauma can present in prisoner behaviour. I then acknowledge the limitations of my explorative research. In the final section of this chapter, I reflect upon potential future directions where additional research would be welcomed.

1.4 Practitioner vs Researcher: Acknowledging the Conflict

To conclude this introduction, I would like to make the reader aware of my own position and perspective. My positionality and reflective researcher skills have continuously developed during my studentship. However, the passion that ignited this exploration derived from previous practitioner experience and working directly with prisoners. It was always going to be challenging to detach myself fully from the research and the emotive nature of the research due to my previous career and the experience I have of working with trauma survivors in prison.

In keeping with the feminist standpoint within the ontological position of this research (see Chapter Four), I acknowledge that my experience inevitably shaped my motivation to research this subject, my experience also influenced the way in which I designed and developed my research, as well as how I analysed my findings. This is an integral element to the originality of this research and therefore it should be celebrated. As articulated by the late Jock Young (2011), criminologists can

be abstract empiricists. However, the intention of this research was guided by a desire to improve the support to the individuals across the entire prison estate, but also to the individuals that inspired this research project initially, whom I worked with in HMPYOI Deerbolt and HMPYOI Low Newton⁵.

After completing my undergraduate and postgraduate criminology studies, I knew I wanted to work in a prison. More specifically, I wanted to help individuals in prison. When an opportunity came up within the drug and alcohol team, I applied and started working in a male young offender's and closed women's prison in September 2013. There I helped design and deliver drug and alcohol programmes, to a group of up to 8 prisoners. I provided 1:1 key work and support during the programme. Upon completion of the 1-2 week programmes, the 1:1's ceased and the recruitment phase began for the next programme.

During my relatively short career within the prison service, I witnessed numerous incidents that unsettled me. However this experience also provided me with an opportunity to help and encourage a lot of individuals, not solely to achieve their recovery⁶ goals, but to support their often critically low levels of self-esteem. I found that both the men and women that I worked with lacked self-belief and the empowerment required to pursue positive changes in their lives. This was partially due to the prison environment, the prison culture and the institutional disempowerment that manifested from the overwhelming levels of powerlessness. However, during the programmes, an additional complexity emerged. This complexity impacted upon the way in which individuals engaged with the programmes, the way they interacted within the group, the way they participated, and most significantly, the way they behaved. Many individuals were removed from the programme due to their disruptive behaviour. This behaviour would range from making loud noises or laughing when their peers were sharing their experiences, to physical fights, flipping chairs and/or tables, and then storming out of the group room.

⁵ I did not collect data within the two prisons I had previously worked in. I conducted my research within 4 prison sites that I had no professional affiliation with.

⁶ When I refer to recovery, I make reference to the work of Best and Laudet (2010:2) whereby "recovery is a lived experience of improved life quality and a sense of empowerment, based on ideas of hope, choice, freedom and aspiration". This can be considered within mental health, substance misuse and offending.

If an individual's behaviour was deemed disruptive to the group, either myself or my manager would meet with the individual on a 1:1 basis, to discuss the most appropriate action moving forward. At this point, the team of facilitators had already discussed the behaviour and determined whether or not that individual would be returning to the session, the following day.

However, there was one particular occasion where I disagreed with my team and management about the removal of an individual. In the closed women's prisons, we had a male facilitator on the programme. Although he was incredibly engaging and sensitive, one woman in the group would sit and glare at him, refuse to engage with the male facilitator and at one stage, pinned a female facilitator up against the wall when queried about it. As a witness to this, I had asked my manager if I could attend the 1:1 meeting. In this meeting, the woman disclosed that the facilitator reminded her of an earlier trauma she had experienced as a child. As a result of this, the woman disclosed that she struggled to work with certain men and subsequently experiences a lot of rage and sensitivity in this area. I can recall my manager responding to this inappropriately, by saying something resembling "that is ridiculous, this jail is full of men and she can't just avoid men forever". I tried to explain that exposure to our male facilitator was not going to help this woman, and that we were not the appropriate service to facilitate the support she needed with regard to the trauma. Rather than replacing the male facilitator with another member of the programmes team, the woman was removed from our programme and her offender manager was notified. I can remember having a discussion with a colleague shortly after, where I stated that we had failed this woman's rehabilitation need as we could not accommodate her trauma-related vulnerabilities.

This experience raised my curiosity into questioning certain prisoner behaviours, as well as researching the impact of childhood sexual abuse on the behaviours of prisoners in my free time. Although I learned a lot from researching this, I was in a small minority that ever discussed the impact of trauma on the behaviour of our group participants. I was labelled the 'soft' and 'naive' one in the group, due to my youth and lack of experience. As previous trauma and the connections to substance misuse became such integral discussion points within the programmes, my interest in this area grew rapidly. I had been looking into training to be a counsellor as a new career path, when I came across a PhD opportunity within victimology.

In my interview for the studentship, I presented a case study of a young man, who appeared incredibly disruptive and was about to be removed from the programme, when he disclosed to me that he had experienced childhood sexual abuse. This was the first time at the age of 19 that he had discussed it. When I asked why, he stated that no one had ever asked him why he behaved like this. He was a regular visitor to the prisons segregation unit, due to his anger issues and he was a notoriously well-known prisoner for his aggressive and violent behaviour. He struggled to trust staff, but I was able to support him towards counselling before I left my job. The stories of the young man and woman I discuss here were not rare occurrences within the group sessions. However these were the original cases that led me to challenge the prison service's ability to recognise, respond and support the needs of individuals who had experienced previous trauma.

This experience of working within the prison informed my motivation to conduct this research, as well as the development of the research questions, methodology (see Chapter Four) and my passion for TIP. When I came across this practice during my research inquiry, I realised how much this approach could have both changed the experiences of the men and women I worked with, but also my own. This practice resembled the approach I had both researched and instinctively developed, in order to support the individuals on my programme who had experienced previous trauma. As such, my positionality as a former prison staff member and my experiences during my career informs this research in substantive and original ways.

In the following chapter, I begin my literature review where I explore the ways that victimological theorising can provide a platform for the experiences of trauma survivors in prison.

Chapter Two

Manifestations of Previous Trauma: A Case for Critical Victimology

2.1 Introduction

In this chapter, I explore the impact of the positivist perspective within victimology through a critical victimological lens. I shape the literature review to highlight how the critical perspective within victimology is the most promising victimological standpoint to include the trauma experiences of prisoners. Within this chapter, I advocate for a new victimological approach, where I posit that by combining traditional victimological perspectives with trauma theory, this can develop a much more robust and multi-disciplinary understanding. Following this, I explore some of the traditional victimological theorising, that I argue largely neglects the complexities and vulnerabilities of trauma survivor in prison. In the concluding section of this literature review, I examine the ways in which trauma theory can extend the victimological debate, as well as building upon our understandings of the long-lasting legacy that is left behind by experiences of trauma.

2.2 Theorising within Victimology

Victimology is often described as a sub-discipline of criminology (Mawby and Walklate, 1994; Miers, 1989; Spalek, 2006). Many multi-disciplinary scholars, academics and policy makers who write about the complexity of victimisation add to the victimological imagination. The study of victimology has been described by Fattah (2000:71) as the “science of victims and victimization”. The author also described theorising within victimology as the “study of the impact of crime on victims, in particular, the traumatic effects of victimization, victims’ response to victimization, and the coping mechanisms they use for healing and recovery” (Fattah 2000:71).

Since the 1960’s, the field of victimology has continued to develop into a “variegated discipline with its own theoretical and methodological traditions” (Spencer and Walklate, 2016: xii). The ‘founding fathers’, Hans Von Hentig (1948) and Benjamin Mendelsohn (1963) argued that victims played a role in precipitating their victimisation. Their contribution to victimology

launched the dominance of positivist victimological theorising. The work of the ‘founding fathers’ enabled the introduction of the victimisation survey in the late 60’s (Davies, Francis and Jupp, 2003). This helped to highlight the levels of unreported victimisation, and as such, positivist victimology began to focus on measuring the prevalence of victimisation. In addition this helped to generate typologies that could explore the relationships between victim and offender, as a means to investigate the role that victims may play in their own victimisation (Walklate, 2007a). Francis (2017) acknowledges that positivism is the golden thread that connects the work of Von Hentig (1948) to the more recent work within orthodox victimology. Orthodox victimology focusses primarily on a narrow view of crime within the definition of the law, thus opting to explore data (e.g. Crime Surveys) instead of allowing for a richer qualitative exploration of the lived experience of individuals (Francis, 2017). As this research provides a platform for an empowering qualitative consideration of trauma survivors’ experiences, the positivist victimological theoretical position and epistemological characteristics were not suitable.

The four theoretical perspectives within victimology; *Positivist, Radical, Critical* and *Cultural*⁷, provide varying understandings of the “relationship between choice, power, power relations, and suffering” (McGarry and Walklate, 2015:18). Within this review, I argue that critical victimology is the most advantageous standpoint to include the trauma experiences of prisoners, in doing so I critique the dominant positivist victimological theorising and the legacy associated with this perspective.

The positivist perspective within victimology has an ever-increasing presence due to the criminal victimisation surveys it offers as a data source and the way in which the data informs policy (McGarry and Walklate, 2015). However, as the data sources have grown, so have our understandings of victimisation with “more voices now competing for the theoretical space within victimology” (McGarry and Walklate, 2015:19). The epistemological characteristics of positivist victimological inquiry can provide valuable quantitative insights, particularly in relation to an individual’s susceptibility of victimisation (Miers, 1990). However, the positivist perspective places focus onto victim precipitation. Consequently, this limits the ability of positivist

⁷ For a review of the other victimological theories, see Davies, Francis and Greer (2017) Mawby and Walklate (1994) Walklate, (2007).

victimology to explain the much broader and individualistic experience of victimisation/harm and trauma that this thesis will explore. Therefore this research could not benefit from adopting a positivist victimological stance.

Arguably, the most dominant legacy of positivist victimology is the notion of the 'ideal victim' that was originally coined by Christie (1986) as a criticism for the stereotypical ways we anticipate victims to behave. The 'ideal victim' was established in response to the stereotypical presumption of victimhood present within political and societal discussions (Christie, 1986). Walklate (2007b:28) acknowledged that the 'ideal victim' "evokes the fairy-tale image of little red riding hood, that is someone young, innocent, out doing good deeds who is attacked by an unknown stranger". The notion of the 'ideal victim' emphasises the stereotypical behaviours we have grown to expect from a victimising event. This places the experience of victimhood within unrealistic parameters, therefore excluding many legitimate forms of emotions that victims may feel. As such, positivist victimology has difficulties in recognising some individuals as victims. This results in the recognition being placed onto certain victim experiences in favour of others. As such Miers (1990) suggested that to overcome the limitations of positivist victimology, critical victimology offers a more promising and inclusive approach to help us understand the application of the victim label and the social process involved. In order for this thesis to place a critical lens onto the stereotypical assumptions of victimisation and trauma, a critical victimological theoretical underpinning was required to provide an empowering and non-judgmental approach, to incorporate the complex trauma experiences of the participants within this research (See Section 2.2.1).

An example of the way in which policy is influenced by the notion of the 'ideal victim', can be found in the UK Criminal Injuries Compensation Authority. This authority may reduce an individual's claim by 25% if they have any previous convictions either spent or unspent (Walklate, 2007b). This demonstrates a propensity to separate the 'innocent victim' and the 'guilty offender', as even where an individual has been victimised, if they have an offending history, their victimisation is delegitimised financially by 25%. As Shapland, Wilmore and Duff (1985) highlight, there has been an over-reliance of stereotypical innocence of victims as well as the exaggerated negativity placed onto the 'guilty' offender, and the authors argue that this continues to shape policy

developments. The work of Christie (1986) and latterly van Wijk (2013) introduced the role of concepts such as ‘legitimacy’, ‘innocence’ and ‘deserving’ and how these concepts influence and shape the process of acknowledging an individual’s experience of victimisation, as well as assigning the label of victim.

The popular bifurcation between the innocent and culpable has been interrogated within victimological theorising. The distinction between ‘good’ and ‘bad’ as well as ‘ideal’ and ‘true’ victims is even more pronounced within the ‘hierarchy of victimhood’ (Carrabine, Iganski and Lee, 2004). The individuals that are situated within this hierarchy have been referred to as “the worthy sufferer and the unworthy remainder” (Tilly, 2008:94). At the lower end of the hierarchy of victimisation reside marginalised individuals who lack status and power. More specifically, these are individuals that are deemed troublesome by the majority of society, such as homeless individuals and sex workers (Carrabine at al., 2004). Further Carrabine and colleagues highlight that these individuals tend to be seen as ‘non-ideal victims’ and therefore they are less deserving of sympathy. Alternatively, the ‘ideal victim’, such as the elderly woman or child and those most readily accepted as legitimate victims, are situated at the top of the hierarchy. McGarry and Walklate (2015:16) propose that the hierarchy of victimisation “reflects other presumptions particularly about vulnerability”. I will return to the concept of vulnerability in Section 2.2.1 and 2.2.3.

Following presenting my research findings and theoretical application at a victimology symposium in 2017, a member of the audience asked me to consider whether or not my participant voices could be considered within the ‘Victimological Other’. This concept has roots within the image of the ‘innocent victim’ and concepts of the ‘deserving’ and the ‘underserving’ (Walklate, 2007b). The ‘Victimological Other’ further refers to what Miers (2007) termed ‘delinquent victims’, those who present challenges to the state, as to provide a response would “blur the distinction between a victim or being an offender” (Walklate, 2007b:53).

Furthermore, the ‘Victimological Other’, has caused tensions between academic victimological work (those identified in mainstream academic discussions) and activist/policy victimology (those working within the field with the less ‘legitimate’ victim) (Walklate, 2007b). However Goodey

(2005) believes that the combined efforts of academic victimologists, policy makers and those working directly with victims, would aid the development of ‘good practice’. However applicable the concept of the ‘Victimological Other’ is, I argue that it further segregates the victim experience of prisoners. I believe the concept further emphasises victimology’s distance from practice and the realities and complexities of victimisation. This concept is not appropriate to situate the experiences of my participants within, instead I turn to the nuanced directions of critical victimology (Spencer and Walklate, 2016), as the sub-discipline of victimology can, and already has started to provide more empowering platforms to explore the trauma experiences of prisoners.

2.2.1 Innovations in Critical Victimology

Notably, critical victimology emerged as a “radical corrective to many of the tendencies of positivist victimological theory, inquiry and practice” (Spencer and Walklate, 2016:xiii). Critical victimology attends to numerous issues such as the role of capitalism in the production of harm, the recognition of women as victims and moving towards the recognition of survivorship and resilience (Walklate, 2011). Walklate (2012) questioned how we see and explore who is a victim within society. In doing so, she appreciates that victimisation is an individualistic, personal, embodied and relative experience, rather than an objective reality. Meanwhile, some scholars (McGarry and Walklate, 2015; Spencer, 2015; Spencer and Walklate, 2016) acknowledge that sensitivity should be paid to the broader cultural politics within the victim experiences, as the application of the victim label to some traumatised individuals and not to others, is a guiding principle of critical victimology.

According to Chouliaris (cited in McGarry and Walklate, 2015:14) the purpose of critical victimology is to engage;

“In a twofold task, to cast light on the institutions and structural relations that favour specific images of victimization at the expense of others (contextualization); and to draw attention to situations that, despite producing serious victimization, are not designated as such”.

Critical victimology has been interpreted differently by different people (Miers 1990; Fattah, 1992; Mawby and Walklate 1994). Illustrated in the work of Miers (1990:224), he argued that the key concerns for critical victimologists surround “who has the power to apply the label” and what factors influence that application. In an early iteration of critical victimology, Mawby and Walklate (1994) explored the role of the state in overlooking a proportion of victim’s voices, in favour of others. Mawby and Walklate’s (1994) development of critical victimology has been influenced by the work of Giddens (1984) and feminist-informed scholarship, whereby the authors strive to understand the circumstances in which the term victim is applied, as well as the “relationship between structure and context in producing the victims we see and those we do not” (McGarry and Walklate, 2015:15).

Ontological and epistemological foundations of critical victimology largely reject those of positivist victimology, in order to utilise qualitative methodologies that are situated within the feminist standpoint. The feminist underpinning of critical victimology helps to privilege “the voices of victims/survivors” (Spencer and Walklate, 2016:xiv). Through the application of Giddens’ (1984) theory of structuration, critical victimological research strives to consider the number of processes which construct the reality of an individual’s experience. For example, an individual’s unconscious activity, the way in which they engage with their surroundings to both sustain and/or transform their conditions, as well as the observed and unobserved mechanisms which underpin an individual’s life.

As such, a key consideration of this theoretical position is the role of dualism, more specifically the relationships between structure and agency. This is connected to why critical victimology is classed as ‘critical’, as the framework enables researchers to explore the processes which “go on behind our backs, which contribute to the victims (and the crimes) we ‘see’ as opposed to those we do not ‘see’. In other words, it is possible to get beyond the ‘mere appearance’ of things” (Walklate, 2004:42). This, Walklate (2004) argues, incorporates the interests of feminist work to recognise women’s’ strategies of survival, resistance and strength in the face of adversity and victimisation. Yet as a theoretical framework, critical victimology is invested in deconstructing

victim experiences of both men and women, to set an inclusionary theoretical and empirical agenda (Walklate, 2004).

However, a key criticism of critical victimology has been associated with a reluctance to focus on the categories of ‘offender’ and ‘victim’ as interchangeable identities, as well as overlooking the possibility that there is a connection between experiences of victimisation and offending (Farrell and Maltby, 2003; Spalek, 2006). However, in 2016, the first application of critical victimology with trauma, loss and prisoners was completed by Katz and Willis (2016). The authors discussed the relevancy of critical victimology specifically to examine the narratives of male prisoners, who have experienced trauma. Within this work, Katz and Willis (2016: 34) argue that critical victimology’s aim should be to explore the “social, structural and institutional forces that increase the likelihood of individual victimization”. As such, the authors argue that prisoners should fit into victimological theorising, because it is unlikely that a prisoner has not experienced some form of victimisation. Further Katz and Willis (2016) state that offenders are largely situated within marginalised areas and communities, often they are failed by services designed to help them (e.g. social services and mental health services) and within the prison environment, penal policies continue to fail offenders through a lack of societal reintegration and rehabilitation options (Light et al., 2013).

Whilst this is a positive step forward for critical victimology, this work fails to robustly apply critical victimology to the victimisation experiences of offenders. The only mention of critical victimology is within the introduction of the chapter. The focus of Katz and Willis (2016) then turns to the concept of hegemonic masculinities, which I explore within Section 2.2.5. My own application of critical victimology with the support of trauma theory extends the understanding of prisoner trauma experiences even further, to challenge the stereotypical notions of victimisation and to further explore the complex manifestations of trauma within victimology.

2.2.2 Offender Vulnerabilities and Victimology

According to Rumgay (2010), offenders are failed by the services designed to support their vulnerabilities. The author argues that individuals who have a history of offending often feel ostracised from community support services. Therefore their victimisation experiences were

largely underreported, whilst their support needs went unmet. Within Runggay's (2010) helpful concept entitled the 'Victimised Offender', she argues that more needs to be done to support women within the Criminal Justice System (CJS), to better acknowledge and respond to the impact of victimisation, in order to reduce the likelihood of individuals turning to crime. In order to address the legacy left behind by victimisation, she argued that a mutual obligation between the state and the offender would be necessary. This work prioritised the long-lasting legacy left behind by victimisation on the lives of offenders, further highlighting potential rehabilitation needs.

In order to explore the adverse life experiences of offenders, criminologists have coined the phrase 'troubled lives' to describe the complex childhoods that have resulted in a range of complex needs and social disadvantage in adulthood (McNeil and Hunter, 2015). The legacy left behind by victimisation experiences has been acknowledged by victimologists such as Miers (1990:221) who argue that;

“It is abundantly clear that both as individuals and as groups we do not respond uniformly to suffering; that is, we do not all respond in the same way to a particular instance of suffering, nor do those who share a response to one instance of suffering necessarily agree on others. Whether a person responds sympathetically depends upon his notions of what constitutes a victimising event. It follows from this that if a person does sustain an injury or loss and wishes to have it recognised by others as a victimising event, it is usually necessary to present that suffering in terms that comply with those others' definitions of victimising events”.

The term victimisation is used to differentiate victims from non-victims, in order to capture the intrinsic features of victimisation. This allows us to understand who may be more prone to victim experiences than others (Walklate, 2011). This way of thinking about victimisation can be connected back to the positivist victimological perspective (Rock, 2007). However, trauma theory can enhance the understanding of victimisation further to include much broader experiences such as neglect and experiencing psychological harm. This is crucial, because to overlook or not to

take an individuals' experience seriously, can be one of the most painful forms of secondary victimisation (Orth, 2002). Further, Montada (1994) acknowledges that a lack of recognition of an individual's experience of victimisation can be a particularly cruel form of secondary victimisation. Therefore, this is something that victimological theorising should attempt to overcome.

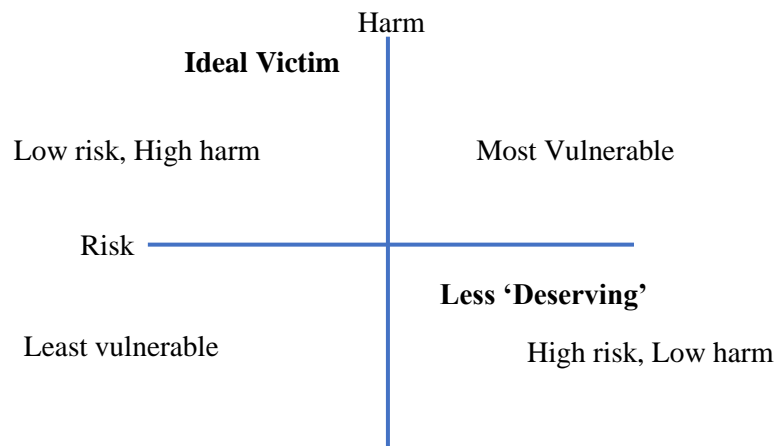
The phrase 'secondary victimisation' is traditionally used to describe the unpleasant treatment of victims by the CJS (Spalek, 2006), this can also occur if a victims experience is de-legitimatised. The eligibility of victim status is made even more complex as it is influenced by a variety of intersecting social divisions including an individual's class, race, ethnicity, gender, age and sexuality (Davies, Francis and Greer, 2017). Moreover the label of offender adds an additional complexity into the successful acquisition of the victim label. Whilst it is encouraging to see the intersections between victimhood and prisoner lives emerging within the nuanced discussions in critical victimology, the varying and complex manifestations of trauma, vulnerability and victimisation have yet to be robustly explored.

Scholars such as Sparks (1982) and Killias and Clerici (2000) have provided some movement within vulnerability scholarship, although this is largely informed by survey data. As illustrated by Sparks (1982), vulnerability denotes a stage in which a victim has no control; however they may find themselves vulnerable due to their age or physical health. Later in his analysis, Sparks (1982) stated that although vulnerability is not physical, it is influenced by those considered at risk and those who may experience harm.

Additionally, Killias and Clerici (2000) argued that although physical vulnerability naturally fuels the fear of crime, it continues to fuel stereotypical appreciation of fragility and the connections with elderly experiences of crime. However, Green (2007) argued that the concept of vulnerability had not been explored independently. In response to this he developed the 'Axis of Vulnerability'. The 'Axis of Vulnerability', draws on evidence from the criminal victimisation surveys, in an attempt to situate individuals on the axis. The axis further highlights how the risk individuals face from crime and harms relating to crime, will equate to their vulnerability of experiencing crime. For example, although an elderly woman may be at the lowest risk of

experiencing victimisation, the harm she would experience from that crime would likely be high, therefore she would situate within the *high risk, low harm* quadrant.

Figure 2.1 Axis of Vulnerability (adapted from Green 2007).



Green (2007) highlights that the criminal victimisation surveys are problematic, as the way in which they measured an individual's experience of harm was contested, as they implied that individuals (e.g. the economically marginal) are deemed less worthy of the victim label, and they are also less likely to be seen as vulnerable. This connects back with the hierarchy of victimisation that places those whose lifestyles puts them at risk (e.g. sex workers) as less deserving of victim status, due to the "social, cultural and political power" (Walklate, 2011:183) of the image of the ideal victim that remains embedded in our understandings of vulnerability. Further contentions arise for the inclusion of the trauma experiences of prisoners, as offenders are the least likely individuals to be considered vulnerable (Walklate, 2011). Our understandings of vulnerability are important, as the concept has been described as "the 'currency' that indicates the value of the victim" (Walklate, 2011:182). However, the concept of vulnerability is heavily influenced by the positivist victimological tradition. Exploring complex expressions of vulnerability within victimology could help to increase the understanding of complex manifestations of trauma and victimisation, whilst decreasing the prevalence of the positivist victimological perspective.

In the following section, I will explore the discussions of harm and the potential of a social harms approach in understanding the psychological and emotional impact of victimisation and trauma.

2.2.3 Manifestations of Trauma: Exploring Harms

In order to embrace the broad and varied adverse experiences in individual's lives, Hillyard,

Panatzis, Tombs and Gordon (2004) proposed that a social harms approach could provide an appropriate and encompassing disciplinary approach. Although this is a very fleeting and brief mention, one of the four key harms listed below (e.g. emotional and psychological) is one of the key considerations of this research that is connected with the legacy left behind by trauma.

A social harms approach they propose, should consist of four key harms;

1. Physical.
2. Financial /Economic.
3. Emotional and Psychological
4. Cultural safety (See Hillyard et al., 2009:19-20).

Within this approach, the authors argued that the initial focus is placed onto the social origins of the harms, and from there, the focus is shifted onto the structures that continue to produce and reproduce the harms. Subsequently, Hillyard et al., (2004:271) state that human agency is “highly delimited by structures, structures which must be known and of which we must provide accurate accounts”. Therefore, the social harms approach may have the potential foundation to explore the trauma already experienced by prisoners, as well as considering the structural impact of the prison environment. However, Hillyard et al., (2004:20) argue that the emotional and psychological harms are “more difficult to measure” and relate to certain causes.

Spalek (2006) acknowledges that that the concept of harm within victimology has the potential to cover deep emotional and psychological impacts such as fear, anger, self-blame and post-traumatic stress. Further, Spalek (2006) has briefly considered some of the more challenging behavioral impacts left behind by victimisation experiences. Within this helpful discussion, Spalek (2006:68) states that the process of victimisation “is often severe and multi-faceted”. Additionally, the author posits that the impact on an individual can range and vary in a multitude of ways, for example “psychologically, emotionally, behaviourally, financially and physically” (Spalek, 2006:68). Moreover, McGarry and Walklate (2015:34) argue that “being victimized disrupts an individual's sense of well-being”. Therefore the consequence of an adverse life experience can place pressure on an individual’s ability to cope, as well as resulting in common emotional reactions such as anger, shock, helplessness and the loss of emotional stability.

If we pay particular attention to the emotion of anger, this actively challenges the stereotypical expectations of victim behaviour seen within the depictions of the ideal victim. Spalek (2006:75) indicates that “emotions such as anger and bitterness may evoke a less sympathetic response from others” and that “negative responses from other people may have a negative effect upon how well the victim survives the event”. In Spalek’s (2006) discussion around anger, she suggests that this emotion is the most common male reaction to victimisation. Therefore, I now briefly turn to the theory of masculinity, in order to shed light onto the correlation between anger and male experiences of trauma.

2.2.4 Masculinities and Trauma

Tolson (1997) was one of the initial scholars to argue that masculinity was socially constructed. Within his work, Tolson advanced gender studies through his use of feminist theory and acknowledging the impact of power relations and varying social class. However, masculinity is more increasingly being referred to as masculinities within social sciences (Ellis, 2016).

As a critique of the biological and sex role theories within gender studies, Connell’s (1987; 2005) approach focuses on the impact of social structure and power. Connell (2005:77) suggests that hegemonic masculinity;

"Embodies the currently accepted answer to the problem of legitimacy of patriarchy, which guarantees the dominant position of men and the subordination of women".

In addition, Connell’s (2005) refined theorisation draws upon the disempowering aspect of male experiences of power and masculinity. Moreover, Kimmell (1994) acknowledges that men often pay a heavy price, when suppressing their emotions that may threaten their position of power. Therefore, when men suppress their weakness, their vulnerability and their emotions, they may feel significant pain from both patriarchy and masculinity (Kaufman, 1994).

The theory of hegemonic masculinity has been, at times, interpreted as an embellishment of the traditional gender role theories. For example, masculinity has been described as the social and psychological burdens on men to obey the “idealistic masculine code” (Fuller, 1996:228). The demonstration of masculinity has been likened to scripts or performances based on social, cultural and temporal factors, with variations of age, class, sexuality, ethnicity, ability and race (Butler,

1990; Butler, 1992; Connell, 1987; Hearn, 1996; Newburn and Stanko, 1994; Thurston and Beynon, 1995).

Hegemonic masculinity is "not intended as a catchall or as a prime cause; it is a means of grasping a certain dynamic within the social process" (Connell and Messerschmidt, 2005:841). Within their seminal article, Connell and Messerschmidt (2005) propose a review and reformulation of the concept of hegemonic masculinity, in order to provide a greater contribution to our understanding of gender dynamics, the local and global complexities and dynamics within masculinity studies and social embodiment. The theoretical reappraisal of this concept has led to sophistication as they reject usages "that imply a fixed character type, or an assemblage of toxic traits" (Connell and Messerschmidt, 2005:854).

Further, Connell (2005) argues that construction of masculinities is class-specific, and men are impacted by the culture of masculinities and the social structure of patriarchy. Connell (2005) implies that masculinity is developed by social practice, meaning that the relationships men conduct with one another are characterised by alliance, dominance, and elements of subordination. The dominance and subordination within masculinities have been acknowledged as socially constructed; however, they are reinforced within societal norms (Katz and Willis, 2016). In the event that a male fails to achieve dominance, Websdale (2010) indicates that this will result in a 'haunting'. This 'haunting' can impact the emotional ability of that individual, resulting in an inability to separate emotions from thoughts. Katz and Willis (2016:34) further acknowledge that "identities shift away from inclusive forms of masculinity as a result of early victimisation, trauma and interpersonal loss. This results in a downward spiral leading toward crime or hurtful behaviour".

Messerschmidt (1993:130) argued that hegemonic masculinity is "reworked and constructed in a unique way depending on the environment". Therefore the prison environment is potentially the most damaging environment to place a male who has experienced trauma. As shown in the conclusion of Katz and Willis (2016:44), "we are continuously victimizing these young men in prison settings where they have little opportunity to receive the help they need". However, the presentation of emotion in connection with male victimisation is often complex to support.

Notably, when men display defensive and aggressive behaviour traits, this has been coined as

‘exaggerated masculinity’ (Crawford and Goodey, 2000). As such, this produces complexities when attempting to recognise a man’s vulnerability. However, Goodey (2005) argues that we should analyse men’s ‘fearlessness’ and anger as their gendered expression of vulnerability; as this is masking much more deep-rooted inner complexities. Consequently, it is at times challenging to see men as victims or vulnerable, due to an overreliance on masculine bravado and fearlessness, as a way to process their feelings. This is evidenced in the work of Stanko (1994:112) whereby she argues that “being a man entails being tough, never crying when hurt, standing up for yourself, giving as good as you get, never admitting to fear, sympathy or sensitivity, and never flinching at pain or hardship”.

Furthermore, Goodey (1997:401) expressed concerns that male emotional illiteracy is damaging to themselves as individuals, as a group and as part of society. Due to the dominant stereotypical expectations of victimhood discussed earlier, it has been argued that male vulnerabilities have become one of the most neglected areas of research (Goodey, 2005). Therefore additional exploration and scholarly attention could benefit this area, and more specifically, the development of an approach to support male trauma survivors.

2.3 Exploring Trauma within Victimology

The term trauma has been used sparingly within victimological discussions. Moreover, there has been a tendency to assign the term trauma to severe experiences, such as rape, war and terrorism. However, with the addition of trauma theory, the way in which victimology uses the term trauma would be extended to cover much broader adverse life experiences. One of the first contemporary texts to feature a discussion of trauma is in McGarry and Walklate’s (2015) pivotal book entitled “Victims: Trauma, Testimony and Justice”. Within this text, the authors explore the applicability of the term within victimology, as they describe the “trauma creep” that has slowly begun to enter victimological theorising (McGarry and Walklate, 2015:44). The trauma narrative can be associated within a concept named ‘psychiatric victimology’ (Fassin and Rechtman, 2009). Although the term trauma is heavily embedded within psychological and psychiatric literature, it can be drawn upon by other disciplines to further the understanding of the long lasting impact left behind by victimisation and/or trauma experiences.

McGarry and Walklate (2015) connect the experiences of primary victimisation, secondary victimisation and indirect victimisation, as key elements to the trauma narrative. This includes the experience of victimisation, the harm/re-victimisation caused by unpleasant experiences with the CJS and/or other agencies, as well as the collective and community impact of racism, oppression, civil war and genocide. They argue that the appreciation of the three key victimisation experiences offers some movement towards understanding the multi-faceted and multi-layered impact of victimisation. However, although the individualistic nature of victimisation and trauma is recognised, the discipline of victimology has not yet embraced the much broader trauma experiences that trauma theory alludes to.

Within the American Psychiatric Association (2013:No Page) DSM-5 manual, trauma is defined as “exposure to actual or threatened death, serious injury, or sexual violence” in one (or more) of the following ways:

1. Directly experiencing the traumatic event(s);
2. Witnessing, in person, the event(s) as it occurred to others;
3. Learning that the traumatic event(s) occurred to a close family member or close friend; in cases of actual or threatened death of a family member or friend, the event(s) must have been violent or accidental;
4. Experiencing repeated or extreme exposure to aversive details of the traumatic event(s), (e.g., first responders collecting human remains; police officers repeatedly exposed to details of child abuse”).

However, much more nuanced trauma theory has emerged as a critique of the medicalised model of psychology and trauma. This much more holistic and person-centred conceptualisation of trauma is designed to recognise and support trauma, rather than treat it, which I argue can substantially advance victimology’s current understanding of trauma. The literature within this conceptualisation is US based (Covington, 2015b; Harris and Fallot, 2001), as such, there is a definitive paucity in trauma scholarship within the UK context, which this research can contribute to.

As such, Covington (2015:2) indicates that often trauma is defined as “any event that overwhelms a person’s capacity for positive coping”. Substance Abuse and Mental Health Services (SAMSHA) (2014) further this understanding, as they argue that trauma can be singular, multiple or

compounding, but this event or circumstance will likely impact an individual's mental, physical, emotional and/or social well-being. Definitions like this extend our understanding of trauma onto a much broader scale than available within the victimological use of trauma. As Sweeney et al., (2016:175) highlight, traumas can include varying experiences such as rape, domestic violence, homicide or war, and it can even cover experiences such as "abuse, neglect, abandonment and family separation".

Fallot and Harris (2009) have developed eight key points that outline why it is important to recognise and respond to the impact of trauma.

1. **Trauma is pervasive:** The experience of trauma is not rare, in fact it is part of our social reality.
2. **The impact of trauma is broad:** Experiences of trauma can increase the risk of a vast range of vulnerabilities including mental health issues, PTSD, hostility, anxiety, substance abuse, depression, interpersonal issues, eating disorders and suicidality. Often trauma impacts in such a way that is not obviously connected with trauma, therefore it is important to recognise the broad potential impact to stress the less evident links between trauma and behaviour.
3. **Trauma can be life-altering:** This is particularly the case in children where the trauma has been inflicted by an individual in the caretaker role. Survivors tend to blame themselves and see the world as unsafe, this is where the trauma experience shapes an individual's vision of the world.
4. **Violent trauma can be self-perpetuating:** Sometimes, victims of violence can have an increased potential in becoming perpetrators. Prisons can often perpetuate trauma rather than eliminate it.
5. **Trauma is insidious:** Individuals who are marginalised e.g. experiencing poverty, homelessness or have mental health/substance misuse issues are at a greater risk of victimisation.
6. **Trauma effects relationships:** Individuals who have experienced trauma may struggle to effectively engage with supportive services, as they are suspicious and often lack safety and trust.

7. **Trauma can occur in the context of human services:** Coercive practices and environments that trigger trauma-related reactions are common in human services.
8. **Trauma effects staff working in human services:** When staff are asked to do more for less, this may overwhelm their coping ability. Additionally, working with trauma survivors can result in staff burnouts and vicarious experiences of trauma are common, without effective support.

In the last decade, policy and practice across a number of sectors and community support services, have attempted to recognise the range of needs of the individuals accessing their services. A series of labels have been applied to this group including, M&C needs (Fitzpatrick et al., 2011). Boobis (2016:5) stated that in order for an individual to be categorised as having M&C needs, that individual will have two or more needs specifically linked to issues such as, “homelessness, mental health problems, substance or alcohol misuse problems and history of offending”. In addition, there has been growing scholarly focus that has acknowledged the relationship between experiencing trauma and the utility of coping strategies such as a self-harm and substance misuse issues (Agorastos et al., 2014; Ardino, 2012; Hamilton et al., 2011; Helfrich et al., 2011; Kim and Ford 2006; Kim et al., 2010; Maté, 2012; Yehuda et al., 2001).

To explore the relationship between Adverse Childhood Experiences (ACE), adult health problems and social disadvantage, Felitti et al., (1998) conducted the seminal ACE longitudinal study in America. This is the largest study, with participant samples of over 17,000 individuals, who were asked about childhood trauma experiences. An integral finding of this study outlined that 90% of individuals accessing mental health treatment, had experienced previous trauma. In addition, individuals who had experienced ACE were more likely to develop adult health problems (including anti-social behaviour, issues relating to substance misuse, homelessness and mental health), as a result of the maladaptive coping strategies they adopted, in order to deal with their experiences of previous trauma (Felitti, 2002).

Therefore with the aim to support these varying, complex and multi-faceted issues, Harris and Fallot (2001) and Fallot and Harris (2009) posit that human services working with individuals should operate within a trauma-informed approach. More recently, Covington (2015b) has called

for a culture change across the UK prison service, in order to become trauma-informed. A trauma-informed service is to incorporate an understanding of the broad and pervasive impact of previous trauma (SAMSHA, 2014). They are designed to reduce the likelihood of re-traumatising individuals, as well as supporting the needs of their staff (Fallot and Harris, 2009).

The purpose of a trauma-informed approach is not to treat or diagnose individuals, but to better support and understand the manifestations of previous trauma. Alternative to the trauma-informed approach is a ‘trauma specific service’, which aims to address the trauma, in order to facilitate trauma recovery (SAMSHA, 2014). This can be used in addition to the trauma-informed approach outlined above. However, my focus is on the implementation potential of a trauma-informed approach to support the need of trauma survivors in prison. I will cover Covington’s trauma-informed penal approach in more detail in the following chapter. However here, I will briefly cover some of the gender specific findings of her work. Covington (2015a; 2015b) acknowledges that all children face equal risk of experiencing trauma, either in the form of physical and or sexual abuse from an individual they know or family member. However, in adolescence and adulthood, she argues that the dynamics change, as women are most at risk from a partner. Covington (2015b:4) articulates that the biggest threat to women comes from the individual “to whom she is saying I love you”, whereas adolescent and adult men are more at risk from enemies or strangers. This she argues is one of the many reasons for an increased risk in women’s mental health issues.

Therefore in order to attend to the varying and complex manifestations of trauma within the male and female populations, Covington (2015b) argues that gender-responsive policies and practices are required, in order to respond to trauma survivors’ multi-faceted needs. Within victimology, there is room for additional scrutiny into the long lasting legacy left behind by trauma. It would seem that a trauma-informed approach within victimology could shed light onto some of the challenging and complex manifestations of previous trauma. To expose these manifestations in more detail within victimology could also counteract the dominance of the ideal victim. Therefore there appears to be a lot of worth in combining critical victimological theorising with trauma theory.

2.4 Conclusion

This chapter has laid out the core theoretical foundation of the thesis. I have demonstrated the potential of critical victimology, to explore the trauma experiences of men and women in prison. The review has indicated that critical victimology certainly has the potential to include such experiences, however I have argued that a multi-disciplinary approach that includes trauma theory from Covington (2015a; 2015b) and Harris and Falot (2001) could lead to a much broader understanding. The literature review indicated that the overwhelming dominance of positivist approaches has subsequently halted progression within victimology, as very little scholarship is available in order to counteract the over simplistic considerations of trauma experiences. However, with the theoretical foundation of critical victimology and its roots within feminist traditions, this also compliments the epistemological underpinnings of the trauma-informed scholarship. The combination of the two scholarships would better enable victimology to be inclusive and innovative in its critical thinking of what we understand about the long lasting legacy of trauma, in order to shed light on the multi-faceted and often complex manifestations associated.

My literature review emphasises the movements and momentum within victimology to begin to unpick some of the relevant trauma literature (Katz and Willis, 2016; McGarry and Walklate, 2015). More recently, key critical victimologists have called for the discipline of victimology to recognise “manifold forms of victims and victimization” in order to “critically deconstruct victimhood...to upend these conceptions (positivist victimology) and demonstrate the complexity of behaviour attributed to victim status” (Spencer and Walklate, 2016:xvii). Therefore, the original contribution of this chapter, specifically the amalgamation of critical victimological theorising and trauma theory, attends to the over simplistic and dominant positivist assumptions of victimhood and trauma, further advancing the victimological imagination into a multi-disciplinary and forward-thinking progression.

With the multi-disciplinary approach in mind, I now move onto the prison specific literature review. However, the thread of critical victimology compliments the prison scholarship in two key ways. First, within ‘Nils Criminology’ (Christie, 1981; Christie, 1986; Wagner, 2015) and his contribution within victimological and prison theorizing, that I briefly discussed in Chapter One; I

argue that the notion of the ideal victim feeds into prison policy, as well society's punitive nature and thus, it is difficult to consider an individual in prison as a trauma survivor, with complex vulnerabilities. This has resulted in a lack of response and academic attention, until the work of Covington and *One Small thing* in 2015 that I discuss in the subsequent chapter. Second, I argue that the notion of the ideal victim permeates our understanding of victimisation and trauma so substantially that the complex manifestations of trauma are often overlooked as being 'undeserving' or 'refractory' behaviour. All of which results in the paucity of understanding trauma survivors' experience of prison, as well as the inability to recognise, respond and support their needs effectively.

Therefore the critical victimological standpoint, can also feed into the prison literature, due to its interest in the relationships between context and structure, which produces the victims we see, as well as those who remain hidden (McGarry and Walklate, 2015). Notably, the structure of the prison environment can reinforce and re-trigger an individual's experience of trauma (Covington, 2015b), thus the pains of imprisonment will likely be experienced more substantially by a trauma survivor in prison. This also means that due to a trauma survivors presenting behaviour within prison, we are less likely to see them as vulnerable and we are more likely to assume that their behaviour is disruptive and refractory. With this in mind, I now move on to analyse some of the key prison policies, prison ministers and prison theorists that can help us to understand how the prison service responds to the needs of trauma survivors.

Chapter Three

Rehabilitating Trauma Survivors: The Role of the UK Prison Service

3.1 Introduction

This chapter will examine some of the key prison scholarship and evolving penal policy, to consider the ways in which the UK prison service recognises and responds to the needs of prisoners who have experienced previous trauma. First, I will attend to the complex journey of penal reform, where I will explore some of the critical political changes that have resulted in the evolving progression (and sometimes regression) towards providing a prison estate that is safe and fit for purpose. The previous chapter indicated that the experience of trauma and victimisation plays a key role in the way that an individual copes and interacts with their world (Harris and Fallot, 2001). Therefore, I will explore the manifestations of previous trauma and present them within the context of the prison, to demonstrate the emerging need across both the male and female prisoner populations.

In addition, this chapter will draw upon the scholarship of key authors, including Sykes (1958) Crewe (2011a; 2015) and Crewe et al., (2017), to acknowledge the psychologically painful impact of imprisonment. Further, I will utilise this body of work to highlight how prison can exacerbate experiences of previous trauma, to explore how a trauma survivor may feel the pains of imprisonment more substantially. Following on from this, I will explore the role of the prison officer and the importance of staff-prisoner relationships in the overall prison experience. The final section of this chapter will be dedicated to considering the role of TIP (Covington, 2015a; 2015b) and how this nuanced penal approach harbours the potential to support the needs of both prisoners as well as prison staff.

3.2 Thinking Critically about ‘Prison Reform’

I will demonstrate throughout my analysis that the last 20 years of prison policy and penal reform have been impacted by contradictory and inconsistent political changes. Foucault stated that we live in a punitive society, whereby confinement has become the “primary punitive tactic

of modernity” (cited in Carney, 2015:231) and this has consequently affected the lack of value attached to the long-term impact of rehabilitation. Further, Crewe (2015:50) notes that “retributive austerity, risk management and low-cost containment” have overshadowed the rehabilitation of prisoners. As such, the prison system has been referred to as a “sophisticated sausage machine” (Caird, 1974:9) that consistently takes in and churns out the “deprived, the disturbed, the dispossessed, the abused and the addicted” (Priestley and Vanstone, 2010:221). Despite many politicians and academics alike making reference to the traumatic lives and experiences of prisoners, as a society, we continue to punish punitively, without rehabilitation emerging as the priority.

The lack of rehabilitative success of the prison service is evident in the current rate of reoffending, this indicates that on average 45% of prisoners are reoffending, and when prisoners are serving short sentences (12 months or under) the reoffending rate rises to 59% (Ministry of Justice, 2016b). Equally, short sentences have received criticism from academics, practitioners, prison officials and former prisoners, who all ask, what is the purpose and expectation of this sentence? as they offer too brief a time in prison to promote positive and meaningful behavioural change (Armstrong and Weaver, 2013; Stewart, 2008; Treblicock, 2011).

Overall, the prison reform rhetoric has continued to evolve in both innovative, yet inconsistent ways, due to changing leaders, varying political parties that feed into the societal opinions of imprisonment. As explored in Chapter Two, I have previously argued that the societal assumption of the ‘ideal victim’, has been influenced by a positivist victimological stance, resulting in an over simplistic and stereotypical understanding of victimisation and trauma. This over simplistic distinction between innocent and guilty further feeds into the societal response to punish ‘guilty’ offenders, without considering the plethora and multi-faceted needs of that individual. This is not an excuse for their offending behaviour. However, if society were aware of the realities and lives of offenders this may perhaps influence their view with regards to what they expect the imprisonment to achieve.

An integral influence on prison reform, is the individual that holds the ministerial role of Lord Chancellor and Secretary of State for Justice (LCSOSFJ) who is appointed by the Prime Minister to oversee all Ministry of Justice (MOJ) business. The role was developed as a replacement of the Secretary of State for Constitutional Affairs in 2007, which then became the role of LCSOSFJ. The role holder has responsibilities that include (but are not restricted to) making improvements to the CJS, as well as the prison system. This role requires the individuals to lead on prison reform, MOJ transformation and spending review settlement (Ministry of Justice, 2016c). The LCSOSFJ is a highly influential member of parliament, who is responsible for some of the most pivotal amendments and movements across the prison estate and rehabilitation. Further, the role of LCSOSFJ was updated in 2016, to include much more specific responsibilities, such as reviewing the overall performance of prisons and to make strategic decisions on resources and priorities (Ministry of Justice, 2016c). In the subsequent section, I will acknowledge the role of the LCSOSFJ as one of the driving forces behind penal reform as well as key changes within policy and practice.

In order to introduce the varying contemporary movements within prison policy rhetoric, I begin by briefly considering the history of penal reform. Following this, I present three key phases of contemporary prison policy rhetoric. This emerged from a policy analysis from the early 1990's- present day. First, 'Phase 1: Pro-Containment' refers to the increase of the prison population and the emphasis placed on punishment, in order to appear 'tough on crime'. Second, 'Phase 2: Breaking the Cycle, Pro-Rehabilitation?' refers to the increased focus on rehabilitative strategies. However, this phase also featured changes from a certain LCSOSFJ who was responsible for a regression away from the rehabilitative rhetoric. Finally, 'Phase 3: Penal Accountability' refers to the continued movement towards rehabilitation. Further, this era captures the more recent proposals to measure and publicly display the effectiveness of prisons in rehabilitating prisoners. All of the phases will be underpinned by an exploration of the impact of new managerialism and the movements towards creating levels of transparency, to demonstrate the accountability and the role of the prison service, as well as the prisons' effectiveness in the rehabilitation of prisoners. In the next section, I will highlight some of the

key prison policies, government changes and influential ministerial roles from the 1990's, to demonstrate the progress of penal reform and the challenges that have emerged along the way.

3.2.1 Setting the Scene: A brief history of Penal Reform

Towards the end of the eighteenth century to the late nineteenth century, the brutality of execution and transportation was dwindling. Around this time, prisons were much more closely connected with the community. Gaols/houses of correction were classed as holding places for offenders awaiting either their execution or transportation. For example, Millbank Penitentiary and the Pentonville Model (based on the panoptican prison design⁸) served the above purpose. However the isolating regimes were having an impact on the mental health of the prisoners, leading to public disapproval (McConville, 1981). The prisons we had were described as places of neglect, noise, smell and disorder, where the distinction between prisoners and prison staff was not always clear (McGowen, 1998). A period of reform emerged that continued into the nineteenth century whereby the conditions of prisons became a discussion point within parliament, newspapers and various readings including the autobiographies of prisoners and prison staff (Jewkes and Johnston, 2011). Religious groups such as Evangelicals and Quakers were influential in prison reform through discussions surrounding redemption (The Howard League for Penal Reform, 2018). The government did not intervene in the management of prisons until the beginning of the nineteenth century. However, there was growing legislative movement through the emergence of The Prison Act 1865. This supported the development of prison regime, to abolish physical hard labour in favour of purposeful and productive activity (Jewkes and Johnston, 2011). Towards the end of the nineteenth century, the prison was the most popular form of punishment. The change of punishment and reform has been examined through a revisionist historical perspective, in order to explore how prisons, attempt to regulate the behaviour of prisoners in relation to power, marginalisation and control (Foucault, 1977; Melossi and Pavarini, 1981). By the nineteenth century, prisons had disappeared from the public's viewpoint and in consequence it was "pushed behind the scenes of the civilised world" (Pratt, 2002:35).

⁸ See Semple (1993) for a full and critical exploration of Jeremy Bentham's Panoptican prison design.

Over the years prisons have evolved architecturally and philosophically. They began to shift from being austere places "sufficient to inspire remorse and trepidation" (Pratt, 2002:44) towards purposeful environments where offenders can be rehabilitated and "lead better, more useful lives" (HMCIP, 2017:8). In 1991 the Woolf report was published following an examination of the conditions of the UK's prisons (Prison Reform Trust, 1991). The report outlined 12 major recommendations and 204 proposals, in order to shape prison reform and support the improvement of the conditions of UK prisons. The report was commissioned following a disturbance at a male prison in Manchester, organised by prisoners who deemed the conditions of Strangeways as unacceptable and inhumane (Prison Reform Trust, 1991). Despite these recommendations, in 2018, discussions still arise around poor sanitation, a lack of care for prisoners and conditions in prisons that are fundamentally unacceptable, including issues with overcrowding and declining levels of safety (Prison Reform Trust, 2018). Two years after the publication of the Woolf report Michael Howard delivered his infamous 'prison works' speech, contradicting the evidence presented to parliament. This is an example of the inconsistency within policy movements, as well as the stagnation within penal reform. Below, I begin a discussion around some of the contemporary prison policy rhetoric, to explore the different ministerial roles and reform directions that have occurred from the early 1990's to present day.

3.2.2 Phase 1: Pro-Containment

To begin the contemporary prison policy discussion, I refer back to the then Shadow Home Secretary, Tony Blair (1993a) who delivered the New Labour soundbite "tough on crime, tough on the underlying causes of crime". In 1993, a shift in emphasis was initiated towards a "tougher, more populist policy" (Garland, 2001:113). This subsequently resulted in a landslide majority win in the General Election in 1997. This iconic slogan used by the Labour Party, demonstrated a new recognition, leaning towards the value of rehabilitation as well as punishment. Prior to the majority win, Blair (1993b) outlined a vision towards extending the understanding of imprisonment, this emphasised the importance of ensuring that the best chance of rehabilitation is given to each prisoner (The Prison Reform Trust, 1997). In line with this move, in 1993 the Home Secretary at the time, Michael Howard, infamously stated

that success of the justice system should not be judged by a fall in prisoner numbers, because 'prison works' (Grimwood and Berman, 2012).

Following on from this, an overhaul of penal policy ensued to include new sentencing acts such as the Criminal Sentences Act 1997, the Crime and Disorder Act 1998, the Criminal Justice Act 2003, and the Criminal Justice and Immigration Act 2008. These new acts resulted in an increase in sentences, sentence length and this infamously led to the vast increase of the prison population, through various legislation including the indeterminate sentence for public protection (IPP) (Carter, 2014). The IPP sentences were brought in under the dangerousness provisions of the Criminal Justice Act 2003. This enabled courts to impose a minimum tariff, to imprison an individual indefinitely, until it could be demonstrated that they were no longer a risk to the public (Crowhurst and Harwich, 2016). However, once labelled as dangerous by courts, it was inherently difficult to demonstrate a reduction of risk within a custodial setting, with limited offending behaviour programmes. What followed was an increase in the use of prison and a rising prison population, which subsequently led to prison overcrowding. Prison overcrowding has been likened to "cancer eating at the ability of the prison service to deliver", and it was identified as a leading factor in prison riots and disturbances (Woolf, 2002: no page).

The number of individuals in prison has risen substantially, as the increase in sentence lengths became a "comfort blanket for every government of the last 20 years" (Prison Reform Trust, 2015b). Although the changes in policy and rhetoric have contributed significantly towards being 'tough on crime', much less emphasis has been placed on being 'tough on the causes of crime' and the rehabilitation of offenders. In an attempt to rectify rehabilitation reforms, the then New Labour Prime Minister Tony Blair appointed Jack Straw as the Home Secretary and in 1999, the 3 year £250 million Home Office 'Crime Reduction Programme' was announced (Colledge, Collier and Brand, 1999). The 'Crime Reduction Programme' aimed to cover five broad themes and one of those was to work with offenders to stop reoffending, through various rehabilitation schemes (Colledge, Collier and Brand, 1999). The schemes aimed to offer better drug treatment, as well as education and/or training, alongside additional support to help with housing and employment upon

release. However, the individuals who continued to reoffend could expect to face progressively harsher punishments from judges. This is indicative of the punitive stance and a lack of consideration of the multi-faceted, complex needs of offenders and offending.

Attempts to measure the effectiveness of prisons resulted in the introduction of managerialism within the prison system. This 'performance culture' was introduced into the UK prison service in 1984, and since then, there has been an increase of managerial buzzwords such as Key Performance Indicators (KPI's) and performance monitoring audits since 1993 (Scott and Flynn, 2014). The inclusion of KPI's aimed to provide transparency, as well as to produce tangible evidence of how prisons were providing value for money, to explore the limitations of the prisons and to examine the quality of the regimes (Easton, 2011). Nuanced arguments surrounding new managerialism suggest that the focus is shifting away from the recognition of prisoners as people in need of rehabilitation, and instead it is shifting towards an environment of crime control, risk management and cost effectiveness (Easton, 2011). Some critics argue that a contradiction emerges between "managerial means and humanitarian ends, with the former always smothering the latter and lapsing into faceless, instrumental bureaucracy" (Crewe, 2009:26).

This has had a substantial impact on policies and procedures and has resulted in a 'new public managerialism', that has resulted in significant changes to the privatisation and competitive nature of the prison service, in the governments quest for cost-effectiveness, efficiency and value for money. The emergence of managerialism has been described by Liebling (2004) as 'effectiveness-plus' and 'neo-rehabilitation'. The first hones in on the quest for effectiveness and efficiency within the prison system, through re-legitimizing the moral principles. The second refers to versions of rehabilitation that reflect upon the neo-liberal ideologies that have become dominant in the way that we view rehabilitation as not to be imposed, rather, the offender should pursue and engage willingly (Crewe, 2009). This is where the coercive nature of rehabilitation emerges.

One of the main instigators in the rising prison population was the New Labour influence on prison policy. The Former Home Secretary Michael Howard (cited in Burnett and Maruna, 2004) argued that 'prison works' and harsher sentences were still essential to deter offenders. However, Burnett and Maruna (2004:392) identified that Howard had utilised research evidence that had been

misinterpreted, due to his “selective reading”. The research that was used indicated that avoidance of prison was the main motivation behind an individual’s reason not to reoffend upon release (Burnett, 1992). However, additional findings from this study highlighted that 62% of those prisoners had admitted to reoffending within a 2-year window of that research project. The selective elimination of this crucial detail resulted in the importance of deterrence, overshadowing the complexity of the issues that compound the lives of offenders and their reoffending. When the government released their 2002 ‘Protecting the Public’ White Paper, the movement towards offenders as others and dangerous dominated the reform aspect of imprisonment, towards containment to keep such individuals away from the public for longer (Home Office, 2002). This generated the need to increase prison capacity and move towards privatisation options, in order to cost-effectively house the rising amount of individuals being sentenced to imprisonment.

Alternatively, humanitarian practitioners and penologists have attempted to counteract some of the impacts of the prison crisis, and they have attempted to respond to some of the dehumanising features of prison managerialism. This has been through the endorsement of decency, to promote moral performance, as well as human rights (Scott and Flynn, 2014). Martin Narey (HM Prison Service Director General 1999-2003) and his successor Phil Weatley (2003-2010) originally introduced the (still operational) ‘Decency’ agenda. This agenda was intended to safeguard prisoners’ right to be treated equally and fairly, to provide appropriate support, to prioritise prisoner concerns and to protect prisoners from harm. This was in order to provide prisoners with a rehabilitative regime that included variety and to ensure that the treatment of prisoners was both fair and consistent (House of Commons Justice Committee, 2009). However, Scott and Flynn (2014) argued that this agenda failed to provide a transparent definition, or to focus on specific experiences of prisoners within the service.

In 2004, the government announced the development of the National Offender Management Service (NOMS), and this was a commissioning body for all criminal justice services, such as the prisons, probation and sentencing guidelines (Blunkett, 2004; Bennett, Crewe and Wahidin, 2008). The role of NOMS was set to improve rehabilitation efficiency and effectiveness across services. The government’s 2006 ‘Five Year Strategy for Protecting the Public and Reducing Reoffending’, suggested that prison should be used for only the most violent, dangerous and seriously persistent

offenders and the remaining offenders could benefit from community alternatives to prison (Bennett, Crewe and Wahidin, 2008). However, vulnerable and non-violent offenders continued to be placed in prison custody. This is evident if we consider our female prisoner population which comprises of largely non-violent offenders (Prison Reform Trust, 2017a).

Following the death of six women at HMP Styal, there was a sense of urgency to address and support the specific rehabilitation needs of women in prison (Barberet, 2014). In 2007, the seminal Corston Report published 43 recommendations to improve the approaches, services and interventions for women within prison and those at risk of offending (Corston, 2007). It provided an opportunity for the government to deliberate blueprint reforms for the female prison estate and to consider the greater use of alternative cost-effective community centres that can promote long-term behaviour change (Hedderman, 2008; Liebling, 2008). Although this was specific to the female prison population, small therapeutic facilities have also indicated positive results for both men and women (Hedderman, 2008; Wilson and McCabe, 2002). Moreover, what this report outlined was the prevalence of traumatic life experiences of women prior to custody and offending. Following on from one particular recommendation, the National Framework for Women (Corston, 2007:16) was to include two new reducing re-offending pathways, to include abuse and sex work as important barriers. This was the first policy movement to address and support the trauma needs of prisoners.

In the following year (2008), the prison estate and the justice system were amalgamated into the MOJ in order to get a better grasp on the growing issues within the prison estate and place emphasis onto stopping the “cycle of re-offending” (Carter, 2014:93). The new ministerial department was to be headed by the role of the LCSOSFJ. The first individual to be appointed as LCSOSFJ was Jack Straw (2007-2010), and during this role, he proposed to build ‘titan prisons’ that could hold 2,500 individuals. This was an initial response to address the rising prison population and the increasing financial burden (Prison Reform Trust, 2008). However, this did not materialise due to a changing government, financial implications and an array of criminal justice organisations strongly opposing the idea (Collins, 2009). The movement towards the prioritisation of building large facilities to house a substantial amount of prisoners, further highlighted the policy

focus on “efficiency rather than effectiveness” (Prison Reform Trust, 2008:4), as well as the ignorance of research and reports indicating the worth of smaller rehabilitation prisons.

3.2.3 Phase 2: Breaking the Cycle, Pro-Rehabilitation?

The Labour Party were criticised by the former Shadow Justice Secretary Sadiq Khan, who stated that seeing rehabilitation as being soft on crime was a misconception, as it should be viewed as a necessary measure to effectively reduce reoffending and penal expenditure (Travis, 2011). When the Labour Party lost the general election in 2010, a Coalition government emerged between the Conservative Party and the Liberal Democrats (Ministry of Justice 2015d). The green paper developed by the then LCSOSFJ Ken Clarke (2010-2012), ‘Breaking the Cycle’, acknowledged the lack of emphasis placed onto tackling reoffending in recent reform attempts. The report outlined that the cost of reoffending by individuals who complete short sentences alone, was £7-10 billion a year (Ministry of Justice 2010:6). Therefore, the new initiative in the paper aimed to tackle the underlying causes of crime such as substance dependency, mental health and poor education. Clarke (2010) noted that prisons lacked purposeful regimes, and there was a need for prisoners to engage in their rehabilitation and meaningful work activities. Additionally, the report led to the implementation of pilot drug recovery wings within prisons, to deliver specialist interventions aimed at providing treatment and to encourage the continuity of care in-between prisons and community rehabilitation centres.

One of the major contributions of this paper was the introduction of the ‘Payment by Results’ model. This model would incentivise the reduction in re-offending for organisations who could deliver results such as an “offender stopping taking drugs, gaining and sustaining employment as well as rehabilitation” (Ministry of Justice 2010:42). The Prison Reform Trust (2011:3) reacted to this by reminding the government that offending behaviour and the associated root causes are complex. Despite this green paper indicating a promising attempt to provide transparency, the outcomes within the paper do not match the realities of working with individuals with M&C needs. Many criminal justice organisations work on additional outcomes such as the improvement in an individual’s mental health, the reduction of substance use and an individual having access to stable housing. Likewise, Blythe and Solomon (2009) argued that years of criminological research have

outlined many factors that determine an individual's likelihood of desisting from crime. However, the complexities that underlie offending behaviour are only very loosely explored in penal policy. Instead, in Ken Clarke's comprehensive spending review, he stated that there would be a 23% cut to the £9bn prison budget, and to achieve this, he would aim to reduce the prison populations; however over the following four years, he also acknowledged that there may be a 14-15,000 staff reduction across criminal justice system staff (Travis and Hirsch, 2010).

As a result of the 'Payment by Results' model, 14 prisons have been privatised and are being managed by services such as G4S Justice Services, Serco Custodial Services and Sodexo Justice Services (Grimwood, 2014). The 'Payment by Results' model has resulted in opportunity for private and voluntary sectors to have a greater involvement in the rehabilitation of offenders but more significantly, there is an economical objective. However, the privatisation of prisons has raised ethical questions about the role of prison in society, as it is not a solution to the issues within the failing prison system (Prison Reform Trust, 2011). The impact of new managerialism has resulted in a shift towards delivering value for money, which Easton (2011) has argued is having an impact on the conditions of prisons.

When Chris Grayling was appointed as LCSOSFJ (2012-2015), he announced that there would be a 'rehabilitation revolution' (Prison Reform Trust, 2015a). In a speech, Grayling outlined common elements within the backgrounds of offenders;

“Broken homes, anti-social behaviour, drug and alcohol misuse, generational worklessness, violent and abusive relationships, childhoods spent in care, mental illness, educational failure ... All elements that are so very common in the backgrounds of so many of our offenders” (Ministry of Justice, 2012).

This recognition of offender lives appeared a promising movement towards the consideration of the complexities underpinning offending behaviour that had been previously overlooked. However, the rehabilitation rhetoric lost momentum when Grayling controversially acclaimed that 'prison works', as he called for prisons to become cheaper, but not smaller or less used, despite his departments' findings of the success of community punishments outperforming short sentences (Harley 2015; Ministry of Justice, 2012). This appointment of LCSOSFJ

facilitated a regression to 'Phase 1: pro-containment', with the inclusion of some of the pro-rehabilitation movements emerging from the 'Breaking the Cycle' green paper.

More specifically for women in prison, in 2013 there was another call for specialised rehabilitation services for women in prison to improve support for issues such as substance misuse, mental health and domestic violence (Ministry of Justice, 2013). Many of the penal policies have incorporated some glimmers of innovation and nuanced rehabilitative ideas. However, very few are substantiated with a robust response and/or dedicated implementation and/or resource strategy, in order to successfully embed the plans within practice.

3.2.4 Phase 3: Penal Accountability

Although the transparency of prison effectiveness has been discussed within prison policy in the former phases, it was not until 2015, that LCSOSFJ Michael Gove (2015-2016) called for the development of prison league tables in order to establish public penal scrutiny and the increased transparency of each prison (Ministry of Justice, 2016a). This was the first attempt to produce tangible and public evidence of each prisons rehabilitative performance capacity. The penal accountability phase, placed emphasis onto some of the key rehabilitation needs of prisoners, as well as highlighting potential strategies to develop the prisons rehabilitation capacity.

In 2015, when the Conservative Party won the general election, Gove (2015) highlighted the limitations of rehabilitation within the prisons, including the rising issues related to NPS use and increased levels of violence. In a speech delivered to the Governing Governor's forum, Gove outlined plans to reform the prisons by challenging bureaucracy to enable "governors to govern", as "autonomy generates innovation" (Ministry of Justice, 2016b). This speech highlighted the LCSOSFJ focus on the importance of providing purposeful activity for prisoners, as well as recognising the value in establishing a decent, humane and enabling environment for prisoners, where supporting the complex and multifaceted needs of prisoners was at the forefront of the debate. Moreover, this innovative speech indicated a power shift away from the politicians who are detached from the world of prisons, and instead, placing the authority into the hands of the governors, who should be best placed to know both the needs of their staff and the needs of their prisoner population.

The reforms outlined originally by Gove (2016), have been introduced in 10 priority prison sites, with the aim to roll out the new reforms to the rest of the prison estate by April 2017 (Ministry of Justice, 2016c). The Governing Governor, will have greater authority to control service provision within their prison, in order to effectively meet the needs of the prisoners in their care. In addition, governors should ensure that each prisoner has a dedicated officer for one-to one working, with the aim to increase the effectiveness in staff interventions across the prison service. This emphasised a shift onto the importance of positive staff-prisoner relationships, in providing and maintaining a decent approach in prisoner management.

Despite the attempts to measure prison efficiency and productivity, there is still very little transparency, as there is minimal information available to indicate how prisons are providing both value for money and quality rehabilitation. As the measures of performance fail to utilise reoffending data, the most important elements of reform are not yet being effectively measured (Crowhurst and Harwich, 2016). Whilst there have been significant savings produced by changes in parliament that appear to indicate some financial success this has been consistently overshadowed by the deterioration of a safe environment for both prisoners and staff. The state of the prison service now features increased levels of violence, overcrowding and mental health issues, as well increasingly high levels of self-harm and suicide rates (Ministry of Justice 2015b; Ministry of Justice 2016c; Prison Reform Trust, 2017a). The prison charity Reform argue that the mechanisms for prison performance management, such as the inspections carried out by Her Majesty's Chief Inspector of Prisons (HMCIP) and the annual prison rating published by NOMS, are “failing to measure the outcomes at an institutional level” (Crowhurst and Harwich, 2016:7).

In addition, the former LCSOSFJ Michael Gove (2015-2016) argued that the MOJ is failing to utilise the data that they have collected in order to effectively mould policy (Gove, 2016). Yet, without meaningful performance indicators, policy makers, academics and practitioners are unable to grasp the current situation within the prison system, or how best to improve it. In order to establish a thorough prison performance evaluation, the metrics must be meaningful to the prison, the staff and the prisoners. Drawing on the measurement of prison results identified by Burt (1981) and Rogge et al (2015), Crowhurst and Harwich (2016:66) argue that when attempting to measure

prison productivity, the current metrics that are used fall short, and it is therefore not possible to “systematically highlight examples of best practice and as a result better identify strategies for reform”. Therefore, better performance management strategies are welcomed.

With regard to the functionality of prison, some of the most recent LCSOSFJ (2015-2017) ministers and government officials have acknowledged that prison is not conducive to rehabilitating the individuals housed. This can be seen within a speech made by the former Prime Minister David Cameron, as he acknowledged;

“Cutting reoffending is just a pipe dream unless we truly understand the turmoil and the trauma that define the lives of so many who have ended up in prison” (Ministry of Justice, 2016a).

This was one of the first political public recognitions of the term trauma, this hinted at the life-long impact that trauma can have on lives of prisoners. Although rehabilitation has always been a contemporary feature within political speeches, this speech demonstrated the depth of harm, experienced within the lives of prisoners.

The range of complex issues within the prison estate has been noted within a selection of the LCSOSFJ speeches, policy papers and HMCIP findings. Most recently, this includes the decrease in prison safety for both prison staff and prisoners due to the increase in violence NPS use and self-harm (HMCIP, 2016). However, due to the limited and ineffective action taken to improve levels of safety within prisons, up to 10,000 prison officers across the UK prison service, took part in a mass protest. The strike came to an abrupt end, after the LCSOSFJ Elizabeth Truss (2016-2017) sought to bring legal action upon prison officers engaging in the protests (Travis, 2016) in doing so Truss silenced them, instead of attending to their concerns.

The White Paper published by Truss entitled ‘Prison Safety and Reform’ attempted to address some of the continuing issues surrounding a lack of purposeful activity and problems arising from staff shortages (Ministry of Justice, 2016c). However Truss, identified the concerns within prisons as a matter related to a lack of discipline, as such, she suggested that an increase in staff from the

armed forces could support prison reform (Ministry of Justice, 2016c). However, the recruitment drive for a new graduate scheme and the campaign to recruit former armed forces may not be an adequate gesture for the remaining prison officer population. The strike has highlighted the critical state of the unrest and disorder within the prison service, but also demonstrated the low levels of satisfaction amongst prison officers.

The dire state of the prison service and prison reform is a consequence of the many inconsistent and (at times) contradictory strategies applied by each changing LCSOSFJ. Often the approaches implemented mimic failed attempts from former predecessors of the role, and despite the varying research and reports published suggesting rehabilitation and decency is integral there has never been enough time, dedication or resources applied to new policy driven strategies. The frequency in changing roles of LCSOSFJ further adds to the chaotic and fluctuating nature of penal policy and ultimately the precarious journey towards prison reform.

To add to the consistent changes, in April 2017 Her Majesty's Prison and Probation Service (HMPPS) officially replaced NOMS. The new HMPPS will take full responsibility for the operational management of offending in prison and in the community, to lead on increasing the safety and security in prisons. In addition, the HMPPS will work to provide greater clarity, in the operationalisation and management of the prisons, whilst further advancing the career prospects of prison staff, through leadership and promotion schemes, in order to increase staff morale and pride in their work. This restructure emerged from the 'Prison Safety and Reform' white paper, whereby plans were in place to make prisons a place of reform, for the first time, within the Prison and Courts Bill (2016-2017). This was a necessary and welcomed movement as it was the first of its kind, to challenge and potentially change, the purpose of the penal estate. However, this was later abandoned, following a surprise General Election in May 2017. This resulting in the appointment of David Lidington as LCSOSFJ and it is unknown how 'prison reform' initiated by Truss will progress.

The journey towards penal reform as explored through the changing governments, various role holder of LCSOSFJ and their subsequent take on prison and rehabilitation has demonstrated a paucity in time allocated to implementing changes and various alterations in prison reform leaders.

This has resulted in a lack of progress and consistency that is required to radically improve the prison estate. The quick successions of more recent LCSOSFJ roles appears to have resulted in a distraction and lack of momentum in prison reform. With the last five LCSOSFJ role holders averaging a tenure lasting less than 18 months (Gash, 2017), none of the recent LCSOSFJ have had enough time to drive any tangible change. In July 2017, the chief executive officer of the Howard League for Penal Reform, Frances Crook, published a blog entitled ‘Might it be time to hold ministers to account’. Within this blog, Crook (2017:No Page) posits that;

“There have been five secretaries of state in the last seven years. Some have done lasting damage... this minister was closing down prisons, cutting the number of prison officers and doing nothing to reduce the number of people in prison. This meant that more prisoners were crammed into fewer prisons with not enough staff. The consequences are a deteriorating prison system where someone takes their own life every three days, violent assaults are an everyday occurrence, drugs are rife and crime is spilling from prisons into communities. Despite all this, the secretary of state in question has simply moved on to another department”.

Similarly, Gash (2017:No Page) acknowledges that an underlying reason for the prison issues we have today, is due to the “astounding level of political negligence and arrogance”. Moreover, it is the “perverse government overhaul and a toxic mix of pressures”, which have been linked to the prison crisis in England and Wales (Khomami, 2017:No Page). This led to Andrea Albutt, a prison governor and president of the Prison Governors Association, publishing a scathing open letter to the MOJ in August 2017. Within this letter, she stated that prison officer recruitment remains critical, the empowerment of staff has yet to materialise, many of our prisons are in crisis, and “it can’t be dressed up in any other way” (Prison Governors Association, 2017).

Therefore, the prison crisis that we are witnessing today has resulted from an accumulation of failed prison policies, ineffective implementations and reductions in resources, that have reduced the safety of prisons for both prisoners and prison staff. These failures have further resulted in instability, linked to a toxic mix of penal policy disasters that are to blame for the deterioration of the prison regime, as well as the reduction in the fundamentally important staff-prisoner

relationships due to prison wide levels of disempowerment.

In summary, the three phases of prison policy rhetoric and penal reform that I have explored within this section, indicate a slow burning movement towards the prison crisis that we now see in 2018. However, the facts remain unchanged. Prisons, their staff and prisoners are not safe and for many individuals, prisons are not fit for purpose. This is evident in the rising re-offending rates, the rise in self-harm and death in custody figures, as well as the rising and distressing levels of violence and drug taking within the prison environments (Ministry of Justice, 2016c). Since the infamous, “tough on crime and tough on the causes of crime” mantra, I argue that there has been very little focus on addressing the causes of crime or the recognition of the pervasive impact of previous trauma. This, I argue, has failed to generate adequate penal and political consideration. Therefore, in this research, I aim to contribute to shaping the next phase of penal policy and practice. This will be achieved through the dedication directed at furthering the understanding of previous trauma, and the impact this can have on the lives, behaviours and experiences of prisoners, as well as considering the needs of responding staff.

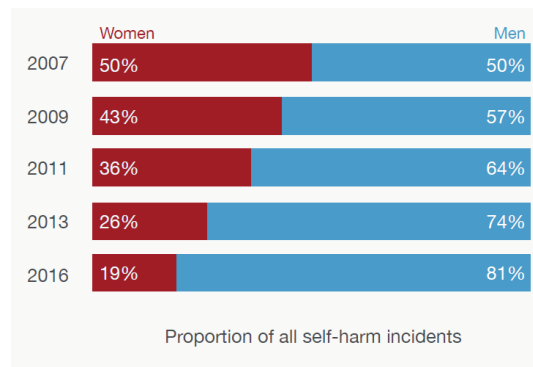
3.3 Manifestations of Previous Trauma in Prisoner Behaviour

In the previous literature review in Chapter Two, I explored the challenges of traditional positivist victimological perspectives and the subsequent lack of recognition of the trauma experiences of prisoners. Further, I argued that critical victimology could provide a platform to explore these experiences and challenge the stereotypes emerging from positivist victimology. In addition, the lack of ability to recognise the manifestations of trauma is also consistent within prison policy and practice. This could be connected with the notion of the ideal victim, as we are socialised to anticipate stereotypical expressions of vulnerability. However, what I aim to explore in this research is the complex vulnerabilities associated with some of the manifestations of previous trauma within prisoner behaviour.

The prevalence of experiences of previous trauma across the UK prison estate is substantial, as the Prison Reform Trust (2017a:11) indicates that 53% of women in prison and 27% of men in prison had reported experiencing “emotional, physical or sexual abuse as a child”. The need to adopt a

gender-sensitive approach across the prison estate emerged initially (for men in prison) in 2005 and (for women in prison) in 2007. In 2005, Rickford and Edgar (2005) produced a report outlining the specific needs of male prisoners. The report explored the rising levels of mental health issues, substance misuse issues and the prevalence of experiences of previous trauma. Subsequently, the report findings that were generated and the complex needs of men in prison failed to receive any specific policy focus. More recently, prison reform charities such as Prison Reform Trust (2017a) and The Howard League of Penal Reform (2016) have acknowledged that the rates of self-harm within men’s prisons have increased by 74% since 2010. It is also estimated that 23% of men have suffered from anxiety or depression.

Figure 3.1 Prisoner Population: Self-Harm Incidents (Prison Reform Trust, 2017a: 4)



As depicted in **Figure 3.1**, the proportion of male self-harm is increasing. Further, this figure illustrates the lack of focus on male prisoners' self-harming needs, as this chart highlights an increase that has been building progressively over the last ten years. According to Covington, Griffin and Dauer (2011:76) men keep their histories of trauma hidden as it can be difficult for them to discuss and acknowledge their experiences if they “associate it with weakness”. Therefore, there may be an unknown quantity of male trauma survivors within the prison population. Moreover, Covington, et al., (2011:77) argue that men who have experienced trauma have a higher risk of becoming abusers, if men struggle to address their trauma. The authors posit that men can become “overwhelmed with emotion or action out of a traumatic trigger”.

Outside of the prison estate, there has been movement in exploring men who are simultaneously 'violent' and 'vulnerable' (Ellis, 2016). The author argues that;

"Trauma represents an unfathomable and terrifying rupturing force that is experienced as profoundly emotionally disturbing. Traumatic encounters leave individuals with a profound sense of loss, disturbance, inarticulacy and betrayal that may linger for a considerable, potentially infinite, period of time" (Ellis, 2016:128).

Overall, the trauma experiences of men require further academic attention as there could be an unknown amount of male trauma survivors within the prison estate. Despite this growing knowledge of male trauma behaviour, as well as the rising self-harm rate within the male prisoner population, there is no accompanying prison policy movement. Moreover, a gender-sensitive response may be required in order to support both male and female trauma survivors within prison. Alternatively, to shed light onto the vulnerabilities of women in prison, the Corston (2007) report generated numerous initiatives and discussions as well as demanding that a complete re-evaluation of the criminal justice system was required in order to respond to the needs of women. However, we are now a decade on from this and there has been a stagnation and a lack of momentum in the implementation of the recommendations that are as relevant now as they were on the day of publication in 2007. The needs of women in prison have been described by Corston (2007:37) as an "after-thought in the development of systems and policies designed for men". Bastick and Townhead (2008) argue that women are discriminated against in each aspect of their imprisonment, including pre-trial detention, employability, health care and education, which they advise is directly impacted by a prison system designed by men, for men. However, it is evident that the prison system is working neither to support the needs of men or women. This was emphasised in the HMCIP report (2012:30) that outlined that the training packages available to prison staff to support the various needs of either men or women in prison were both "insufficient" and "inadequate". More recently, Hogarth (2017) has argued that many of the ambitious recommendations made by Corston have been abandoned. In addition, the current and escalating safety issues within adult male and female prisons (Ministry of Justice 2016c) indicate that prison reform ambitions are far from achievable without bravery and innovation. Therefore, due to the varying gendered differences and complexities associated with both men and women in prison, there is a growing

necessity to embrace and develop a gender-sensitive and gender-responsive way of working across both prison populations (NOMS, 2015b).

3.3.1 Substance Misuse⁹

The Prison Reform Trust (2016a) outlined that a total of 87% of men and 75% of women drank alcohol prior to imprisonment. In addition to this, the same report highlighted that 49% of women and 29% of men reported having an issue with drugs, when they enter prison. Since 2010, the use of illegal, prescription and NPS in prisons has increased; this has resulted in higher levels of violence and unrest within the prison estate (Prison Reform Trust, 2015b; Public Health England, 2015). The effect of NPS has been so substantial that over two thirds of prisons are reporting having experienced serious impact (HMCIP, 2015). NPS are undetectable by on-site prison testing, they are affordable and the ‘high’ provided is an attractive feature to prisoners (Public Health England, 2015:17). Therefore, it is surprising that the prison service has not considered if the rise in the use of NPS correlates with the deterioration of the prison regime as well as the lack of purposeful activity and rehabilitation prospects.

Substance misuse has been adopted as a coping mechanism for many individuals when faced with adversity. Moreover, it has been suggested that reasons for using substances include increased happiness, energy, pleasure and emotions, to relax, to engage socially and to decrease anxiety or depression (Laudet et al., 2004). The use of substances can result in a “decreased awareness of surroundings, decreased alertness and blunted emotions, which prisoners have reported to be desirable effects within a prison environment” (HMCIP, 2015b: 37). This I argue is worthy of increased academic and policy attention.

When discussing addiction in prison, the consideration of substance misuse as a coping strategy is seldom considered. Alternatively, Dr Gabor Maté specialises as an addictions GP in the USA, he argues:

“If you want to ask the question of why people are in pain, you can’t look at their genetics, you have to look at their lives. And in the case of my patients, my highly addicted patients, it’s very clear why they are in pain. Because they have been

⁹ I use the term substance misuse to refer to both drug and alcohol misuse.

abused all of their lives, they began life as abused children. All of the women I have worked with over a twelve-year period, hundreds of them, they had all been sexually abused as children. And the men had been traumatized as well; the men had been sexually abused, neglected, physically abused, abandoned and emotionally over and over again. And that's why the pain" (Maté, 2014:No Page).

Further, Maté (2014:No Page) proposes that:

"If you want to understand addiction, you can't look at what's wrong with the addiction, you have to look at what's right about it. In other words, what is the person getting from the addiction? What are they getting that otherwise they don't have? What addicts get is release from pain, what they get is a sense of peace, a sense of control, a sense of calmness, very, very temporarily".

When considering the use of NPS and other substances within prisons, it is important that researchers and policy makers consider the imported experiences of prisoners (e.g. trauma) and the negative impact of the prison environment. Substance misuse has been associated with histories of trauma as individuals often struggle to manage the psychological and emotional effects of abuse (Byrne and Howells, 2002).

As scholars within the field of psychology have identified, there is a strong connection between victimisation, trauma and the use of substances (Covington, Burke, Keaton and Norcott, 2008; Grella, 2003). As such, academics such as De Bellis (2002) and Covington (2008) argue that often one of the main factors in why people addressing addiction issues relapse is connected to underlying mental health issues. For many individuals accessing community services, it is often the case that they cannot access mental health services, until they have reduced their alcohol intake or have completed their treatment pathways for substance misuse (Cook et al., 2006; Grella, 2003). However, there is evidence to suggest that when drug and alcohol treatment is integrated with trauma and mental health care, there has been a reduction in individuals' use of substances (Covington et al., 2008:388). Therefore, in order to successfully rehabilitate prisoners who utilise

substances as a coping strategy, the prisons could benefit from considering the prevalence of previous trauma.

Current Prison Service Orders (PSO's) recognise substance misuse as self-medication within the female estate (Ministry of Justice, 2009f:13). Despite this, those with high levels of substance misuse and mental health issues have been described as 'needy' and received little staff dedication or resources (HMCIP, 2014:11). Further, HMCIP (2010:61) reports indicated that some prisons do not have integrated substance and mental health services, despite 80% of prisoners' experiencing these issues simultaneously. Although both prison policy and HMCIP reports have indicated that prisons are keen to disrupt the supply of drugs entering prison, it is subsequently the demand for drugs in prison that they consistently fail to prioritise. Therefore, the connection between substance misuse as a coping strategy for previous trauma and the traumatic experience of imprisonment could be an important considerations for researchers and policy makers.

3.3.2 Mental Health and Self-Harm

The levels of mental health and self-harm within prisons are high and are continuing to increase, across both the male and female prison populations (Ministry of Justice, 2016c). However, the support of prisoners with self-harming needs and mental health issues has been consistently criticised by HMCIP reports. Findings from HMCIP reports since 2007 have consistently highlighted a need for advanced training for prison officers in both of these areas to aid them to identify individuals at risk (HMCIP, 2007; HMCIP, 2009; HMCIP, 2011; HMCIP, 2014; HMCIP, 2016). Similarly, the Independent Monitoring Board (IMB) argued that there was a lack of confidence in prison officer support (2012:11) as staff were "neither equipped, nor trained to treat or deal with the resulting manifestation of behaviour".

Covington et al., (2008) and Harris and Fallot (2001) have explored mental health issues such as anxiety, depression and self-harm as manifestations of trauma. Across the prison estate, self-harm rates have soared and are at the highest level ever recorded at 40,161 incidents in 2016 (Prison Reform Trust, 2017:4). There has been a repeated recommendation from the Chief Inspector of Prisons to have safer custody training both mandatory and prioritised, as the prison service must learn from the near fatal self-harm incidents (HMCIP 2011; HMCIP 2014).

The inadequate response and care provided to prisoners has been blamed on the insufficient mental health awareness training. This is impacting prison staffs' ability to identify and respond to prisoners at crisis point (HMCIP, 2012). This is supported by the HMCIP (2016) who found that only 30% of prisoners stated that their bell was answered within 5 minutes. Overall, the report acknowledged that there was a poor staff response to the emergency cell call bell (HMCIP, 2016:30). This raises significant issues for prisoners with poor mental health, who may require staff support. It could also be indicative of staff shortages and other pressures within the prison service.

The initial response to any prisoner who self-harms is to open an Assessment, Care in Custody and Teamwork report (ACCT). This can be initiated by any member of staff, and a specialist officer will assess risk and identify triggers. Staff who are ACCT trained, will then ensure that individualised care and support plans are in place to regularly monitor the person at risk (HMCIP, 2012a). Over the years, ACCT documentation across the entire prison service has been criticised due to inconsistencies (HMCIP,2010). This could be a result of the very few prisons offering staff training, or refresher courses to ensure that their practice was up to date (HMCIP, 2011; HMCIP, 2015).

In addition, inspectors doubted that staff understood that “preservation of life took precedence over security” (HMCIP, 2012:29). As prison is an environment based on security and risk management, the caring required when supporting self-harm and mental health can at times cause conflict. However findings from Walker et al., (2016) indicate that a relational approach is crucial for prison staff to support a prisoner who is engaging in self-harm. The response to self-harm is of critical importance, as research conducted by Hawton et al., (2014) revealed that many deaths in prison occurred very soon after an episode of self-harm. The study, conducted by Hawton et al., (2014) is currently the largest to investigate self-harm in UK prisons, and the authors conclude by recommending additional training for prison officers in this area, as well as the need for a greater input from health-care staff, in the management and the overall prevention of self-harm. To add to this, Walker et al., (2016) argued that there is very little research that explores the psychological function of self-harm within women's prisons. As such, the authors advocate for additional

academic and policy scrutiny. Similarly, there is also an absence of this research focus across the male prison estate.

However, the relationships between experiences of previous trauma and increased risk of self-harm have been explored within the context of the male prison (Marzano, Ciclitira and Adler, 2016) and within the context of the female prison by (Walker and Towl, 2016). Both texts indicate the desperate yet meaningful coping mechanism that self-harm provides both men and women with as a means of releasing emotions and tensions, within in a prison system that is unresponsive to their trauma needs. Therefore, due to the rising levels of self-harming across the prison estate, as well as the emerging literature connecting trauma histories with self-harm, a tailored and gender-sensitive penal strategy is required.

3.3.3 Anger and Aggression: Segregation and Control and Restraint

Segregation units are complex environments, where some of the most challenging and/or vulnerable prisoners are held. Many will have demonstrated increased levels of anger and aggression, and as a result, their behaviour may have been deemed temporarily unmanageable on the wing. As such a transfer to segregation may be an appropriate measure. The procedures for placing prisoners in segregation can be found within the PSO 1700 (Ministry of Justice, 2007), where five prison rules are outlined as grounds to remove a prisoner from the main population. Two rules, (Prison Rule 45 and YOI Rule 49) outline that a prisoner may be segregated for reasons such as, 'good order' or 'discipline', or for their 'own protection'. A total of three out of five prison rules indicated that segregation may be used for “discipline”, if “found guilty of an offence against prison discipline” or if a “prisoner is awaiting an adjudication hearing”, all of which allude to notions of punishment (NOMS, 2014).

As acknowledged by Shalev and Edgar (2015:v) segregation units “may house a combination of people with M&C needs, including some who are at risk of self-harm, some who pose a risk to others, and some are both a risk and at risk”. Across the adult prison estate, the periods of confinement within segregation units are limited to 21 days (Shalev and Edgar, 2015). In addition to Prison Service Instructions (PSI), PSO and Prison Rules, the use of segregation is underpinned by varying international legal instruments (e.g. UN Standard Minimum Rules for the Treatment of

Prisoners¹⁰, the European Prison Rules and the United Nations Rules for the Treatment of Women Prisoners and Non-Custodial Measures for Women Offenders¹¹). These instruments all indicate that segregation should be used sparingly, infrequently and for the shortest time possible. However the rules for the treatment of women state that no woman who is pregnant, with an infant or breastfeeding, should be placed in confinement or disciplinary segregation (Shalev and Edgar, 2015). Segregation units within the female prison estate are now being referred to as “segregation/care and support units” (Ministry of Justice, 2009f:28). Still, the use of segregation within prisons continues to cause controversy due to the amount of individuals on ACCTs being held in segregation, despite the absence of “adequate justification” and the “lack of constructive activity in most segregation units” (HMCIP, 2016:19). Furthermore, the same annual report indicated that in half of the prisons inspected, the use of control and restraint techniques were increasing/high and the inspectors “were not assured that all cases were warranted, proportional or de-escalated” (HMCIP, 2016:25).

The use of segregation and use of force are standard practices within the prison, in order for staff to maintain control, security and the safety of the prison. However, the prisoner cohort who challenges the “good order/discipline of the prison” could indeed be those individuals displaying an aggressive and/or angry manner. As highlighted in Chapter Two (Section 2.2.4) the utility of anger and aggression can derive from an emotional response following the experience of trauma and victimisation. Therefore, the staff skills and practices required to de-escalate a situation whereby an individual may be presenting in an angry or aggressive way, is of significant importance. Notably, Covington (2015b), argues that the normal practices operated within the prison service, such as the use of segregation and control and restraint techniques, can be traumatising for any individual. In particular, these practices will likely be re-traumatising for trauma survivors in prison. Therefore, the ways in which the prison environment and the experience of imprisonment can add to the traumatic experiences of prisoners should be a concern for penal scholars.

The environment, interiors and geographies of prison, have been considered by prison researchers (Crewe et al. 2013; Danks and Bradley, 2018), through pivotal work in prison ethnography (Crewe

¹⁰ Also known as the ‘Mandela Rules’ 2015.

¹¹ Also known as the ‘Bangkok Rules’.

and Bennett, 2012; Earle, 2014) and the inspirational work within Convict Criminology (Earle, 2016; Ross and Richards, 2001). However, there is very little research that visits the ‘pre’, ‘peri’, and ‘post’ prisoner experience. Life-course theory attends to the factors within childhood, adolescence and adulthood that play a role in future criminal behaviour (Laub and Sampson, 2003). This research attends to the way in which previous experiences of trauma can impact an individual’s life and behaviour before, during and after imprisonment. As a result, I argue that a multi-disciplinary approach is required, in order to explore the nuances associated within a trauma survivor's rehabilitation, recovery and desistance.

3.4 The Pains of Imprisonment: Considering Trauma Survivors

When Sykes (1958) presented his seminal analysis of the pains of imprisonment, it signified a movement away from the prison as a physically painful environment. However, Sykes (1958:65-78) stressed that since moving on from physical beatings, the experience of imprisonment has advanced towards much more psychological pains of confinement, such as the 'deprivation of liberty', the 'deprivation of good and services', the 'deprivation of heterosexual relationships', the 'deprivation of autonomy' and the 'deprivation of security'. Further, Sykes (1958) argued that the attacks on the self, have a negative influence on a prisoner’s ego and self-worth; however, these were intrinsic to the experience of incarceration. Likewise, Goffman (1961) outlined how the prison or ‘total institution’ produced micro-humiliations, as well as assaults on the self. These scholars indicated that the prison environment had begun to attack a prisoner’s sense of self, as well as their identity. Additionally, Foucault (1977) cited similar issues when he considered the role of nuanced techniques of discipline and regulation that, he argued, could be seen as more efficient in achieving penal control than the forms of physical punishment that had been replaced in the 18th century. Therefore, the prison environment had become psychologically painful and onerous for prisoners.

In later developments of the pains of imprisonment, Crewe’s (2011:509) influential article entitled ‘Depth, weight, tightness: Revisiting the pains of imprisonment’, incorporated and explored the impacts of imprisonment that are derivative from “deliberate abuses and derelictions of duty”, as well as those deemed “consequences of systemic policies and institutional practices”. Furthermore, Crewe (2011:523) suggests that modern prisoners are uncertain; they walk on eggshells as the “line

between a guiding hand and a stiff, constraining grip is a fine one". Staff within Crewe's (2011b:523) research were described by prisoners as being "petty and provocative", due to the endless rules, entangled within other rules (Cohen and Taylor, 1978). Although the modern relationships between prisoners and staff are much more laid-back in many ways they have become more complicated (Crewe, 2011b).

One example of this can be associated with the introduction of the policy of Incentives and Earned Privileges (IEP) in 1995. The IEP scheme sought to achieve five specific aims including;

1. To enable prisoners to earn privileges if they demonstrate good behaviour and performance. These are also removable if prisoners do not adhere to acceptable standards of behaviour.
2. They encourage responsible and positive behaviour.
3. They support prisoners to engage in hard work as well as purposeful and constructive activity.
4. They encourage sentenced prisoners to progress positively through their prison sentence.
5. They endeavour to create an environment that is both disciplined and better controlled, in order to provide a safe environment for both staff and prisoners.

The IEP framework consists of three key privilege levels: basic, standard and enhanced. The privilege level held by prisoners dictates their access to earn more money, access to in-cell television, greater time out of their cell, and a variety of other incentives (see Khan, 2016; Liebling, 2008). Further changes were made to the IEP scheme in 2013 by NOMS (Khan, 2016), who stated that prisoners should demonstrate their commitment to their rehabilitation goals, through the increased engagement in purposeful activity, in order to reduce their risk of reoffending, whilst behaving well and supporting and/or helping other prisoners and staff. Khan (2016:11) argues that the IEP scheme was essentially set up to "encourage and reward 'good' prisoner behaviour and deter 'bad' behaviour by the loss of earnable privileges". Khan (2016) further states that the changes to the scheme in 2013 indicated an underpinning of rational choice theory, which assumed the incentives, could be beneficial to promote positive prisoner behaviour. However, findings from

an evaluation of the IEP scheme conducted by Liebling (2008b) indicated that the scheme was negatively effecting prisoner behaviour and it was linked to increased levels of ambiguity and unfairness (Liebling, 2008b). Further, findings of the study indicated that staff saw their use of discretion with the IEP as a useful tactic to motivate prisoner behaviour when individuals were seemingly uncompliant.

However, uncompliant behaviour is based on our assumption and interpretation of what is good or bad behaviour. As illustrated by Kubiak, Covington and Hillier (2017:13) “prisoners may react in ways that they perceive as self-protective, but that staff will perceive as either hostile or ‘closed off’”. Therefore, the IEP scheme has the potential to act as an additional pain of imprisonment for those who have trauma histories further adding to their traumatic experience of prison and sense of powerlessness.

To explore the pains of imprisonment, Crewe (2011a) utilised metaphors of measurement to expose the modern frustrations and penal burdens associated with *Depth*, *Weight*, *Tightness* and *Breadth*. Below I present a very brief summary of each.

Depth: Adapted from an analysis of British and Dutch penalty, Downes (1988) observed *Depth* as systemic issues including the quality of food, prisoner pay grades, facilities and environment, as well as relational issues such as staff use of their power, fairness of rules and prisoner treatment. Following on from this, Downes (1992) then explored *depth* as the connection of the prison with the outside world and familial contact (telephone, visits, letters) as well as informational (newspapers, media) and or social (visits by academics, politicians and students) contact. King and McDermott (1995) acknowledged this understanding of *depth* as the closest to that of the prisoners viewpoint. However, within their study of high-security prisoners, depth emerged as being “buried way beneath the surface of freedom” due to long sentences and remoteness from society (Crewe, 2015:54).

Weight: When exploring the meaning of *Depth*, King and McDermott (1995) identified that some aspects of Downes’ work would be better associated with the metaphor *weight*. This was due to the heavy burden of the regimes, the rules and the experience of imprisonment bearing down as a “weight on their (prisoners) shoulders” (King and McDermott 1995:89). Contrastingly, “lightness”

can suggest a “less oppressive environment”. However, if staff levels are low and there is an absence of authority, this can also lead to environments that are unsafe and disorganised (Crewe, 2015; Crewe, Liebling and Hulley, 2014).

Tightness: This term incorporates the feelings of prisoner anxiety and tension that can be generated from uncertainty (Freeman and Seymour, 2010). Rather than weighing a prisoner down, the power can be experienced as both hard and soft, and “suppress them as wrap them up, smother them and incite them to conduct themselves in particular ways” (Crewe, 2009:522). Further, *tightness* refers to “entangling prisoners in a web of regulation and self-government” (Crewe, 2015:59). This is linked to the bureaucratisation of the prison and the penal power prevalent with compliance that is grounded in paperwork and computer files.

Breadth: This metaphor is associated with the impact of prison and prison sanctions beyond the prison. This can be considered as the “disqualifications and disabilities” that derive from convictions (Garland, 2013:478), as well as the stigma that ex-prisoners experience following their release (Crewe, 2015).

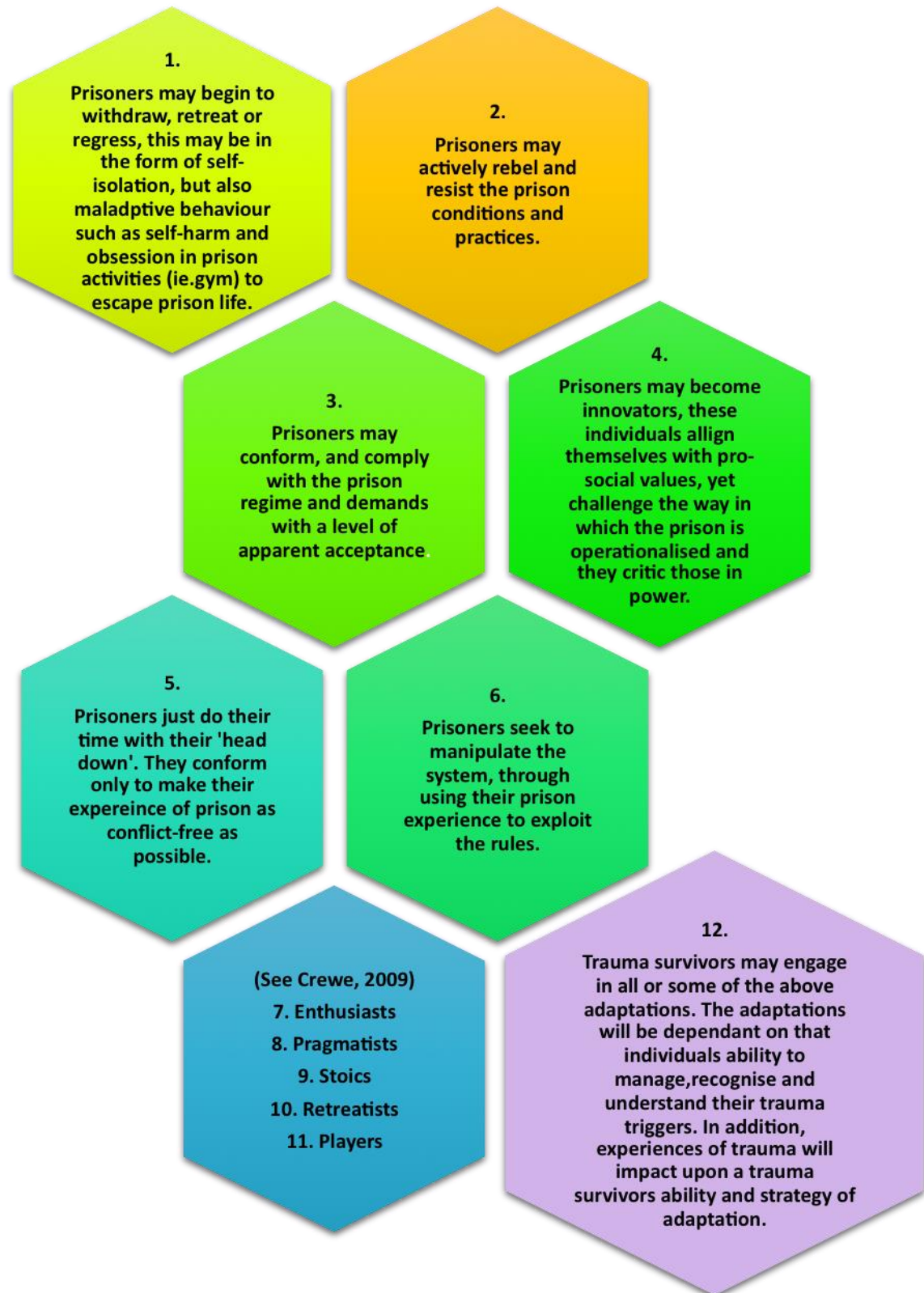
However, not one of the metaphors of measurement utilised by Crewe (2015) can provide an exploration of pre-prison experiences. As such, I argue that the *Depth, Weight, Tightness and Breadth* of imprisonment will be heavily influenced by the pre-prison experiences of trauma and as such, the pains of imprisonment will be further exacerbated for trauma survivors.

Crewe (2009:151) has argued that adaptations to prison are entirely individual and cannot be generalisable due to the variety of prison settings and the unique imported factors to which “adaptive possibilities are given form, shape and substance”. Further, he posits that the “structural, institutional, and external determinants interrelate in practice, and do so differently for different individuals” (Crewe, 2009:8). As such this results in unique adaptive outcomes for each individual. Although there are some adaption categories that allude to the impact of imported experiences and trauma, none of those highlight the complexities that derive from that experience. This is where trauma theory (Kubiak, Covington and Hillier, 2017) can add additional depth, in order to demonstrate how a trauma survivor’s adaptation to prison could be impacted (e.g. manifestation of previous trauma discussed above). However, there are some adaptations within prisons that have

been noted within the literature in the eleven categories that I present in the figure below. I have also included a twelfth category, in order to establish the imported experiences of trauma as a significant adaptation category in its own right. In addition to this, I demonstrate how the other adaptive categories could intertwine within a trauma survivor's experience of prison.

Figure 3.2 Twelve Categories of Prisoner Adaptation

Adapted from Crewe (2009) and tailored to include the adaptation of trauma survivors.



Crucially, the adaptations of prisoner behaviour can be fluid, changeable and are entirely fluctuating, as the experience of imprisonment will naturally contain highs, lows and triggers for trauma survivors. Moreover, the experience is unique and individual, therefore the imported characteristics, experiences and values of each prisoner will be complex and distinctive.

However, it is the imported experiences (i.e trauma), the deprivations (i.e lack of positive coping methods and the prison environment) and situational (i.e prison practices such as segregation) that can influence an individual's adaptation to the prison environment. The experience of trauma is central to this adaptation. In an attempt to further explore the way in which trauma survivors may adapt to the prison environment, theoretical models such as importation, deprivation and situational can be applied. To do this I have combined trauma theory with the three specific theoretical models.

1. **Importation:** Refers to the effect of pre-prison factors on prisoner behaviour. Kubiak, Covington and Hillier (2017) outline that the experience of a variety of broad traumas can result in alterations to emotional and behavioural functioning. Therefore, this group of prisoners may feel the experience of imprisonment and the subsequent pains, more acutely. However, Kubiak, Covington and Hillier (2017) argue that pre-incarceration experiences are just one element of the story.
2. **Deprivation:** Alongside the deprivations within prison (Sykes, 1958), prisoners who have experienced trauma are likely to have used substances as a means of coping (Shonkoff et al., 2012). In addition, many of the positive methods that individuals may have adopted in order to cope with their trauma such as going for a walk or enjoying recreational activities, that are significantly impacted by a lack of freedom, autonomy and control prisoners have. As such, prison is not an environment that can encourage and influence positive coping strategies due to the freedom of movement required. Furthermore, the environment can further inhibit positive coping, which may result in the use of illicit substances and self-harming behaviour. As argued by Kubiak, Covington and Hillier (2017:10) "most prisons, rather than reducing the effects of traumatic exposure, often produce new traumatic events and exacerbate symptoms of previous trauma".

3. **Situational:** Whilst the situational model explores season of the year and location of the prison, it could also be used to explore the prison environment. When exploring the situational model, three questions are considered: “Where, when and with whom does this behaviour occur” (Jiang and Fisher-Giorlando, 2002:340). Covington (2015b) suggests that the prison environment and the culture of the prison could re-trigger memories of previous trauma. This can include typical prison practices, such as pat downs, loud noises, use of segregation and control and restraint techniques. Moreover, the staff-prisoner relationships are an important factor, as certain staff may lack the de-escalation skills, confidence and knowledge surrounding how to deal with manifestations of trauma within prisoner behaviour. This may result in the use of control and restraint techniques, or segregation that could further re-traumatise an individual.

The prison has been recognised as a site that can both inflict trauma on individuals without pre-existing mental health issues (Liebling and Maruna, 2005) and re-traumatise individuals through varying prison specific and environmental triggers (Covington, 2015a). A trigger is something that generates an emotional or physical reaction from a traumatised individual (Covington, et al., 2011). Within the prison environment, this could be the setting, a sound or smell as well as anything which may remind that individual of a past traumatic event. However, Miller and Najavits (2012:1) argue that prisons are equipped to house “perpetrators not victims”, therefore the experience of imprisonment, the degradations, the deprivations and the pains of imprisonment, are further exacerbated for individuals who have histories of previous trauma.

In a more recent and innovative paper, outlining ‘The Gendered Pains of Life Imprisonment’, Crewe, Hulley and Wright (2017:24) acknowledge that in the case of female prisoners, the impact of traumatic life experiences prior to imprisonment provide an “additional and elemental adaptive dynamic”. Although the paper outlined that “the women’s life stories read as catalogues of suffering and abuse”, the paper did not approach or allude to a potential strategy that could support those specific needs. However, the need for a response to the trauma needs of female prisoners has been an ongoing strategic priority, as it was stated in the NOMS (2017) final annual report that the aim of BTI was now one of the six work-strands for the female custodial setting.

An additional layer of analysis is required in order to explore the pains of imprisonment and racism, paying particular attention to how this would be experienced by a trauma survivor. There is very little research into trauma-informed services and the gendered needs of Black and Ethnic Minority (BME) prisoners. However, a study by Khan (2010) has documented the prevalence of trauma and mental health issues within BME communities. Racial discrimination within prison for BME individuals adds to the "painful experience of imprisonment and societal excision" (Phillips, 2012:183). To connect back to the pains of imprisonment literature is important, as Liebling (2011) and Crewe (2011) discuss the arbitrary power of prison officers and psychological pain that can occur when unfairness is experienced within prisons. Although Phillips (2012) outlined that at times prison officer laziness was misinterpreted as racial discrimination, for BME prisoners, the impact of racism may add to the traumatic experience of prison. In addition issues such as gender, class and race, always matter within prison (Phillips and Earle, 2010).

3.4.1 Acknowledging Ethnicity, Gender and Trauma

Having previously argued that the pains of imprisonment will be felt more harshly by a trauma survivor, it is important to consider how ethnicity situates within this debate. BME women may have experienced practices such as female genital mutilation, forced marriages, honour based violence (Imkaan and Women's Aid, 2014). Recent research from AVA and Agenda (2017) has confirmed that there is a need for women-only service provision. The report highlights a greater need for services led by BME individuals. The aim of this is to reach into wider communities and to support individuals facing oppression, marginalisation, discrimination and structural inequalities. Moreover the ways in which these intersect with gender inequality are significant. With this in mind, when we discuss trauma, there is little scholarly focus on BME trauma survivors and their experiences of prison, discrimination and racism. The trauma experiences of BME men and women require significant focus in order to explore the diverse experiences within this population. Although this research is unable to provide a rich discussion within this area, it is important to acknowledge gender and ethnicity when attempting to understand trauma and to identify a gap for further study. Within the paper produced by Imkaan and Women's Aid (2014:15) the organisations

suggest that services should recognise the "impact of patriarchy and colonisation and demonstrate an understanding of the impact of racism and discrimination in the lives of women and girls within the context of violence". AVA and Agenda (2017) place emphasis on the importance of providing safe spaces for BME women to promote empowerment and to reduce isolation. Not only does ethnicity place a role within the prison experience of trauma survivors, but also the way in which individuals recognise their trauma. For example, the Prison Reform Trust (2017:12) suggest that BME women may be under-represented in self-harming statistics "for reasons including under-reporting, or misreading of the range of emotional responses that women may have to trauma".

Alternatively for BME men, Phillips (2012) brilliantly illuminates the connection between hyper masculinity and racialization. In the literature on black masculinities within the US context she focuses on examples of 'cool pose', referring to an "ethnicized and gendered performance used to cope with racialized humiliation and emasculation with its roots in resistance to slavery" (Phillips, 2012:143). Within the UK context, this refers to masculine performances that deliver messages of strength, pride and control (Phillips, 2012). In her research, Phillips suggests that although inferences to 'cool pose' were evident in her data, they were not exclusively connected to black or ethnic minority prisoners. She suggests that this was common across the male prisoner population where narratives included anger, "the pain of family absence, desperation at being inside, challenging authority, and, over time, coming to terms with prison life". However, the negative stereotypes of black masculinities such as physicality and violence permeate the racialized tensions and narratives of white prisoners. Therefore these impact masculine identities as white prisoners place theirs as "superior to the racialized black other" (Phillips, 2012:145). Therefore, racism, ethnicity and masculinity add an additional layer of complexity to consider when attempting to recognise and respond to manifestations of trauma. Although this is a very brief discussion, it does suggest that trauma-informed services and practices should make the effort to acknowledge ethnicity and the various and diverse experiences of BME men and women within their implementation and practice.

3.5 ‘Becoming Trauma-informed’: Is this the Solution?

The BTI penal movement began in 2015, and it has been pioneered and funded by a charity named One Small Thing (See Appendix Sixteen). This charity was created by Lady Edwina Grosvenor (a prison philanthropist) and one of the partners appointed is Dr Stephanie Covington, who has spent a large part of her career developing trauma-informed correctional care strategies across the USA. This approach is underpinned and inspired by feminist work. For example, Moor (2009:3) argues that feminist philosophy is based upon a commitment “to the empowerment of women and the validation and valuing of their experience and viewpoint. Caring, compassion and respect are, accordingly, the foundation of this approach”. This commitment can be appreciated within the five core values of trauma-informed services that were initially designed and developed by Harris and Falot (2001), with the aim to redesign community based behavioural and addiction health care services that support trauma survivors. Harris and Falot (2001) recommend that staff should assume that every individual in their care is a survivor of trauma and should utilise TIP in a uniformed way, to avoid re-traumatising individuals. To achieve this, Harris and Falot (2001) and Covington (2015b:6) have over the years worked to develop the five core values of trauma-informed services, which I present below;

1. Safety: Providing eye contact, consistency, explanations, and following procedure to report abuse.
2. Trustworthiness: Following through; model trust; maintaining appropriate boundaries; making tasks clear.
3. Choice: Emphasising the individual’s choice and control; providing informed consent.
4. Collaboration: Allowing the individual to have solicited input in their rehabilitation and recovery journey.
5. Empowerment: Teaching skills and providing tasks where individuals can succeed.

These key values have also been incorporated within Covington’s (2015a; 2015b) BTI approach.

When supporting trauma survivors within community organisations or prisons, there are two key approaches taken, these are ‘Trauma-Informed’ and ‘Trauma-Specific’ services. Trauma-specific services are designed to treat and address the consequences of trauma. However, this research is concerned primarily with the Trauma-Informed approach, designed not to treat individuals but to promote strength and prevent and/or reduce the likelihood of individuals being re-traumatised (Kubiak, Covington and Hillier, 2017). Further, to be informed about trauma is to simply appreciate and “accommodate the vulnerabilities of trauma survivors” (Harris and Fallot, 2001:4) and to facilitate the active participation of an individual in their rehabilitation and recovery journey.

Initially, when a traumatic event occurs, individuals can experience toxic stress, and this can impact an individual’s brain functions that control their emotions, behaviour and relationships; resulting in what can be determined as negative behaviours and feelings of mistrust (Covington, 2015a). Toxic stress can emerge when an individual experiences continued and chronic stress; such as childhood abuse, witnessing domestic abuse, living in poverty and in the absence of supportive and loving relationships. An individual’s toxic stress can “derail normal physiological and psychological development in children creating problems for a life time” (Kubiak, Covington and Hillier, 2017:7). Therefore, this demonstrates the pervasive and long lasting impact of trauma experiences.

According to Covington (2015b:14) there are four key behaviours that can result from a trauma:

1. **Retreat Responses:** This may include individuals isolating themselves, disassociating themselves and experiences of mental health issue such as depression and anxiety.
2. **Harmful Behaviour to Self:** This can include individuals using maladaptive coping strategies such as substance misuse, eating disorders and self-harm.
3. **Harmful Behaviour to Others:** This may include individuals experiencing behavioural adaptations such as increased levels of aggression, violence, rage and making threats to others.

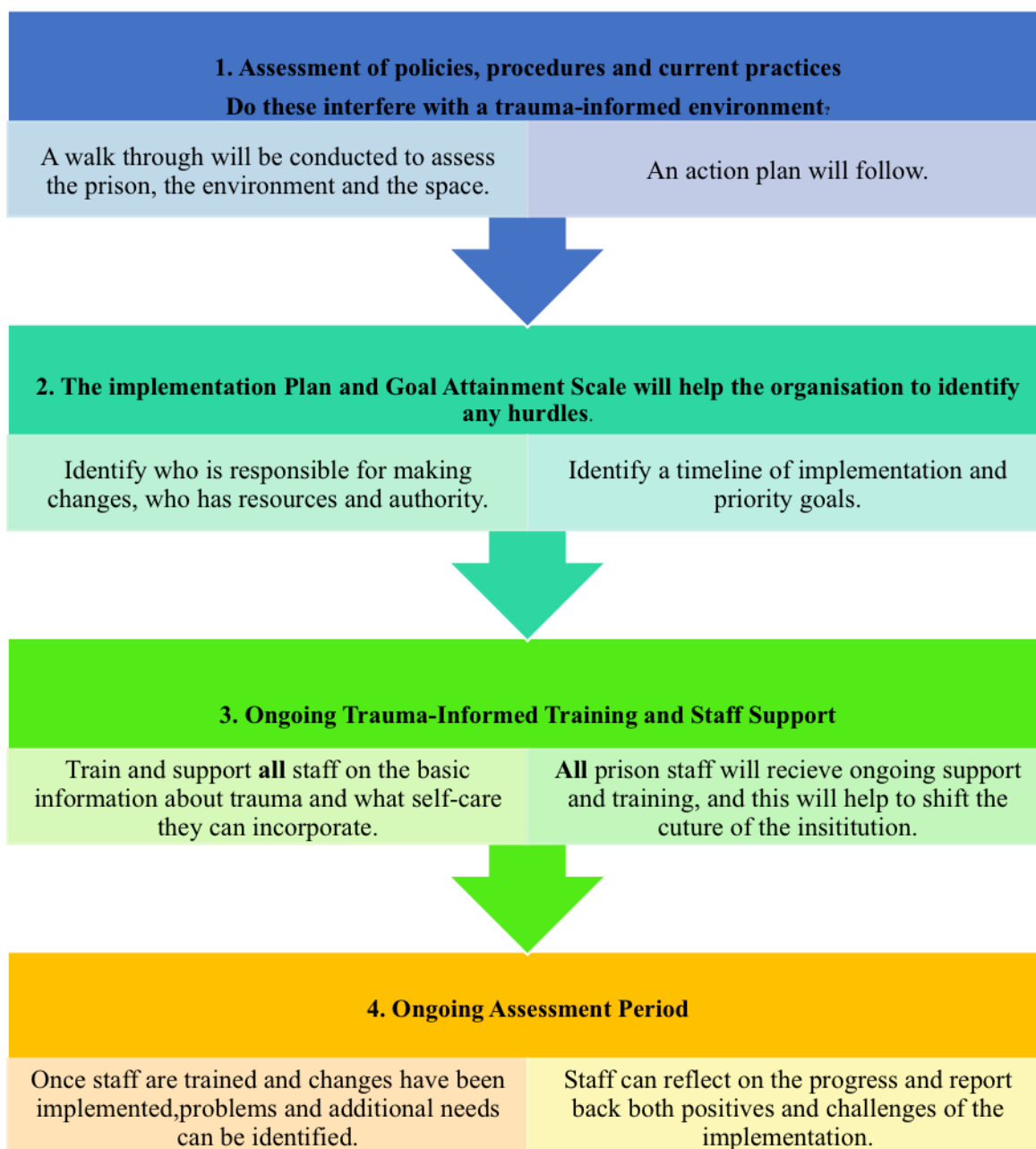
4. **Physical Health Issues:** This can include experiences of health issues such as disease, autoimmune disorders and obesity.

Some of these behaviours such as self-harm, substance misuse and behavioural issues can be associated with some of the escalating issues within the prison service. The alterations in an individual's emotional and behavioural functioning following a traumatic experience can often result in "explosive outbursts irritability and risky or impulsive behaviour" (Kubiak, Covington and Hillier, 2017:6). Within prison, these behaviours present challenges for the staff who may view such behaviour as difficult or refractory. This may then result in the prisoner losing privileges (IEP) and or experiencing other penal punishments (e.g. segregation).

More generally, a trauma-informed approach seeks not to treat the trauma, rather, it helps to recognise how an individual may be affected by trauma and how supporting trauma survivors will impact the staff within the organisation/institution (SAMSHA, 2014). To trauma-inform an organisation within the community, the implementation phase involves recruiting a 'trauma champion' who will facilitate the transformation to a trauma-informed organisation and guide the process with the members of a steering/advisory group (Harris and Fallot, 2001). However, the uniquely challenging environment of prison presents additional hurdles due to the closed settings and the environment based on total control (Miller and Najavits, 2012). Therefore, Kubiak, Covington and Hillier (2017) call for a trauma champion who can act as an innovative and inspiring leader, with administrative power, in order to translate the benefits of a trauma-informed approach within prisons for their fellow colleagues. The implementation of trauma-informed approaches within the prison service will require long term administrative and prison leadership commitment, which can take between 3-5 years to permeate the system, the policies and practices (Kubiak, Covington and Hillier, 2017).

The implementation of trauma-informed approaches within prisons will consist of elements that I present in the figure below.

Figure 3.3 The Implementation of Trauma-Informed Practice



(Adapted from Kubiak, Covington and Hillier, 2017).

To explore a timeline of trauma-informed activities, training and documentation provided by One Small Thing, see Appendix Sixteen.

Notably, TIP is one of the only initiatives designed to challenge the culture of the prison service. This is in order to improve the support for both the prisoner as well as prison staff, who are often overlooked in policy changes and improvements. Although it is primarily about establishing

priority areas of training for staff, it is also focused on emphasising the need for prison staff self-care as well as the need for ongoing staff support (See Appendix Fifteen).

The implementation of TIP within the female prison estate was unveiled as one of the strategic priorities for NOMS when working with women offenders (NOMS, 2015d). Further, the trauma-informed approach has been acknowledged as international good practice, as a methodology to “address the root cause to substance use in women” (Prison Reform Trust 2013:55-57). Initially, in the early implementation of TIP in September 2015, One Small Thing targeted the staff working within all UK women’s prisons. However, in June 2017, One Small thing began training staff working within High Security Male prisons and the progress of this is still very much ongoing.

The importance of a gender-sensitive or gender-responsive approach to trauma survivors is crucial, as Kubiak, Covington and Hillier (2017) have acknowledged that the drive for gender-specific practices has focused on the needs of women, and now, a direction should be taken to provide trauma-informed approaches within the male prison estate. As such, Covington (2015b¹²) has developed training programmes to explore the differences between male and female trauma survivors. Therefore, the sessions in both the male and female prisons focus on more strength based and holistic ways of working within male and female prisons, which included understanding trauma, non-verbal communication, calming strategies, triggers and escalation and de-escalation (Covington, 2015a). There are criticisms of the trauma-informed approach, whereby it is argued that it is narrowly focused on trauma within mental health fields (Goodman and Gorski, 2015). However, given the prevalence of mental health needs within prison, there is significant relevance within the context of the prison system that it was designed to impact.

The small empirical evidence base behind trauma-informed correctional services in the USA, suggests that this approach is working to reduce some of the key issues impacting safety. For example in Massachusetts, findings have demonstrated that self-harm has reduced by 15%, prisoner-staff assaults have fallen by 62% and prisoner-prisoner assaults have decreased by 54%

¹² Training packages can be requested online at: <http://stephaniecovington.com/trainings-and-workshops.php>. Very brief information is available online, purchasing is required for full training package information.

(Covington, 2015b). Similarly, the same trial found that suicide attempts had fallen by 60% and prisoner fights had fallen by 46%. This indicates a substantial improvement in safety for both staff and prisoner. This is of particular significance given the reduction in levels of safety within the UK prison service.

In order for trauma-informed approaches to be successful, it is particularly important to have all staff on board, namely prison officers. A prison officer has arguably the largest prisoner-facing role (Tait, 2008). In a more recent study, Lloyd et al., (2017:4) acknowledged that;

“Any specialist programme within prison depends to some degree on the support of discipline officers for basic logistics: securing referrals, locking and unlocking and daily movement around the prison. Prison officers are consequently in a powerful position to help or hinder such initiatives”.

As such, the role of the prison officer will likely impact upon the levels of success within any prison initiative (such as TIP).

However, prison officers have been referred to simply as, “turnkeys... required to keep prisoners securely” (House of Commons Justice Committee, 2009:13). Yet, the role of the prison officer is challenging to define, due to the varying expectations associated and individual subjectivity, interpretation and performance of the role.

Paddy Scriven (General Secretary of the Prison Governors Association) stated that;

“The Ministry of Justice wants a prison officer to be multi-skilled, it wants them to be a custodian, it wants them to be a carer, it wants them to contribute to risk assessments for release, but it also wants them to protect the Ministry of Justice by ensuring they keep audit trails of everything that they do” (House of Commons Justice Committee, 2009:10).

Considering a prison officer as a ‘carer’ reveals the more holistic nature of the role. However, is it really a prison officer’s role to care and support a trauma survivor in prison? As prison officers are

primarily first responders and they work directly with prisoners, they should hold knowledge of the varying characteristics and vulnerabilities applicable to their prisoner population. In research conducted by Tait (2011) into the caring approaches of prison officers, the author found that ‘caring’ was interpreted and demonstrated in varying ways by officers, due to the different prison officer personalities, experiences and the varying prison environments. However, this research demonstrates that there has been an increase in acknowledging the welfare responsibilities of prison officers (Tait, 2011). Tait’s (2011) research suggests that the prisoners considered being ‘cared for’ as being listened to, being encouraged and having a sociable and respectful relationship with officers. Similarly, Liebling et al. (2011b) indicate that helping prisoners can provide staff with a source of meaning, within a role that attracts few occupational benefits and rewards. Therefore, the staff-prisoner relationship is of mutual benefit.

The importance of the relationship between the prisoner and the prison officer has permeated the penological research discussions, namely in the work of Crawley (2004), Crewe et al., (2011), Liebling (2011) and Tait (2011). This relationship is widely-agreed to be ‘at the heart’ of prison life; however, there is limited research available within this area, specifically focused on units, or initiatives that place emphasis onto rehabilitation and recovery (Lloyd, et al., 2017:5). When asking ‘what matters’ in prisons, Liebling and colleagues found that the prisons which were more punishing and painful, were institutions with staff who were “indifferent, punitive or lazy” (Crewe et al., 2011; Liebling, 2011). This demonstrates the importance of staff being consistent with their authority and care.

Contrastingly, the feelings of “fear, powerlessness and hopelessness” (Liebling, 2011:538) have been applied to the lives of prison officers, due to their long shifts, lack of resources and lack of support when working closely with prisoners who have experienced traumas (Crawley, 2004). Kubiak, Covington and Hillier (2017) noted that prison staff become invested in TIP when they understand how the approach can improve their work life. At Covington’s (2015b) trauma-informed training, staff are asked to complete an ACE survey for themselves as well as a prisoner whom they work with. This grounds the staff within specific and tangible experiences, in order to

encourage reflective practice. For Covington, (2015b) TIP is a universal way of working; as it provides an approach that can support the needs of both the prisoner and prison staff (Ardino, 2014). Moreover, Covington (2015) and Miller and Najavits (2012) argue that trauma-informed prison approaches can help to establish a safer and more rehabilitative focused environment for both the staff and the prisoners.

The current prison crisis in the UK is indicative of a failure to support the needs of both prisoners and staff across the prison service. The rising levels of self-harm, suicide and a substantial reduction in safety (Ministry of Justice, 2016c; The Howard League of Penal Reform, 2016) have led prison officers to take illegal strike action in an attempt to express their concerns widely with politicians, prison management and society. Therefore, a penal approach that can consider the needs of staff and prisoners, as well as attend to the decreasing levels of safety, is welcomed.

3.6 Conclusion

This literature review has provided an overview of some of the key governmental changes and penal policies which have resulted in the steady decline of safety and effectiveness across the UK prison service. The three key phases of prison policy rhetoric development that I included; *Phase 1: Pro Containment*, *Phase 2: Breaking the Cycle, Pro-Rehabilitation?* and *Phase 3: Penal Accountability*, help to paint a picture of the inconsistent and ineffective prison policy rhetoric that has halted the rehabilitative potential of the prison service. This review has indicated that the prison service is unambiguously unsafe, as the rising levels of violence, self-harm, deaths in custody and use of NPS continue to indicate. As a result of the failed prison policies and lack of direction in penal reform, the prison staff and the prisoners are situated within a prisoner service that is being negatively impacted by chronic levels of disempowerment and lack of resources.

Further, this chapter has explored key prevalent and increasingly concerning needs within the prison service, including self-harm, substance misuse, aggression and/or anger. Moreover, these have been discussed alongside trauma theory, in order to explore them as potential manifestations of previous trauma. To explore the way a custodial sentence is experienced by a trauma survivor,

the sociology of imprisonment is helpful scholarship, as it attends to the psychological pains of imprisonment. As such, I have argued that for a trauma survivor, the experience and adaptations to imprisonment are likely to be exacerbated. Therefore, the trauma histories of prisoners are important considerations, for academics and policy makers alike. By policy makers adopting and therefore extending the knowledge of trauma, this can encourage a much more robust discussion, in order to develop the much-needed penal support strategies for both staff and prisoners. Alternatively, for penologists and victimologists, by incorporating the knowledge of the trauma histories of prisoners into the academic debate, this opens up a multi-disciplinary dialect, to further our understandings of the complex manifestations of trauma within prisoner populations and the subsequent impact this has on the working lives of prison officers.

Therefore, in light of the issues discussed above, this review has considered the worth of a trauma-informed penal approach. Further, I have explored the implementation of the trauma-informed approach and gathered what empirical evidence exists, to posit that this may have the potential to address some of the issues with safety and disempowerment across the prison service. The benefit of this approach can be identified in the attempt to challenge the lack of support, guidance and training provided to staff; in order to support the M&C needs of the prisoner populations. Moreover, this approach could facilitate the potential to alleviate some of the pains of imprisonment and wide spread penal disempowerment as well supporting prisons to provide better provisions, in order to address the long-lasting legacy of trauma.

In the following chapter, I will introduce the philosophical and methodological strategy of this research. In addition I reflect upon the nature of researching trauma and the introduction of the trauma-informed methodological strategy that I developed in order to better protect both my participants and myself, as a researcher, during this sensitive-natured research inquiry.

Chapter Four

Introducing the Trauma-informed Methodological Strategy: Reflections on Researching Trauma.

4.1 Introduction

Within this chapter I will set out the rationale behind the research and how my practitioner experience informed my ontology, epistemology and methodological strategy. To explore the manifestations of previous trauma, I gathered three key perspectives. This included hearing the experiences and reflections of;

Sample Group 1: Former Prisoners (N=17)

Sample Group 2: Prison Staff (N=24)

Sample Group 3: Third Sector Community Based Staff (N=12)

In order to conduct research in such a sensitive topic area, with 53 participants, across four UK public sector prisons and two organisations, a robust ethical and methodological strategy was required. This chapter explains the associated philosophical and theoretical underpinnings that influenced the way in which my research was conducted. Although my positionality as a former prison staff member has been explored in Chapter One, I will explore the way in which my practitioner experience inspired me to develop the trauma-informed methodological strategy. I created this strategy in order to increase and facilitate five core values of safety, trustworthiness, choice, collaboration and empowerment. These values are fundamental to both the research and methodological design. In addition, this chapter provides a detailed consideration of the recruitment of the three participant sample groups and their associated research design.

Although ethical considerations are a priority within all research projects, when researching traumatic and emotive life experiences, they are intensified. The chapter therefore explains the

safeguarding measures I put in place to ensure the safety of both the participant and myself as the researcher. Within this section, I will cover informed consent, data storage, anonymity, as well as findings from pilot studies I conducted. Following this, I will then explain the ethical processes associated with both the University and NOMS. Additionally, I will explore the ways in which I analysed the findings of the data.

Within this chapter, I will embrace my reflections, the labours and resolutions of my experience researching a sensitive subject area to emphasise the importance of protecting yourself as a researcher during the entire research process.

In the final section of this chapter, I share the way in which I analysed my data in order to structure and present the breadth of data I was able to capture.

4.2 Rationale and Research Design

The extensive literature reviews in Chapter Two and Chapter Three highlighted challenges in recognising the needs of trauma survivors in prison; as well as certain areas that required some additional investigation. The gaps in knowledge that I identified, helped to form the research questions that I present below.

The overarching research to be explored within the thesis asks;

1. In what ways can previous experiences of trauma manifest within prisoner behaviour?

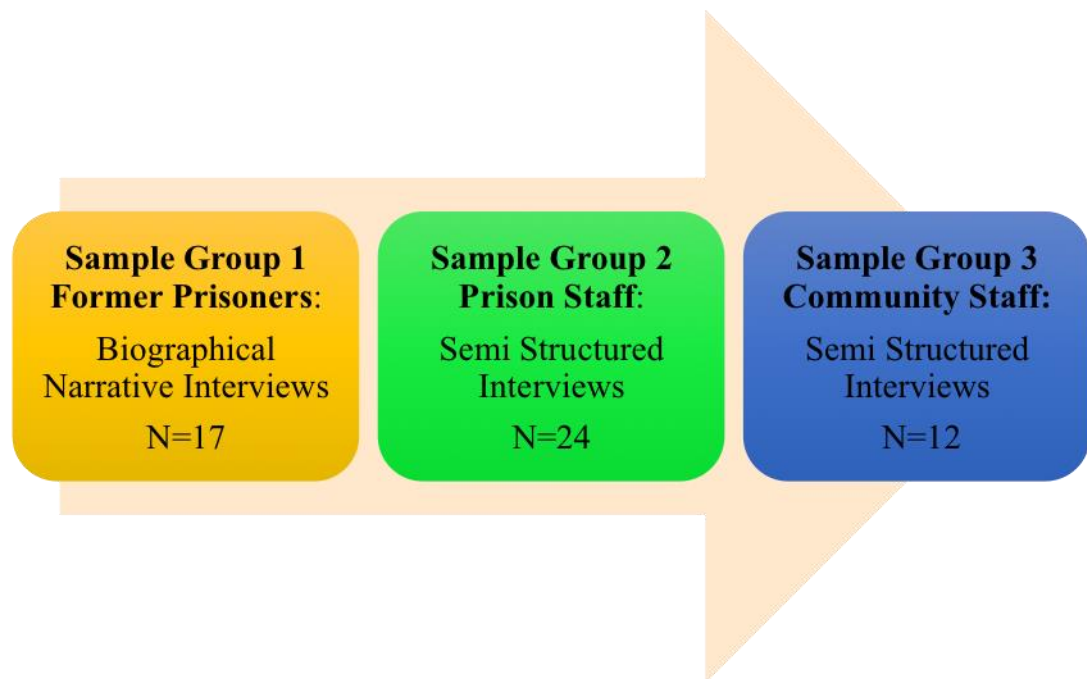
This question will be answered by drawing together data derived from all three sample groups.

Also, additional research questions will be explored, they examine;

2. How does the prison service recognise and respond to the needs of prisoners who are trauma survivors?
3. How are staff working with trauma survivors supported?

The figure I present below displays the three sample groups within this research.

Figure 4.1 Sample Group Overview



Sample Group 1: This sample group comprised of 17 (9 female and 8 male) individuals who had been in prison and had accessed third sector community support services. This group took part in biographical narrative interviews ranging in time from 45 minutes to almost 5 hours.

Sample Group 2: The 24 (15 male and 9 female) prison staff interviewed had varying roles. Staff grades included prison officer, senior officer and governor. I have grouped the staff collectively as 'prison staff' to avoid participant identification.

Sample Group 3: This sample group included 12 (11 female and 1 male) third sector community based staff, working within two organisations, to support the M&C rehabilitation needs of individuals accessing their services.

4.2.1 Philosophical and Theoretical Underpinnings

To research the adverse life experiences of former prisoners, the challenges faced by staff that support them and the sensitive reflections of all of the participants included in this study I adopted a dual epistemological approach, influenced by both the interpretivist and the feminist standpoint. Although I present the two approaches separately, they should be primarily considered as mutually

and inextricably interrelated, as replicated in ontological and epistemological positions within social research (Bates and Jenkins, 2007). The ontological and epistemological positions within social research are complex due to their interwoven relationship. I utilise a constructivist ontological position as this contributes to the purpose of this thesis to consider the distinctive perspectives of different individuals, within unique situations, that are all valid and integral within their own right. Indeed it has been argued that constructivism is more generally synonymous with interpretivist approaches (Schwandt, 1994). Adopting a constructivist ontological position and an interpretivist epistemology aids my research to “see the world as constructed, interpreted, and experienced by people in their interactions with each other and with wider social systems” (Tuli, 2010:100). More specifically, constructivists believe that knowledge is created, rather than found or discovered, it can be invented in order to make sense of experiences and as such, new knowledge can be generated in this way (Denzin and Lincoln, 1994). I selected this ontological thinking as it lends itself practically to trauma-informed considerations. For example, a trauma-survivor may adapt their behaviour and coping strategies, as they attempt to make sense of their experiences, thus generating new knowledge, specifically related to their lack of safety. However this knowledge can also be re-constructed within TIP. Practically for this research the ontological and epistemological positions allows me to acknowledge the individualistic experiences and intertwining complexities of all of my participants.

4.2.1.1 Acknowledging Everyone: Incorporating Interpretivism

Interpretivist researchers place emphasis onto understanding the world through first-hand experience from insider perspectives, as well as encouraging their participants to share their perspectives freely. This is reliant on “the investigators quest for insight into a phenomenon that the participant has experienced” (Tuli 2010:100). The theory of knowledge associated with interpretivism, advocates that reality can be relative, multiple and fluid (Lincoln and Guba, 1985).

Therefore with this in mind, I developed the most appropriate interviewing techniques in order to fully capture the experiences of participants. In line with my epistemological foundations, I opted to collaborate with participants to increase their flexibility, freedom and choice in the narration and

the nature of the information they choose to share, in order to encourage participants to feel like they are “writers of their own history rather than objects of research” (Tuli 2010:101). Within the work of symbolic interactionist scholars (Blumer, 1969; Goffman, 1959; Plummer, 1995), interpretivist knowledge can be understood through subjective and socially constructed approaches, this enables a diverse interpretation of human behaviours, rather than through the production of generalisable data, underpinned by values relating to cause and effect (Angen, 2000). To consider the varying perspectives of participants within this research, Cohen, Manion and Morrison (2007:19) argue that interactionist empiricism can aid us to “understand, explain and demystify social reality through the eyes of different participants”.

Therefore this research places emphasis onto the researcher acting as an architect to work collaboratively with participants to encourage a narration based upon freedom and choice.

4.2.1.2 Reflective Research: Embracing the Feminist Standpoint

A common feature of the feminist standpoint is the focus it places on understanding the world through the experiences of those who experience oppression. The feminist standpoint advocates a knowledge gathering process to “start out from and look at the world from the perspectives of women’s lives” (Harding, 1991:124). As a female researcher, this was an obvious selection for the sensitive nature of this research inquiry. The distinctive social position of women has been argued as a potential way to view the world in a more reliable way (Harding, 1991). Although I do not adopt a feminist standpoint in its entirety, I do adopt many of the integral foundations of the standpoint, specifically when conducting my research.

For instance, reflexivity and the more practical elements within my research design have been advocated by feminist researchers. Having taken a feminist inspired critical victimological standpoint and a trauma-informed approach, the importance of respecting and empowering the participants in this research was at the forefront of the ontological and epistemological consideration. Although there is a lack of direction as to what a feminist methodology is, Flick, Kardorff and Steinke (2004) champion qualitative research in order to reflect on an individual’s

world from their perspective, but to also contribute to the understanding of social realities from the participant's point of view. As Westmarland (2001:No Page) articulates "feminism is primarily a movement for social change and only by delving deeper than the surface can we find out not only what needs to be changed, but also how it can be changed". This added to the inspiration that led to the creation of the trauma-informed methodological research strategy (Section 4.4).

4.3 Ethical Considerations and Reflections

Ethical considerations are always the foundation of any research project. As bound by the University of Northumbria Ethics Committee, when I applied in June 2015, I made a professional commitment that I would protect my participants from any harm during the process of my data collection. A large part of conducting ethical research relies on the researcher ensuring that the data collection methods are appropriate (Harvey, 2008). Therefore the trauma-informed methodological strategy that I developed prioritised the safety and empowerment of all of the participants. The research design was influenced by the trauma-informed approach, whereby participants could expect a safe environment and an interview built upon foundations of trust, choice, collaboration and empowerment. Given the sensitive nature of the research, I endeavoured to increase the protection of my participants.

4.3.1 Informed Consent

Written informed consent was collected from all participants. Each participant was provided with an information sheet with details of the research project and FAQs. This information included why they have been selected, what they can expect from the researcher (confidentiality, anonymity, the right to withdraw at any time and how they can do this) and what the researcher will expect from them (see Appendix One, Four and Six). Consent was requested for the use of an audio tape recorder during interviews with each participant in the community and prison setting. Audio recording did not replace note taking; both were utilised in the community setting. Participants were talked through the information sheet and the consent form prior to the interview (See Appendix Two and Five). Each participant was then given a copy of each form to keep. Before the

interview progressed each participant was encouraged to ask any questions about the research or the researcher to build up rapport and trust.

4.3.2 Anonymity

Participant anonymity was a key point of discussion with all participants prior to conducting interviews, particularly prison staff. The anonymity of participants becomes even more important when researching sensitive areas. Important demographics such as age range and geographical locations were collected for identification during data analysis. All data was anonymised in the research and pseudonyms were either provided or chosen by the participant. Thematic analysis was also utilised during data analysis to ensure vicarious identification would be highly unlikely. Any prisoner names that were identified during the interviews with prison staff were removed during transcription. Each participating prison and organisation remains anonymous; to avoid participant identification. Only broad geographical description has been included. Two of the staff working within the third sector requested to be referred to as 'Staff Member' as they felt this protected their identity and gender, therefore I applied this label instead of pseudonyms, across the entire third sector participant sample group.

4.3.3 Data Storage

All verbatim notes and the audio recorder containing data were stored in a lockable drawer set at Northumbria University. A single computer was used during data analysis, was on a desk that was allocated to me and password protected. Northumbria University is bound by the data protection act. All documentation and electronic data was stored on my university U drive, and will be protected and retained for 5 years following thesis submission.

4.3.4 Researcher and Participant Safety

Safety is key to this research and it was important to ensure the safety of all participants and myself as the researcher. There were a variety of protection measures in place for the participants including extensive debriefs and leaflets for support services (if appropriate). Each interview room was fitted with a phone and one room had CCTV (for the organisation's viewing).

4.3.5 Prison Service and NOMS Ethical Approval

In my first attempt to gain ethical approval from NOMS National Research Committee in September 2015, I was unsuccessful. However, this led to a revised and more robust research project.

Originally I had submitted to collect data with prison staff and prison listeners to establish how prevalent previous trauma was. In total, there were eight reasons why my application had been unsuccessful, however there were three key issues that would require me to reconsider my approach. The feedback stated:

Further to your application to undertake research across NOMS, the National Research Committee has considered the information provided and is unable to support your project at the present time.

Reasons are as follows:

- The Committee felt that the potential benefits to NOMS (including how the findings could be operationalised) were insufficiently elaborated and did not justify the resource demands (assisting with identification/recruitment, accompanying the researcher, staff interviews) involved.
- It was unclear why prison listeners were being targeted, bearing in mind the consequent reliance upon second hand information, potentially producing partial or inaccurate results.
- It was also felt that the proposed Listener interviews were complex from a consent and ethics perspective; Listeners would need to avoid breaking confidentiality expectations, but their participation could still result in a loss of trust from other prisoners, negatively impacting the service.

Following this I re-developed my strategy. I removed the prison listener sample as this was not the appropriate sample due to confidentiality issues, and I continued with the plan to request access to interview prison officers. In the meantime by January 2016, I had found and started to research TIP and I had also begun to explore the potential of this approach. From this point, I began to intertwine TIP within my research design.

Whilst gaining access to third sector organisations, the NOMS application re-writing process was ongoing. I also sought the informal support from the governors of the prisons I was targeting for access. I decided to capitalise on my previous contacts and email each governor working in the four prisons, to provide them with some information about the research. I stated that in advance of any decision making that might be made, I was seeking NOMS ethical approval and I wanted to introduce myself and my research to them. I hoped that this would speed up the process of entering the prison, should I secure ethical approval from NOMS. Three out of four governors responded either by telephone or email with their support. I was able to use these emails to support my NOMS application. One governor sent me a card in the university mail, thanking me for being courteous and requesting their support. The card explained that many research requests 'land' on their desks every week without any prior notice or introductions and they valued my approach. By May 2016 I was granted NOMS ethical approval with provisions that I would amend participant documents with some additional information. I contacted all of the prison contacts I had been allocated by three governors and requested dates for interviews with their staff. I will discuss how I gained access to the final prison in Section 4.5.2.1.

4.3.6 Ethical Realities

During interviews with former prisoners, concerning examples and encounters with prison staff emerged. Specific examples included prison officers being violent to the men I interviewed, as well as prison officers being sexually inappropriate to women. As a researcher, it was important for me to ask my participants if they would like me to report this information. Thankfully, one example had been reported to a community based key worker and they were in the process of pursuing the matter. In this case, the prison officer in question had been suspended from a prison in the South West. However, one of my participants was adamant that he did not want me to report his example. He stated that he could not go through with the ordeal and wanted to move on from it. This is challenging for researchers ethically. However in this case, I think it is important to stay true to my participant's wishes, despite my feelings about the issue. This research resulted in many

conversations with my supervision team and the faculty head of ethics at the time, to provide guidance with this particularly sensitive research study.

4.4 Introducing a Trauma-informed Methodological Strategy

I was determined to adopt the most empowering form of interviewing style, in order to fully support each participant to explore their story. My ambition to develop a trauma-informed methodological strategy was influenced by my previous role as a DART (Drug and Alcohol Team) programmes facilitator. Within my role, I delivered and designed cognitive behavioural programmes offered within a public young offenders prison and a public closed female prison. Alongside the group work, I provided 1:1 key work with men and women on my caseload for the duration of the programme.

Within this role, I was able to get to know prisoners through various tasks designed to help them explore their behaviour in additional depth. Often, the activities were designed to encourage reflection and positive behaviour change through increased knowledge and awareness of their behaviour, triggers and substance abuse. Many of the activities were designed to explore adverse life experiences of the prisoners in connection with their substance abuse history. One of the exercises we used was entitled 'My Story', and this task could either be completed in an individual's cell or in collaboration with a facilitator in a 1:1 session. Individuals were able to choose if they shared their story with the group in the following session. The 'story telling' that was produced from this task ranged from timelines, drawings, songs and even raps. Some were shared in-group and many individuals were signposted to mental health teams for additional support. The timeline was the best way to help an individual reflect and articulate their life chronologically. Often, individuals partaking in the programme had not contemplated their childhood or their experiences of adversity or trauma as significant. Yet often, this was connected to their substance abuse and the challenging behaviours that they presented in prison.

I opted to complete optional timelines with participants as part of this research, to inject a therapeutic element into the interview with sample group 1. Only one timeline (See Appendix

Three) was completed during the course of the research, however, several participants used the sharpie pens and a3 paper to scribble down words, key phrases and even to doodle, as a grounding tool during the interview.

As identified within the work of Harris and Fallot (2001) and Covington (2015b), the five core values of trauma-informed services are safety, trustworthiness, choice, collaboration and empowerment. These were key elements of the methodological and interview design I implemented with all of my participants. The aim of all of the interviews with participants was to investigate their experiences, and most importantly provide a safe interview space where all participants would leave feeling empowered and positive about their future, whether that was their future rehabilitation goals or career goals. To achieve this, I designed the interview questions using empowering communicative techniques that I had acquired when I was a programmes facilitator.

To facilitate a trauma-informed methodology within the biographical narrative interviews and semi-structured interviews, I organised the following;

- **Safety:** All interviews were conducted in a familiar setting for participants; I requested that a comfortable room should be chosen to relax the participant. I provided all participants with a contact where they could seek additional support following the interview. For former prisoners, this included the contact details of their key workers. For community based staff, their contact was a colleague within their team. For prison staff, their point of contact was a colleague working within their specific prison. Further, I used positive body language, non-verbal cues (eye contact, nodding etc.) to ensure that the participants knew I was actively listening. I explained the research in detail, as well as how I would protect their identity and the data they provided.
- **Trust:** To establish trust, I started each interview telling the participant something about myself, this tended to be something about my previous role in the prison service. I asked some questions about each participant, how their journey was to the interview or how their day has been to produce rapport and trust. I set clear boundaries and informed them how I would respond if they disclosed something that could put them or someone else at risk and

how I would act if they disclosed something I deemed to be a safety risk. I also brought in refreshments to each interview to develop a rapport and comfortable feel to the interview.

- **Choice:** All participants had an element of individual choice and control over their interview. For example, sample group 1, could choose what memories they disclosed to me, as well as what adverse life experiences they wished to focus on and how much depth they wished to go into. As I will explore in Section 4.5, the biographical interview questions were developed on the spot and were derivative of what the participant disclosed, therefore this increased the flexibility and control for the participant. In addition my ethical principles guided how I conducted interviews as described above, information was provided to each participant and informed consent was gained in every case.
- **Collaboration:** All participants were asked to share their personal experiences and reflections during the interview. I asked each participant about themselves and their lives. For example, in Sample Group 1 participants were asked about their experiences pre, peri and post prison. Sample Group 2 participants were asked about their experiences as prison officers, but also how they de-stress and what self-care strategies they adopt outside of the prison. Similarly, Sample Group 3: participants were also asked to reflect on their self-care routine outside of work and to think about the way their role has impacted them. Each interview was personalised and moulded by the input and collaboration of participants.
- **Empowerment:** All participants were provided with opportunities to discuss the ways in which they endeavoured to succeed in the future, whether this surrounded their recovery or desistance goals (former prisoner sample), or more general life goals, for example furthering their career or education (all participants). The final element of each interview with all of the participant sample groups included questions surrounding their hopes for the future and ambitions. This was done to try to ensure that all participants left feeling positive and empowered.

Qualitative researchers are often concerned with the development of trust, rapport and effective communication with participants. As Denscombe (2007) argues, the success and/or failure of

qualitative interviews can be impacted by the researcher's ability or inability to build rapport with their participants. Additionally the author argues that the perceptions the participants hold over the researcher's motivations may impact the responses provided (Denscombe, 2007). To avoid this issue, I spent considerable time attempting to break down barriers prior to the interview, I utilised my sense of humour to build rapport as suggested by Opie (2004). With staff, this began at the very beginning through email and telephone contact and then within the interview itself. Specifically with prison staff in mind, they work within a distrusting environment and I was concerned about the amount of information and honesty they would share with a researcher. Therefore at the beginning of each interview, I allowed each participant to ask me questions, and this helped to open up a dialogue with many prisons staff members particularly. This informal quiz helped them understand my intentions, the purpose of the research, my positionality and how their data will be used. This method worked very well to reduce some of my participants' anxieties and resulted in lengthy interviews.

In addition to the optimum safety of participants, I also aimed to position the safety of myself as the researcher, as a key priority in the trauma-informed methodological strategy. There is not enough information or scholarly discussion surrounding the protection of researchers, when conducting sensitive research. I began to question early on why it is that we provide participants with robust protection strategies, yet (as researchers) we do not afford ourselves the same considerations. As a researcher, I embarked on a strict self-care regime, in order to avoid researcher burnouts and vicarious trauma, associated with listening to traumatic experiences.

The interviews were naturally emotive, and it was common for participants to become emotional, when they were describing something particularly painful to them. Some of the stories and levels of resilience of my participants impacted me emotionally and when I arrived at home, I regularly experienced feeling physically and emotionally drained. Liebling (2001:474) argues that "the capacity to feel, relate and become 'involved' is a key part of the overall research task". Further, Gilbert (2001) acknowledges that a central aspect of our humanness is connected to our ability to feel and express our emotion. Alternatively, Kleinman (1991) argues that there is a concern within

academia that to show emotion and feelings, would be sending the wrong message, therefore it has been suggested that as social scientists we should be trained to “suppress emotions” (Bellas, 1999:104).

However, as a trauma-informed qualitative researcher, I disagree. Rather, I agree with Liebling (2001) and Gilbert (2001), as I would argue that it would be concerning, if I did not experience some sort of emotion following researching a sensitive area. Dickson-Swift et al., (2009:65) conducted interviews with researchers to investigate their experiences of expressing emotion during data collection. One of their participants stated;

“I become emotional, perhaps I cry but it’s really not a bad thing – it tells me that I have connected. I have got to the essence of their story and they have told it so well that I can feel their pain... It opened my eyes and my heart to the horror of some people’s lives”.

Another of their participants acknowledged that research would be easier if they were a “robot that had no capacity to feel anything” (Dickson-Swift et al., 2009). However, as research conducted by Maslach (1982) indicates, the face-to-face interviews that are particularly emotionally charged can be associated with emotional exhaustion for researchers. Whilst it has been noted that not all researchers experience conducting research in the same way (Dickson-Swift, 2009), it is important to acknowledge the potential of burnout and the importance of a self-care routine for researchers.

As such, James and Platzer (1999: 76) argue;

“Self-care is crucial, but where there is considerable emotional labour involved in research interviews we suggest that there is a requirement for formal supervision, not only of the academic but also of the therapeutic kind”.

Within the trauma-informed methodological strategy, I ensured that I had stringent debriefing process in place, whether that with my supervisory team, or informally with friends or partner. However, there is not enough attention afforded to this area, and it is certainly an area worthy of additional exploration by researchers.

4.5 Exploring the Three Sample Groups

As acknowledged in Figure 4.1, three key sample groups were included in this research. The samples were collected separately, analysed independently from one another as individual group narratives. Sample group 1 was afforded their own data chapter, to freely explore emerging themes. Although Sample Group 2 receives a large proportion of the data analysis chapter (Chapter Six), the data collected from Sample Group 3 is combined in the chapter due to its relevancy and ability to provide a greater level of analysis.

4.5.1 Sample Group One: Former Prisoners

Seventeen former prisoners were interviewed in this sample group. Out of those individuals, 15 had been in prison within the last 3 years, and 2 had been in prison within the last 5-10 years and were now practitioners working within the organisations targeted for data collection. All of the participants took part in biographical narrative interviews to elicit in-depth exploration into the pre, peri and post experiences of incarceration. I selected two organisations that worked with individuals who had M&C needs, who had been in prison, and who worked within a trauma-informed approach. Once approval was granted, I utilised a snowball sampling method, whereby I asked staff to identify if any of the men and women that they worked with would like to take part. Harding (2013:18) indicated that this sampling strategy is often used within research where there are "difficult ethical questions to address". This method of sampling was utilised for the recruitment of all sample groups. Snowball sampling has been described as a convenient method, particularly when used to collect data from 'hard to reach' populations (Biernacki and Waldorf, 1981; Heckathorn, 2012). Further, Maganani et al (2005:69), suggests that snowball sampling;

“Entails identifying an initial number of subgroup members, from whom the desired data are gathered and who then serve as seeds...to help identify other subgroup members (i.e. individuals who engaged in the same types of behaviour) to be included in the sample”.

One of the advantages of this method was that this added an additional layer of participant trust, as all participants were reassured as their key workers supported the research and they were also taking part in it. Please see Appendix Thirteen to see a table of participant demographics.

I have discussed the multiple advantages of employing snowball sampling, however there are exclusions which have impacted the levels of diversity within this study. On one hand, gathering participants through their keyworkers enabled an additional level of trust. For example I have discussed the levels of mistrust trauma survivor's experience, particularly with regards to engaging with practitioners (Covington, 2015a). Therefore it was advantageous to have the participants key worker support the recruitment and advocate for me and the research. However, it important to note that not all potential participants will have had positive relationships with their key workers and in these cases, key workers' support of the research may in fact have made the potential participants less likely to participate. This might apply particularly to certain groups of people, such as those whose experience of trauma involved people in authority and BME people whose key workers were not sensitive to or understanding of issues of ethnicity and racism.

In terms of representativeness, the snowball sampling strategy is problematic as it can exclude certain groups and individuals, thus creating a non-representative sample (Browne, 2005). Further my sample size was small and included the narratives of only one BME former prisoner and one BME prison officer. The findings of this research are not representative of the ex-prisoners or prison officer experience in anyway, including ethnicity and BME. Their narratives did not veer towards a discussion of trauma related to ethnic status, racism or discrimination. Neither did I feel it appropriate to ask directly about trauma related to ethnic status nor racism, as this was not in-line within my epistemological approach enabling choice in participant narration. In light of this Browne (2005:51) stated that we cannot assume "one or two people can speak for a sector of the population, such as 'black', 'working class' or 'disabled' groups". She argues that this would equate to 'tokenism'. Therefore despite snowball sampling enabling recruitment through connections, there will be individuals excluded from these connections. As a consequence of the sampling strategy it is important to note that rich representations of diversity and ethnicity are absent from this research.

However, this limitation points towards an area of further study, to incorporate the voices of BME trauma survivors and their experiences of racism, discrimination and prison (See Phillips, 2012; AVA and Agenda, 2017).

4.5.1.1 Interview Method

According to Hyden (2008:124), the single factor of success in gaining narratives on sensitive topics is the ability to develop a "jointly conducted enterprise between the interviewer and interviewee". Taking this into consideration, I opted to conduct biographical narrative interviews, to explore "how people interact with others, and construe, symbolically, the problems they face" (Merrill and West, 2009:59). Additionally, following the feminist principles I aimed to build equality and democracy within the relationships, to enable a natural conversation, rather than an interview (Merrill and West, 2009). In order to achieve this, I used only the most general interview guides to enable participants to "construct and explore their own culture and psychological worlds" (Merrill and West, 2009:116). As Hyden (2008:123) advocates, the "ideal interviewer" should be more of a "listener than a questioner", therefore the biographical narrative interview was developed with these attributes at the core.

As already mentioned in Section 4.2, the use of a timeline was an option for participants to articulate their experiences in a non-verbal way. Only a small minority utilised this. For the majority of individuals, the biographical narrative interview was conducted in three stages. Each stage of the interview was initiated with a single open question, which I present below. Inspired by Wengraf (2001), I allowed the participant to speak freely with minimal intrusion, allowing only for non-verbal communication, to confirm that I was actively listening. When the narrative came to a natural end, I would then ask more structured questions shaped by the information they had provided. The single open questions asked during the all-biographical narrative interviews were as follows.

1. **Life before Prison:** 'Can you tell me a little bit about your childhood- how was that?'

2. **Life in Prison:** ‘Can you tell me about your experience of prison, how was your first night?’
3. **Life after Prison:** ‘What has life been like since you were released from prison?’

Following questions emerging from the narrative, I would then ask the next open question for the following stage and the interview would continue in that format, until the participant’s narration had come to a natural end. In Wengraf’s (2001) interpretation of biographical interview methods, the interview is separated over two sessions. Due to the nature of some of the interviews and participant commitments, I decided to shorten the interview to conduct the three stages within one interview session, as some participants were still under offender supervision and other rehabilitation appointments. Thus, the interviews were shorter and I conducted the full three stages in one interview session.

4.5.1.2 Interview Location

The interviews with clients of an organisation in the North East were carried out across two separate services. One womens only service was located within a women's hub centre, the other service was a male and female homelessness drop-in service. The interview rooms in both services were selected based on optimum researcher and participant safety. Interviews conducted with the second organisation were held at a women's only centre based in the South West. This service allocated a comfortable and private room to ensure participant and researcher comfort and safety. All participants were offered coffee/tea and sweet treats to encourage an informal and comfortable interview setting.

4.5.1.3 Pilot Interview

Before conducting interviews with Sample Group 1, I asked a friend and former colleague to take part in a pilot. My pilot participant had at one stage been incarcerated, had accessed services whilst active in addition, but was now in recovery and had been for 10 years. At the point of interview she was now a practitioner working within drug and alcohol services. According to Nee (2004) pilot interviews are useful to test out if appropriate language is being used during the interview

questions. The use of a pilot interview was helpful and constructively informed the development of the biographical interview method.

The visual timeline was described to the participant as an optional method that may be used to help her visualise her life experiences in more detail. I provided colourful sharpie pens and A3 card to use for her timeline. This I had envisaged as a therapeutic tool to aid the discussion and articulation of her experiences, whilst allowing the pilot participant to have control over the information that they share. Within the traditional biographical narrative method there is no visual or creative element to support the participant's narration. Findings from the pilot study indicated that the timeline "added a safe, calming and therapeutic element to the interview". However, in the main study, only one participant utilised this option (See Appendix Three).

The biographical narrative interview method was critiqued by the pilot interview participant. The open ended questions were not helpful for the pilot participant's narrative story. She stated that she would have felt more comfortable if I had been asking her more questions. In a follow up pilot, I began to ask some more probing questions based on the information she provided and at the end of the interview, the pilot participant stated "I felt like I was in the driving seat in the interview, it was refreshing".

The feedback that I received from my pilot was useful. In particular, I was mindful that in the main study, participants may benefit from being asked additional questions if they struggle to structure their narrative story. However in the main study I only had to use additional questions with 3 participants. Although preparation questions were recommended by Alheit (1982 cited in Merrill and West, 2009) I created questions as the participants were talking, as a way to signal that I was actively listening, but also to ensure that they remained in control of their narratives.

4.5.2 Sample Group Two: Prison Staff

This sample group consisted of 24 prison staff members who were based across four public sector prisons. The snowball sampling method was employed in the following prisons.

1. **Female Open Prison:** Location- Yorkshire and Humberside (Participants: 3 men 3 women).
2. **Male Open Prison:** Location- North East (Participants: 4 men 2 women).
3. **Female Closed Prison:** Location- North West (Participants: 3 men 3 women).
4. **Male Closed Prison:** Location- North East (Participants: 6 men).

The majority of prison staff participants (N=21) asked me whether or not the prisons would be named in the research. I specified in the information sheet (Appendix Four) that they would not be and I would refer to them only by classification and location. This put staff at ease from the outset, as they were worried about potential identification. Anonymity of participants will be discussed in Section 4.4, however this was a particularly poignant matter for prison staff.

4.5.2.1 Interview Method

Semi-structured interviews were conducted with this group to allow participant freedom to drive the interview towards what they deemed important, and to produce "reliable, comparable qualitative data" (Cohen and Crabtree, 2006:170). Those interviewed held a range of experience; the shortest time served by an officer was 6 years and the longest time served was 28 years. Many of the prison staff interviewed had worked in several other prison sites and with both male and female prisoner populations. This enhanced the interviews as staff were comparing, contrasting and reflecting upon their prior experiences across a variety of prison sites, as such their experiences were not solely derived from the establishment where they were based, or within the four data collection sites I had access to. To gain access to the prison estate I requested ethical clearance from NOMS. Once access had been granted, I contacted the governor of each prison to request a point of contact that I could liaise with to help recruit my sample. All of the contacts I had within the prisons were helpful. Through the snowball sampling method, the contacts recruited prison staff based on availability and role within the prison. Once participants were identified, a date was set, interview room was booked and I attended with my recording equipment.

Early on in the research design process, I acknowledged that I would have to relinquish some control. An example of this concerns my sampling strategy as I did not select my participants. Carlen and Worrall (2004:185) suggest that researchers should work to suit the prison as staff in prisons can be "wary of researchers, especially of any who fail to show appreciation of prison staff priorities or institutional concerns". Although there are limitations associated with not being able to select participants, it would not have been feasible in the prison environment.

It became clear after the first set of interviews that I was interviewing the most caring and compassionate officers that each prison had to offer. Due to the nature of the research, I believe that the prison selected the best representatives of prison officers. Although I was initially critical of this, the interviews were detailed, reflective and emotive and had I interviewed a less engaged officer, this may not have resulted in the rich data I have.

Furthermore, each prison environment was unique. In two of the prisons I was allowed to spend extended time there. I took part in tours and had time to integrate into the environment with the staff. The other two prisons allocated participants 30 minutes each for their interview. As I was debriefing one participant, another participant was knocking at the door for their time slot. Although this was time-efficient, it did not allow for any freedom within the interview, which I believe impacted the comfort of my participants.

During the final stages of data collection, the fourth and final prison was not responding to any of my communication and I was beginning to get anxious. I decided to capitalise on the contact I had made with a local prison governor. I asked him if he could help me contact the governor of the other prison. Within an hour of leaving that meeting, I was copied into an email encouraging the other prison to take part in the research. Within two weeks I had completed my data collection across the four prisons.

4.5.2.2 Interview Location

All prison staff interviews were conducted within each of the four prisons. The prison contacts identified the rooms, all of which were comfortable and on one occasion the prison provided

refreshments. Conference rooms were used on three occasions and one interview was conducted in a governor's office.

4.5.2.3 Pilot Interview

I recruited a former colleague who had worked as a prison officer for 8 years to test out my interview schedule. The findings of the pilot interview indicated that issues with resources and lack of staff presence could potentially be themes that I had not considered during the interview schedule development.

4.5.3 Sample Group Three: Third Sector Community Staff

The two organisations and three services included within this sample group were as follows.

Organisation 1 (North East): They worked to support the M&C needs of men and women. A variety of services are offered, including housing, rehabilitation and local prison in-reach. Here I conducted 6 interviews with staff (5 women and 1 man).

Within this organisation, I visited two of their services (See Appendix Eleven).

Service One: This service provided both an outreach service, as well as a drop-in service for men and women who were experiencing multiple exclusion homelessness.

Service Two: This service was a women's only trauma-informed service to support a variety of women's rehabilitation needs.

Organisation 2 (South West): This organisation also works to support the M&C needs of men and women. There are a variety of services offered, including sex-worker support centres, rehabilitation support and local prison in reach. Here I conducted 6 interviews with staff (6 women).

Service Three: The third service was a rehabilitation focused womens only centre that operated under a trauma-informed approach (See Appendix Twelve).

The three services are where both Sample Group 1 participants and Sample Group 3 participants were recruited. In line with the snowball sampling method I described earlier, the managers of the

three services were able to identify staff who 'drew keys' (term used by staff to describe having access to keys in a designated prison). They provide "through the gate" support to both men and women to establish links to services, with the aim to engage individuals in preparation for their release from prison. Many of the staff interviewed had advanced training in mental health awareness, personality disorders and trauma-informed care. The roles of staff varied from key worker to managerial positions, however the roles of participants will not be included so to avoid vicarious identification.

4.5.3.1 Interview Method

The interviews conducted with 12 staff members were semi-structured interviews (See Appendix Eight for themes). The interviews lasted no longer than an hour and covered various topics to answer the overarching research question from their perspective, as well as answering research question 3. Semi-structured interviewing enables the researcher to develop a natural conversational flow and there is an element of flexibility within this method (Berg, 2007). The merit of using semi-structured interview methods is considered as a way to allow participants the chance to present an "account of the values and experiences meaningful to them" (Stephens, 2007:205). Therefore the interviews I conducted contained open-ended questions in order to provide participants with enough choice to personalise their response (Bryman, 2008; Kvale, 1995). Asking questions about their role and allowing the participant to reflect on the entirety of nuances of their role supported the role of the interpretivist research to "make the familiar strange and interesting again" (Erickson 1986:121). As a qualitative researcher, this allowed me to provide a flexible platform for participants to draw upon their experiences in an empowering way.

4.5.3.2 Interview Location

The interview location for the community staff was a pre-booked room within each of the services. I considered the participants' distance from management and colleagues when selecting the interview location. Elwood and Martin (2000) suggest that an important consideration is the interview location, as this may influence the power and positionality of participants.

4.5.3.3 Pilot Interview

I recruited a former substance misuse colleague whom I worked with in the prisons to test the interview method and questions. The findings of this were positive, as it was a good indication of how much time to allow for interviews as well as potential paths and themes to be mindful of in future interviews.

4.6 Data Analysis

My analysis was thematic and this was decided prior to entering the field. This meant that I could transform the data from individual stories and case studies into two data analysis chapters. The data chapters aim to present the emerging themes and sub-themes identified during each data analysis. Each sample groups' data was analysed independently, and any relationships between the data sets will be explored within the analysis chapters (Chapter Five and Chapter Six).

4.6.1 Using Thematic Analysis

For Gibson and Brown (2009:128-129) the three aims of thematic analysis are to:

1. Examine commonalities within all of the material.
2. Examine differences within all of the material and the subsequent relevancy to the issues and themes.
3. Examining relationships within the thematic data to see how they can fit together to contribute to the understanding of key issues and themes.

Harding (2013) outlines the difficulty researchers have completing the third stage of thematic analysis. He suggests researchers will often examine the commonalities and differences without ever progressing to the examination of relationships. However, adopting the constant comparative method of thematic analysis ensured I could identify relationships emerging from the data samples. According to Rager (2004) this is an additional way to create linkages and relationships within the dataset.

With this in mind, I opted to follow the six stages of thematic analysis as identified by Braun and Clarke (2006) to increase my familiarity with the data. The stages include:

1. Familiarise yourself with your data
2. Generate initial codes
3. Search for the themes
4. Review the themes
5. Define and name the themes
6. Produce the report

Although this framework influenced the analysis process, I did not follow the stages in a linear manner, rather I often returned to previous stages. Auerbach and Silverstein (2003:32) posit that there is no conclusive way to analyse a data set and that the decisions taken by the researcher therefore incorporate an element of subjectivity.

Below, I display the robust analysis method that I employed. Data analysis is at times complex and disordered due to the tendency to glance back and forth between data sets and participant narratives. However, this process enables a much deeper analysis and familiarity with the data.

Stage One: Critical Literature Review

My literature review informed the research design and the semi-structured interviews. The main themes developed from the literature review helped to steer my interpretation of the data. The data oscillated between the themes emerging from the ongoing literature review and the data I had analysed.

Stage Two: Collaboration in interviews

Within all interviews, active listening was a fundamental role of mine. The active listening within the interview process was both important for the participant to feel empowered during their

interview, but also to enable the researcher to encourage participants to explore certain emerging themes in more depth, through follow up questions.

Stage Three: Transcription

All 2,733 minutes of interviews were digitally recorded and fully transcribed by myself into Microsoft word. Pauses and error of speech were noted. I felt it was important to transcribe all interviews fully to ensure that participant's narratives and experiences were fully captured (Atkinson, 1998). The lengthy practice of transcription allowed me to re-familiarise myself with the data within the participant interviews and their narratives, as the "closer you can get to the text itself, the closer you are to its meaning" (Atkinson, 1998:57). During this stage, I started to informally code my data by creating notes, highlighting text in colours (emerging beginner themes) and writing short observations. This was a precursor to the thematic process that was to follow. However this stage enabled me to immerse myself within the data.

Stage Four: Initial Coding using NVivo 10

Initially, I uploaded all three data sets into separate accounts on NVivo 10. The software package was used in the first stage of thematic coding as it helped me to categorise the data into four initial themes for each individual sample group. In a second reading, I developed more specific sub-codes within the four main themes. The emerging themes are presented separately for each sample group (See Appendix Nine).

I decided to use computer aided qualitative data analysis software (CAQDAS) to aid my thematic analysis, due to the increased efficiency, as it can enable data to be stored, coded and analysed more efficiently than traditional methods (Tesch 1990; Lewins and Silver 2007). Although software packages like this play no role in the analytical phase or interpretation of results, they have been criticised for exaggerating and reinforcing the fragmentation of the data set (Hollway and Jefferson, 2000). Therefore as a way to avoid this, I revisited original recordings and read through the full transcripts and conducted manual coding. The CAQDAS enabled the initial coding of emerging themes and sub-themes. However to combat the data being manipulated by the

computer (Roberts and Wilson, 2002) and improve the researcher contact, I decided to conduct manual coding as an additional validity measure. Within the manual coding stage, I finalised the themes and subthemes into four distinct categories for each individual sample group. Although the emerging themes from the two coding stages remained the same, I felt the process allowed me to immerse myself within the data.

Stage Five: Manual Coding

Following the broad coding on CAQDAS, I then printed all of the transcripts out and went through the data a third time, this time looking for anomalies, differences and any themes I may have missed on the software. I purchased sharpies and utilised flipchart paper to code the data manually. Though this stage was in-depth and time consuming, it ensured that the data continued to drive the creation of the key themes and sub-codes and it acted as a final check. This stage ensured that I stayed in very close contact with the data. Through the varying stages of data analysis, I looked at the entirety of the data set and at individual sample groups; I feel that this supported my attempts to safeguard the integrity of my analysis.

4.6.2 Validity

Jupp (2006a: 311) defines validity as “the extent to which conclusions drawn from research provide an accurate description of what happened or a correct explanation of what happens and why”. Jupp (2006b) further highlights that the validity of research "reflects the extent to which the findings accurately reflect the data". For the collection of biographical narrative data, the validity lies in the researcher’s ability to build "convincing connections between individual histories and wider social theory as well as humanistic purposes" (Merrill and West, 2009:163). However, simple practices such as reading thoroughly through interview transcripts before, during and after data analysis can enhance validity.

Whilst I was in the field conducting interviews, I kept a methodological diary of thoughts and decisions in order to enhance the reflexivity of the qualitative research, as advised by Gibson and Brown (2009) and Harding (2013). This was both an important and therapeutic outlet for myself,

but also a way to ensure that I engaged in the self-examination of my role as a researcher and reflectively contemplated the implications of my approach on the validity of the research.

Merrill and West (2009:164) argue that there is a

“Preoccupation of hard methodologists who insist on using the same instrument in identical ways; researchers must behave in exactly the same manner in every encounter... if another researcher undertook the same piece of work, on the same terms, in the same setting, they should arrive at essentially the same results; if, that is, the research is to be valid”.

Hard methodologists ignore the realities of rich qualitative data research and the people skills involved in building rapport, as well as encouraging participant trust and engagement. Further, Merrill and West (2009) suggest that qualitative research is relational and dynamic, and the influence of the researcher is important, yet the lack of replication does not make the findings less valid. In addition, Stenbacka (2001) state that issues of reliability are irrelevant when judging the quality of qualitative research and therefore has no relevance within the field of qualitative research. Instead qualitative research should be judged on the examination of trustworthiness and the researcher's ability and skill (Golafshani, 2003).

4.7 Conclusion

In this chapter I have introduced the epistemological, ontological and theoretical underpinnings, as well as the rationale behind my qualitative research design. I have emphasised the importance of having a qualitatively driven trauma-informed methodological strategy in order to research manifestations of previous trauma and effectively support all participants, as well as myself as a researcher, within this study. Further, I have reflected upon some of the methodological, practical and ethical issues that I faced when conducting research with three distinct and unique sample groups. The trauma-informed methodological strategy that I developed and explored within this chapter, provided and increased levels of safety, choice, trust, collaboration and empowerment when exploring the experiences of former prisoners, prison staff and community staff.

Additionally within this chapter, I have situated my unique positionality and prior experience of working within the prison system, inside a robust and empowering methodology. This chapter has drawn attention to the primacy of safety both for the participant and researcher, whilst placing emphasis on the core values of TIP and stringent self-care routines for researchers.

In the next chapter, I present the data collected from men and women who have been in prison. This is underpinned by a critical victimological position. Within this chapter, I will explore the participants' experiences of 'life before prison', 'life in prison' and 'life after prison', in order to identify the ways in which trauma can manifest in prisoner behaviour and what support trauma survivors can receive to benefit their rehabilitation, desistance and recovery journey.

Chapter Five

Manifestations of Trauma: Exploring Former Prisoner Experiences

5.1 Introduction

This chapter is the first of two analytical data chapters. Within this chapter, I present the thematic findings from the data collected with men and women who have experienced prison. The theoretical framework that I draw upon within this chapter is a combination of critical victimology, the sociology of imprisonment and trauma theory. This, I have previously argued in Chapter Two and Chapter Three, helps to explore the manifestations of trauma, and the way in which the pains of imprisonment will be felt more severely by those who have experienced previous trauma. However, within this chapter I intertwine the theoretical contributions made in the literature reviews with the biographical narratives and reflective experiences of the participants from Sample Group One.

Within this chapter, I will explore the narratives of the participants under three key themes. These key themes are supported by various subthemes. Accordingly, I have structured this chapter to mimic the flow of the biographical interviews. The first key theme I will explore is **'Life before prison'**. Within this theme, I present discussions and reflections of participants', relating to their childhood, adolescent and adult experiences. The second key theme is **'Life in prison'**, and participants discussed their varying experiences of prison. This theme covers issues that I explore within the **'The Gendered Pains of Imprisonment'**, as well as participants encounters with prison staff and the subsequent need for a trauma-informed prison estate. The final theme within this chapter is **'Life after prison'**, and within this I include the post-prison experiences and challenges associated with my participants' desistance and recovery journeys. Within this final key theme, the theoretical framework alters in order to contribute to desistance theory. Here, I posit that the trauma-informed core values can be useful considerations to desistance theorists and researchers as

the underpinning values of both complement each other, as both place emphasis onto the importance of encouraging self-esteem and collaboration within an empowering approach, to support men and women who have been in prison.

5.2 Revisiting Theory: Trauma-Informed Considerations

First, it is worthy briefly revisiting some of the key theoretical points arising from the two literature reviews. The prevalence and incidence of experiences of previous trauma, mental health issues, substance misuse issues and self-harm, are all growing concerns across the entire UK prisoner population (Covington, 2015b; Prison Reform Trust, 2017a). In response to this, a policy response is being pursued in order to challenge the culture of the prison service to better support the prisoners and staff within the system (Covington, 2015b).

I have argued that to explore this topic through a critical victimological lens is advantageous as this approach is interested in unearthing previously marginalised voices. The relevance of critical victimology in understanding the experiences of trauma and adversity has been explored, however it also has relevancy within prison literature. As Katz and Willis (2016:33) argue, prison based victimological research is imperative because “incarceration is no panacea to deal with damaged human beings who through their own pain act out”. In Chapter Three, I argued that the experiences of individuals prior to imprisonment are of great significance to criminological, victimological and practitioner understandings of the lives and behaviours of prisoners. The ambition is to increase support mechanisms, rehabilitation outcomes and improve collaboration within offender desistance journeys. The sociology of imprisonment literature helps us to understand the impact of incarceration, including the structural, environmental and adaptive challenges associated with being in prison. It is also critical victimology that requires us to consider the “complex interplay and interrelationship between agency and structure” (Francis 2017:95). Therefore the combination of the theoretical contributions allows a deeper understanding of trauma survivors' experience of imprisonment, and how their trauma experiences manifest within their behaviours, and adaptation to the prison environment.

Although traditional victimological scholarship views victims as individuals who are harmed by a traditional offender, this can separate the victim and offender as two opposing entities. This can result in a failure to consider the wider structural and institutional forces that impact the lives of offenders, for example “poor welfare policies, underfunded schools, limited integration of mental health services and criminal justice resources” (Katz and Willis, 2016:34). As such, the authors argue that traditional victimology “views victimhood as a kind of banner entitling a punitive stance towards offenders” (Katz and Willis, 2016:34). Alternatively, critical victimology enables an exploration of the social, structural and institutional forces that increase the likelihood of trauma, to avoid privileging some victim experiences over others (Katz and Willis, 2016; Mawby and Walklate, 1994). In comparison, my research as well as that of Katz and Willis (2016) endeavours to bridge that gap in order to highlight that it is very rare that a prisoner has not experienced some form of trauma. In addition to this, Light et al., (2013) highlight that often offenders have been failed by social services, as well as mental health services, and the prison policies often fail to support rehabilitation and reintegration back into society (Light et al., 2013). Currently, only one study has considered the utility of critical victimology with male prisoner experiences of victimhood (Katz and Willis 2016), and whilst it is encouraging, an amalgamation of victim, prison and trauma scholarship can provide additional depth to further our understanding.

Recognising the manifestations of trauma is challenging. As Harris and Fallot (2001) note, when an individual is accessing support for addiction or mental health, often their presenting behaviours are much more immediate and more obviously linked to the function of the service, rather than previous trauma. This, the authors argue, plays a role in the challenges associated with trauma and complex and/or challenging behaviours. However, the impact of trauma is “part and parcel of our social reality”, as such, it is not the rare exception we formerly considered it to be (Fallot and Harris, 2009:1). I have already explored the broad nature of trauma, however it can be beneficial to visualise it as both an event and a specific response to that event in order to see trauma as not only a response to criminal victimisation, but also a normal response to a variety of overwhelmingly negative experiences (Covington et al., 2008). It is worthwhile reminding the reader at this point

that the broad understanding of trauma is crucial. As Fallot and Harris (2009) argue, to overlook an individual's trauma can result in re-traumatisation.

Additionally, institutions such as local authority care and prisons are places that perpetuate trauma, rather than eliminate it (Fallot and Harris 2009; Covington et al., 2008). Therefore the experience of trauma is an important consideration for both victimologists and prison researchers. With this in mind, I endeavour to build upon some of the key gaps within knowledge surrounding how trauma manifests within the behaviour of men and women before, during and after the prison sentence.

5.3 Life before prison

5.3.1 Childhood Experiences

Out of the 17 participants interviewed, three women and one man recalled both stable and pleasant memories from their childhood. Participants used words such as “normal”, “loving” and “lovely” to describing often a very “loving home” environment, where they “felt loved”, “supported” and “taken care of”. For these individuals, much of the adversity they had experienced did not arise until late adolescence, towards adulthood or until their prison experience. Almost a quarter of the participants were explicit about their lack of negative childhood experiences. This can be interpreted in varying ways, as participants may have chosen not to share these experiences with me during the interview; perhaps they may not have ever experienced anything that could be considered ‘traumatic’, or, alternatively they may not have openly acknowledged or deemed their experiences to be traumatic in nature. What does unite all participants is the shared experiences of incarceration, which has been deemed as potentially ‘traumatic’ and ‘painful’ by penologists (Crewe, 2011a; Crewe, Liebling and Hulley, 2014; Liebling and Maruna, 2005) as well as psychologists (Covington et al., 2008). I will discuss this element later on in this chapter.

However, for the majority of participants (N=13), their experiences of childhood were very different. The experiences outlined by these participants included;

- Violent and abusive parents/step-parents.
- Feeling unloved.

- Living with parents with addiction issues.
- Recollections of being in unsafe environments (drug dens, drug user equipment, sharing beds with other children of drug users).
- Sexual abuse.
- Poverty- memories of being hungry.
- Parents having mental health issues.
- Local Authority care.
- Parents in prison.
- Death of parents- moving in with grandparents.
- Parents leaving children (aged 10) in the care of elder brother (aged 17).

This list has been displayed in order of the most discussed (top) and least discussed (bottom). The above events have been outlined within both trauma and victimological literature as potentially impactful on an individual's ability to cope. Moreover all of these examples fit within the umbrella use of the term trauma, as outlined within the trauma literature I covered in Chapter Two and Chapter Three (Covington 2015b; Falot and Harris, 2009; SAMSHA, 2014). Within the narratives of nearly one third (N=6) of participants, the continued and repeated experiences of trauma emerged. They articulated that the continuum of trauma occurred for the most part of their lives. For example, **Liam** stated that;

My childhood was bad, I used to get bashed (colloquialism to depict being beaten up) all of the time, and I was only 2. I was put in care after that, that was really horrible and I was there until I was 18... to have never felt wanted or loved was what I was dealing with all of my childhood.

Similarly, **Nicola** added;

From the day he raped me (grandfather), my life was never the same, it just continued to get darker and darker as I got older and nothing and no one could really do anything to help me out of it.

Fallot and Harris (2001:47) acknowledge that the experiences of abuse, sexual and physical victimisation can result in “long-term cognitive, emotional and interpersonal consequences”. The abuse and trauma experienced by **Liam** and **Nicola** impacted upon much of their life course, as they endured repeat experiences of victimisation and trauma. The notion and the impact of repeated victimisation is acknowledged and appreciated within crime prevention and victimological literature (Farrell and Buckley, 1999; Farrell and Pease, 1993; Goodey, 2005).

To focus on **Nicola’s** experience for example, the impact of the sexual abuse/violence in childhood and across the life span of women has been heavily acknowledged and researched by leading victimologists (Davies, 2009; McGarry and Walklate, 2015).

Alternatively, **Liam** stated that he had experienced victimisation and abuse. However, he stated that despite experiencing significant physical abuse, it was the experiences of feeling unloved and neglected, that he felt negatively impacted him the most. For example he stated;

Well it wasn’t really the punching that was so bad because I thought; at least I exist to him... but the fact that when the beating stopped, that was all I got.

Covington et al., (2008) suggests that both male and female children are at comparatively equal risk of experiencing childhood abuse from their family or from people whom are known to them. None of the 8 men interviewed, shared experiences of sexual abuse with me. However, the majority of male participants (N=7) shared incidences of witnessing violence in their familial home and or a parent/step-parent physically abusing them. Whereas a quarter of the women interviewed (N=4) shared experiences of childhood sexual abuse and a small group of women (N=3) discussed witnessing violence in their familial home.

Liam articulated that the long lasting impact of being neglected by his father, made the physical abuse ‘bearable’ because without that, he had no other physical contact or acknowledgment from his father. Following the report made to social services by a neighbour, **Liam** was placed into Local Authority Care, where he was continuously bullied and beaten,

until he left to live on the streets at the age of 18. Davies (2009) has outlined that there are complex links between domestic violence, child abuse and children who enter local authority care, and that they are at a high risk of experiencing serious forms of abuse. **Liam** described his adolescence in the care system as;

Horrible, I was awful, I was angry; I was pinned down, sat on top of even though I was begging them to stop. I was cracked over the head, it was vile, it was just vile, the streets were better. You rely on kindness and I haven't been shown much of that in my life.

It appears the abuse **Liam** had escaped from his father had impacted his behaviour in such a way that staff were having to utilise control and restraint techniques in order to overpower **Liam**, when his behaviour was aggressive in nature. In the year ending March 2015, there was a total of “69,540 children who were looked after by local authorities in England” and this number has increased by 6% since 2011 (House of Commons, 2015:4). When children are subjected to a care order, the parental responsibilities fall onto the local authority and its social services department. Yet there are an estimated 250-300 confirmed cases of abuse or neglect within residential care services each year (Biehal et al., 2014). Over half of those cases concerning abuse or excessive use of restraint occurred when staff reacted inappropriately towards young individuals exerting challenging behaviour (Biehal et al., 2014). The likelihood is that a child placed into care, may have previously experienced trauma or neglect. Therefore to experience trauma again, whilst in care, further confirms that the world is not safe for that individual. This is where behavioural change occurs as a protective strategy, in order for individuals to avoid further harm (Covington, 2015b).

The impact of trauma can range from subtle, insidious or outright destructive behaviours and this is dependent on the characteristics of an individual, the trauma event, developmental processes and sociocultural factors (SAMHSA, 2014). For a small minority of participants (N=3), the violence and neglect they had experienced as children appeared to have impacted the way they communicated and managed their emotions. As Joseph articulates;

He (his father) was violent, he beat me up from when I was in nursery until I was 13 and I fought back and I've been fighting ever since, I've never felt loved, in fact no one's ever told me they loved me.

The experience of childhood abuse and neglect has featured within over two thirds of the participants' narratives. Anger, aggression, violence and masculinity have all been used as emotions and concepts relevant to understanding the impact of male victimisation (Spalek, 2006). The long-lasting impact that is associated with emotional and physical childhood neglect, as disclosed by the majority of participants (N=13) deserves further victimological consideration.

Scholarship has acknowledged that children who are exposed to trauma, often display heightened levels of stress reactivity (Bremne and Vermetten, 2001) and they may continue to develop substance misuse issues, behavioural complications and increased impulsivity (Slawik et al., 2009; Garland, Pettus-Davis and Howard, 2013). Within subcategories of victimology such as 'developmental victimology' and 'forensic victimology' (Fassin and Rechtman, 2009), there have been substantial developments in recognising the wide range of 'harms' or traumas experienced by children that can impact their development, this includes the notion of "interpersonal victimization" as well as experiences of injustice, betrayal, child maltreatment and crime (Davis, Lurigio and Herman 2007:10). However trauma researchers like Van der Kolk et al (2013) agree that it is common for trauma survivors to have issues regulating emotions such as anger, stress, shame and sadness, particularly when the experience occurred within childhood. The enduring psychological impact of childhood neglect cannot be underestimated. For example, **Maisey** stated;

As a kid I was taken to loads of different places, he (dad) was doing drugs, drinking and hanging around with bad people, I was hungry, sleeping in a bed wet and stinking of piss, but I was too scared to go down stairs and tell my dad. That has an impact, I still think about it now.

The form of neglect **Maisey** articulates has been readily explained and theorised within the psychological perspective. Whilst the pervasive impact of previous trauma, has been at the heart of social psychology perspectives, from a victimological perspective, the role of trauma has been under-explored. Katz and Willis (2016:44) claimed “traumatized boys, like traumatized girls, often become sexually promiscuous and substance abusers, unable to form health pro-social relationships with others”. The findings of Katz and Willis (2016) compliment the trauma literature.

In addition, my findings indicate that all of the participants (N=13) who discussed experiencing previous trauma, also stated that they used substances as a means of coping or masking their experiences. The use of substances started as early as 9 years old for one participant and this also continued into adolescence and their adulthood. The self-medication of individuals who have experienced trauma is common. SAMHSA (2014) acknowledge that using substances is seen as a way to regain emotional control; however, this can often lead to emotional dysregulation (including repression and denial of emotions) as well as leading to a higher risk of becoming addicted to drugs and alcohol.

These connections between substance abuse and trauma have received little explanation in other disciplines. However within behavioural psychology, Garland et al., (2013) state that the exposure to traumatic life events can result in adverse post- traumatic symptoms. The authors argue that this may lead to the development of maladaptive or self-destructive behaviours, such as substance misuse. More specifically, Kilpatrick et al., (2000) found that youth experiences of trauma are connected to the use of substances. A large proportion of participants (N=11), disclosed that their substance misuse started in their youth, and this cycle continued into their adulthood.

Thomas began using alcohol at the age of 9; by the time he was 11 he was smoking cannabis “to chill out”. For **Joseph** and **Maisey**, drugs and alcohol became a way to “take the dread away” as it “made the pain go away”. The use of substances became an addiction for **Thomas**, **Joseph** and **Maisy** before the age of 14 years old. One of the most dangerous forms of

prolonged stress responses known as ‘toxic stress’ can occur when children are subjected to strong, frequent or prolonged levels of stress within the absence of supportive relationships with adults (Shonkoff and Garner, 2011). Much of the clinical psychological literature in this area looks into brain development during key developmental periods and this can impact the way in which individuals may become less able to cope with future stress (Shonkoff et al., 2012). Such approaches strongly signify that the impact previous trauma within childhood can have significantly negative impacts on an individual’s life, as it can become a precursor for behavioural issues. Therefore, in order to understand additional levels of psychological harm, the inclusion of trauma theory could benefit victimological theorising.

5.3.2 Adolescent and Adult Trauma

It was important to separate adult and childhood trauma experiences. Less than half of participants (N=6) had experienced both childhood and adult trauma. For a small minority of participants (N=3), their trauma experiences occurred during adulthood. Covington (2003) argues that, as men age, they are more likely to experience harm from enemies or strangers. Whereas for adult women, they are more likely to be risk from harm from the individual “to whom she is saying I love you” (Covington et al., 2008:380). This dynamic, Covington (2015b) argues can negatively impact upon women’s mental health. This gendered pattern of violence can also be identified within the findings of this research.

Susey-Mae and **Maisey** both discussed experiencing abusive relationships in their adulthood. Their experiences varied from emotional to physical abuse from their respective partners. They both recalled the substantial negative impact that these relationships had on their ability to trust partners in future relationships and their own self-esteem. Additionally, both **Susey-Mae** and **Maisey** used substances at the time of their abusive relationships and this continued after these relationships had ended.

As **Susey-Mae** disclosed;

I've had a couple of relationships that were very violent, One of my partners beat me so bad that he broke my cheek, my nose and I couldn't open my eyes, but that's going back to 1995-1996, when all I was doing was drinking... I met this new bloke and it was the more he drank like Stella the more violent he got, I'd say something wrong and get a back hand, he promised it wouldn't happen again, but then there was nothing I could do. Nothing the police would have done back then either. I wanted to press charges but then he'd talk me around to forgiving him and dropping it.

Both **Susey-Mae** and **Maisey** disclosed their experiences of violent and psychological domestic abuse, and the subsequent feelings of powerlessness. Both of the women stated that during their relationships they felt “worthless” and found it difficult to cope. Neither women reported and pursued their experience to court.

According to the Prison Reform Trust (2017a) over half of the women entering prison have experienced domestic abuse. Garcia-Moreno and Watts (2011: No Page) cited that violence against women has been considered “perhaps the most shameful human rights violation, and the most pervasive”. More significantly, the long-lasting impact of domestic abuse can result in high percentages of health problems, substance abuse issues as well as diminished psychological and physical well-being (Tolman and Rosen, 2001). This was evident in the research findings, as those who had experienced violence either in their childhood (N=10) or adulthood (N=3), all disclosed that they had utilised substances as a mechanism to cope with their experiences.

Below, I present the issues (in order of most discussed to least discussed) that participants (N=13) shared when disclosing the trauma that they had experienced in adulthood.

- Substance abuse issues.
- Being in prison

- Lack of support networks and/or absence of positive relationships.
- Homelessness.
- Domestic abuse.
- ‘Survival crime’ to fund addictions (including theft and shoplifting).
- Survival sex work.
- Lack of resources (employment, finances).
- Children being placed into care.

Many of the challenging experiences identified within participant narratives often compounded one another. As such, this demonstrates that some of the participants may be considered as either individuals with M&C needs and or individuals experiencing ‘Multiple Exclusion Homelessness’. This first term incorporates the experiences of deep social exclusion that involves not only the experience of homelessness (including rough sleeping and temporary/unsuitable accommodation), but those who have also experienced one or more of the following; substance misuse (alcohol and drugs) and institutional care (prison, local authority care or mental health hospitals) and/or they have participated in ‘street culture’ activities (begging, sex work, street drinking or shoplifting) (Fitzpatrick, Bramley and Johnsen, 2012:1).

The second term has been utilised by Boobis (2016) to acknowledge the multi-faceted and compounding needs of an individual who is experiencing two or more of the following; mental health issues, substance misuse issues, homelessness and a history of offending. As such, out of the 17 participants, the majority (N=14) could be described as having M&C needs. For the small minority of participants (N=3) who did not disclose any adverse life experiences that could be situated under the umbrella term of trauma, they all confirmed that the experience of prison was “traumatic”.

When asked “How would you describe your experience of prison, **Victor** and **Madeleine** stated;

Prison itself was a trauma; I can tell you that for nothing, it certainly has opened my eyes to a lot of pain. Victor

Without a doubt I would describe prison as traumatic, it has opened my eyes to a lot of real issues that I never knew existed. Madeleine

When asked what was traumatic about the prison experience, the male and female participants shared contrasting reasons as to why their prison experience was traumatic. Half of the male participants noted a much higher level of violence and increase lack of safety, within this they noted feelings of being isolated and alone. **Mick** stated

I just felt alone, like you couldn't even ask a screw anything, for any help or nothing, because you don't grass or nothing and you don't ask for nothing because then you're easy pickings.

Alex: “Did you ever ask any of the officers for extra support?”

No, for the simple fact that it would have been the wrong thing to do. If someone had seen me, they'd get suspicious and call me a grass. So basically it's a no no you don't do that. When you're in there (prison) it's you against them, and if you go onto their side you will get shit off everyone else. Neil

Contrastingly, the majority of female participants (N=8) stated that concerns for their safety were associated with lack of staff presence. They stated that they felt this contributed to increased prisoner fights and feelings of lack of safety and security. Many of the women deemed this as traumatic, as the constantly felt “on edge” and “like it could kick off at any time”. In addition the participants felt like the amount of unsupported mental health issues and drug taking of their fellow prisoners lead to unpredictable behaviour, which impacted their feelings of safety. For example, **Lottie** disclosed

The mental health side of prison is huge but there is just nothing there and you're like surely you need to find the root causes to why somebody has become

an addict? or why someone has these behavioural issues? self harming my god was massive! There were three of us out of our wing, about 100 of us in there, that had no issues, and you just didn't know what was going to happen from one moment to the next.

However this was not the case for all participants. Only a small minority of participants (N=3) disclosed that they took drugs, whilst in prison. However, these participants stated that the lack of support and the way in which they were treated, contributed to their “traumatic” prison experience.

5.3.3 Addiction

One of the key areas that was discussed by the majority of participants (N=13) was the use of substances. All of these participants disclosed previous experiences of trauma and said that they used substances as a coping strategy. As identified earlier, more than half of participants (N=11) started taking drugs in their youth and once addicted, they continued their substance use into adulthood. Alternatively, almost a quarter (N=4) of my participants developed substance misuse issues later on in their adulthood. When participants were asked to discuss what they meant by using substances as a coping strategy, some stated

In the end I was told that my daughter had been taken in to care... I got back on the drink because I couldn't cope, then I found drugs. I was doing marijuana to start then, I found crack cocaine and it made me feel happy, it made me feel loved, it made everything that was horrible, all go away, and in that space, at that time nothing else mattered. Obviously I spent a lot of money, money that I didn't have and that's when I stole from my employer.

Susey-Mae

At first alcohol took the edge off what I had been through, but then eventually that wasn't enough, especially when I started you know, sex working, it was like well I may as well get some money for it, people are going to do it to me

*anyway and I needed the money, so I thought to myself, I may as well be out of it so I don't feel anything, but after that I needed to be out of it just to stomach who I was and what I was doing to myself. **Nicola***

*I started taking drugs when I was in hostels, the stress of it and the place just got me right down, for me the drugs took the dread away. **Scotty***

*I didn't have a drug of choice, I'd take anything, I injected anything to get off my face. **Maisey***

*My substance misuse stems from trauma, it was an absolute coping mechanism. **Zara***

*I was feeling quite lost as a person... when I started taking drugs I thought it was my destiny, I ultimately believed that I was going to die in the act of addiction and I found acceptance in my life that this would happen and they say once an addict, always an addict and I thought... yeah that was me... I accepted that there would be consequences to my addiction and I wasn't really bothered. **Victor***

Victor did not disclose any experiences of previous trauma. However, for **Susey-Mae, Nicola, Scotty, Maisey** and **Zara**, substance misuse, was explained as a means to both escape and cope with their lives and experiences of trauma. Two thirds of participants (N=11) linked their substance misuse to the crimes that they had committed. For some it was as a means of affording their addiction, for others, they committed their offences whilst under the influences of drugs or alcohol. Over half of the participants (N=13) acknowledged the link between their experiences of previous trauma and their addiction to substances. There has been an increase in research that articulates the strong associations between histories of trauma and substance misuse in the lives of prisoners (Covington et al., 2011; Cuomo et al., 2008). Addiction has been identified as a “chronic relapsing disorder” with links to both impulsivity and compulsivity. This type of analysis makes sense of **Victor's** relationship with his addiction.

Alternatively, for the other participants who cited adversity and stress as a trigger to use substances, stress has been acknowledged as an important factor in the increased use of substances, as well as major trigger for relapse (Erb, 2008).

Within the discipline of psychology, the 'Coping Hypothesis', has been used to explain both the use of substances, as well to help us understand an individual's likelihood of relapsing. Earlier iterations indicated that individuals who use substances had poor or inadequate coping skills. However, advanced research now explores substance use as a form of self-medication that is connected with the complex and long-lasting legacy left behind by experiences of previous trauma (Al'Absi, 2008; Ardino, 2012; Miranda et al., 2002).

When considering the small minority of participants (N=3) who had experienced either sexual or domestic abuse, it is argued that the rate of using substances can increase (Covington et al., 2008). To focus on **Nicola's** experience (p.123-124), it has been acknowledged that some women may engage in sex work to support their addiction (Cusick, Martin and May, 2003). There are pockets of psychological literature that link experiences of previous trauma and adversity with negative coping strategies such as substance misuse. Over the last few decades, there have been a collection of studies that have been conducted in order to connect substance misuse and crime (Allen, 2005; Bennett, Holloway and Farrington, 2008; Deitch, Koutsenok and Ruiz, 2000; Stevens, 2007).

However very few victimological studies have yet to consider the ways in which trauma and victimisation could lead to an addiction to substances. As such, this specific root cause of addiction goes virtually unacknowledged. The legacy of positivist theorising within victimology prevents new directions being explored. For example, sex workers and individuals who are vulnerable due to their M&C needs or their experience of 'multiple exclusion homelessness', remain submerged at the bottom of hierarchy of victimisation, and are deemed less deserving victims. However, my findings indicate that these individuals are likely to have suffered trauma and as such, their behaviours and lifestyles require additional victimological consideration.

5.3.4 Crime and the Journey to Prison

Risk factors such as mental health issues, homelessness, substance misuse and trauma, have been linked to higher rates of offending behaviours, a higher likelihood of exposure to criminal situations and an increased risk of entry into the CJS (Covington et al., 2011; Miller and Najavits, 2012; Yoder et al., 2014). The trauma of an impending prison sentence and the immeasurable uncertainty and anxiety experienced by individuals in court cells should not be underestimated. The periods in between sentencing and prison transfer can be hugely isolating and stressful. As **Susey-Mae** stated

They held me from 11:30 until about 4:30 on my own and no one told me what was happening to me. Then I was put on a fully packed van it was just really loud...I couldn't stop shaking, my hands, they were just shaking uncontrollably, and they couldn't get the handcuffs on me because I was shaking so much.

Following sentencing, the vast majority of female participants (N=7) told me that their journey to prison was “traumatic”. The distressing journey that they described consisted of “a bus was full of men, shouting”, “piss on the seats” and “lots of shouting” on “the most horrendous day imaginable, because I've just lost everything”. In addition, **Madeleine** stated that;

The journey was just awful, you are seat belted and it's bizarre because they handcuff you, you are being remanded on the most horrendous day of your life the whole process is awful. I think at that point I realised that I was being treated as a sub-human, I was an offender now.

On top of an individual's likelihood of experiencing trauma, the journey through the CJS can be a further dehumanising and distressing experience (Ardino, 2014). Participants stated that increased information sharing and communication with court staff could help to alleviate some of the anxieties within this period. A US based organisation named SAMSHA (2014)

has developed a guide to trauma-informed judicial practice. This guide includes the importance of treating individuals who come before the court with dignity and respect, as communication is key for a trauma survivor.

5.4 Life in Prison

5.4.1 The Gendered Pains of Imprisonment¹³

To explore the experiences of the male and female participants in more depth, it is necessary to pay specific attention to the additional pains of imprisonment that all individuals disclosed. Here, I will explore what I call ‘The Gendered Pains of Imprisonment’. Crewe et al., (2017) have already coined ‘The Gendered Pains of Life Imprisonment’; however my own findings provide something of a contrast, as my participants served short sentences. More specifically a third of participants (N=6) served one sentence only and two thirds (N=11) served between 2-12 sentences at the time of interview. Crewe et al., (2017) argue that the interactions between gender, imprisonment and the world outside of prison are both non-linear and bi-directional. Therefore it is not possible to capture the gendered nuances through importation and deprivation theories. However, in order to appreciate gendered nuances, if we consider the institutional gendered power relations as well as the multiplicity of trauma, we can see the ways in which the prison environment may be “an institutional manifestation of gendered powerlessness and vulnerability” (Moore and Scraton, 2014:53).

In many ways, this connects back to the critical victimological literature. As in this specific context, the environment and structure of prison negatively impacts an individual’s agency and ability to gain support. This is mainly due to the way in which the prison environment often overlooks or disregards the experiences of trauma survivors due to a lack of understanding of their unique needs and vulnerabilities.

Although there are many ‘Gendered Pains of Imprisonment’, that could be relevant to the experiences of men and women in prison, here I present the most common and shared

¹³ Crewe et al., (2017) published an article entitled ‘The Gendered Pains of Life in Prison’, shortly after the first draft of this chapter was created.

experiences emerging from the data. Below, I present the five emerging pains of imprisonment as described by the male participants.

- 1. Unable to ask for help:** *“nah no way, you can’t, if you go to the officers for anything, you either look like a grass, or you look vulnerable and neither is ok in a prison, so sometimes you just go without”* **Liam** (All of the male participants agreed).
- 2. Lack of safety:** *“it was just chaos, loads of drugs, loads of violence, no guards man so if we got our head kicked in, we got our head kicked in”* **Thomas** (A large majority of the male participants (N=7) confirmed).
- 3. Witnessing violence from officers:** *“there was some, I think some of the officers liked the power and control, some were really strict, quite aggressive and abusive not towards me but with other inmates quite threatening, I’d say on occasions violent”* **Victor** (The majority of the male participants (N=6) agreed).
- 4. Receiving violence from officers:** *“they would roll me up in mattress and batter me, so I wouldn’t get any black or blue marks, that’s what they’d do, that’s how when someone says that the officers have battered them, but they’ve got no marks whatsoever, they’ve been rolled up and then wacked all over by batons, it still hurts and you still bruise but on the inside yet there’s nothing on the outside and I’ve heard this all over the jails”* **Neil**. (Half of the male participants (N=4) confirmed).
- 5. Violence from fellow prisoners:** *“it’s not all officers, it’s more you have to worry about being slashed up and stabbed by every prisoner in every prison you go to”* **Jimmy** (Just under half of the male participants (N=3) agreed).

These findings suggest additional levels of vulnerability from men in prison. Contrastingly, male vulnerability was not a focus of Crewe et al's., (2017) paper on ‘The Gendered Pains of Life in Prison’, as it quickly honed in on the varying needs of women. However, to build upon this within this research, it is important to consider the gender nuances emerging from the experiences of both the men and women that I interviewed.

The majority of the pains of imprisonment felt by men consists of a lack of safety and largely surrounds the fear of violence from officers and other prisoners. This will impact substantially on their trust and engagement within their sentence and rehabilitation. Moreover, it appears particularly challenging for men to request additional support from prison officers, when in need. As the rates of male self-harm and suicides rates increase (Prison Reform Trust, 2017a), it seems now more than ever, the support provided to male prisoners is deficient and in need of improving. The complexities arising from male prisoner vulnerability should not be downplayed. My findings indicate that the majority of my participants needed support but were unable to ask for it due to the complexities within the male environment, namely the fear of appearing as a grass and/or vulnerable.

For example, **Jimmy** stated;

Once I was so desperate to speak to someone, I took a pen and jabbed it in my vein in my arm. Once I got to see a nurse, I told her what I was struggling with, but I just felt like I couldn't ask the officers, you know but after that the staff I met when I got an ACCT were absolutely lifesaving. I reckon I wouldn't have engaged on the wing like, defo not in front of the others (prisoners) or the officers I've known all that time, you cannot look soft.

In **Jimmy's** case, he disclosed that he did not feel able to talk to the prison officers about needing help. As such, he acted in a rather drastic way, as he had never self-harmed before. However, what this does indicate, is the level of desperation and helplessness that **Jimmy** would have felt, prior to committing self-harm. However, he concluded by explaining that once he had demonstrated a need, the ACCT team that worked with him were 'lifesaving'.

When asked why he felt like he could not ask the staff for help, **Jimmy** disclosed;

As men we just don't do that man, we don't ask for help until it's too late, but to be honest with you, some of the officers, they aren't the type of people you feel comfortable pouring your feelings out to, you know what I mean? I honestly think that there isn't a culture in there (in the male prison he served

his sentence in) where we talk about stuff, you just put up, shut up, dig deep, get on with it.

It is important to acknowledge that prison masculinity (Sloan, 2016) discussed in chapter three combined with a lack of safety men feel, seems to prevent a lot of men from asking for additional support to address mental health needs whilst in prison. This will inevitably lead to the under-reporting of other criminogenic needs including the experience of previous trauma, and therefore this will likely limit the visibility of their vulnerability. Further, Crewe (2009) acknowledges, that for a prisoner to maintain a macho façade, as well as contain feelings of distress and mental health issues, can be classified as a secondary pain of imprisonment. Masculinity will likely impact upon the unknown quantity of trauma survivors within the male prison estate, whilst also impacting staff's ability to *recognise* and therefore *respond* to the complex needs of male prisoners. A cause for concern is the potential contribution and influences these issues above have on our knowledge and understanding of male trauma survivors in prison. My findings indicate that nearly all (N=7) of the male participants in this study had experienced trauma prior to their imprisonment. Moreover, they explained that they could not appear vulnerable within prison, therefore this resulted in masking emotions, that both Goodey (2005) and Laws and Crewe (2016) have discussed as being a challenge within identifying male vulnerabilities.

Additionally, the levels of violence within male prisons are substantial and rising (Ministry of Justice 2016c). Within her White Paper Elizabeth Truss outlined plans to “free up staff time to focus on prisoners’ safety and reform” (Ministry of Justice 2016c:61). However, it is evident that a culture change is required. Edney (1997) stated that prison officer violence towards prisoners can be deemed as ‘righteous violence’, due to the penal hierarchies. In the HMCIP report published in 2011, HMP Forest Bank near Manchester was reprimanded as a number of prisoners described ‘sheeting’ to inspectors, this is very similar to the explanation given by **Neil** who discussed being calculatedly assaulted by prison staff (p.128). As stated earlier, 15 of the participants had been in custody within the last 3 years (2013-2016), suggesting that

staff-prisoner assaults are still very prominent issues within our UK prison system. Out of the male participants, the majority (N=6) disclosed that they had either witnessed or experienced violence from staff they had referred to as being *rogue officers*. When discussed further all of the participants stated that although these officers were in the minority, their presence impacted their experience of imprisonment. The experiences of *rogue officers* that the participants shared were of a serious nature and all participants had shared these experiences with their key workers. One key worker disclosed that with participant's consent, they had placed a complaint to a local prison, which had resulted in the suspension and ongoing investigation of an officer (See Chapter Four).

Sim (2008:187) has called for a greater focus into the issue of poor prison officer misconduct, as it is still very much “an inconvenient criminological truth”, within scholarship, policy and penal debate. In addition Edney (1997:38-39) argued;

There needs to be by criminology an attempt to at least theorise and make problematic the nature of violence against prisoners. In that sense it requires that the ‘stories’ of prisoners are accepted as legitimate offering as they do the experience of those subject to great power.

Moreover, the levels of institutional violence within the UK prison system have been recognised by leading penologist David Scott (2010; 2015). Within his 2017 blog, he stated that the violence within prisons is not just physical, it is indirect in nature, such as a prison officer turning a blind eye to prisoner assaults and examples of violence including the structured humiliations and degradations of strip searching, locking prisoners in cells and utilising control and restraint. Overall the findings from former male prisoners indicate a distinct lack of safety, high levels of prisoner-prisoner violence and staff-prisoner violence. This seems to warrant further inspectorate and scholarly attention. My own findings fully support the arguments and evidence provided by Crewe (2009) Edney (1997), Scott (2010; 2015; 2017) and Sim (2008).

For critical victimologists, the structural complexities within male prisons, present an area worthy of greater inquiry to explore male vulnerabilities in a more robust and complex way.

Alternatively, when it comes to the needs of women in prison, academics and policy makers are keen to explore women's experiences, as they are distinctive, and they differ so substantially from men's (Bosworth, 1999; Carlen, 2002; Corston 2007; Covington et al., 2011; Ministry of Justice, 2013). However what this research indicates is that a gender-sensitive approach is required for each prisoner population. Moreover, the needs of male and female trauma survivors in prison are of equal significance. Below I present the top five emerging pains of imprisonment for identified by the women during their interviews.

- 1. Missing and worrying about loved ones and children:** *“Some of the officers were lovely, but the majority just didn't know what the women were going through, we miss our family, our life, and children, you're in your cell in your own company and they just don't know what to say to girls, like it's not rocket science to be nice you know? Just be more aware of what we have on our plate”* **Laura** (All of the female participants discussed this issue).
- 2. Fear of Sexual Objectification:** *“She said (referring to a female prison officer) look you're fine in here, it's fine, but I suggest that you keep your underwear on underneath your nighty because there are male guards that do have a habit of peering in overnight, and I was like oh my god, she then said I strongly suggest that you get changed behind the toilet and do not get changed in your actual bed because they will peer through and look at you, and I was just like, brilliant”* **Madeleine**. (A large group (N=8) of the female participants agreed).
- 3. Lack of mental health support:** *“They don't have that support in jail, they bring you a phone for the listeners and they just listen to your shit, they will ask you do you want to take your own life and if you say yeah they will stay on the phone a bit longer... they don't support you the way they should, if you say I'm going to kill myself they just look through your door putting a flashlight on you every five minutes*

and then if you go to the doctors, they say how low do you feel today then they just give you medication” Nicola (A large group (N=8) of the female participants confirmed).

- 4. Sexual Favours for Banned Goods:** *“My friends, the other girls, they said they slept with some of the screws, one of them said she slept with a screw and they brought her in some vodka, they'd bring in drugs, some of them look at you through the flap a bit longer at you, like perves” Maisey* (Just under half of the female participants confirmed (N=4)).

These narratives of the women raise numerous issues.

First, the prison maternal emotion work of Baldwin (2015) indicates the levels of anguish, guilt and hopelessness that women feel once incarcerated and separated from their children. All of the women discussed how painful this was and how challenging prison was, as many of them did not want their child visiting. This unsurprisingly added additional stress and distress to the women during their prison sentence. This is where increased training on how to better support and communicate with mums in prison, may be of benefit to both the staff and prisoner.

Second, the level of mental health need in prisons, particularly in female prisons is high (Prison Reform Trust, 2017a). For **Maisey**, it is clear that if the support she had received had a communicative and relational approach, she may have benefitted from this more than the abstract and seemingly distant support she described above.

There are many challenges for women in prison, however sexual power of prison staff is not one which should feature. Crewe et al., (2017) highlight that it is not unusual for “sexual power to be wielded over them (female prisoners) by prison staff”. Given the nature of vulnerability within the female prison estate, all of the examples above signify much larger human rights and safety issues within the prison service that require attention, prior to BTI. It is a serious rehabilitation concern, that a large quantity of women who took part in this research endured these degradations from the prison staff in charge of their care, especially

given the vast amount of research that identifies the vulnerabilities and traumatic histories of women in prison (Corston 2007; Covington, 2015b; Hardwick, 2012).

Point number 2 indicates the need for a trauma-informed consideration. For example, if staff must check on a prisoner, surely it is entirely appropriate to warn the prisoner in advance by knocking on the cell door and announcing that an observation is about to commence. In addition, the prison staff member in this case, felt compelled to warn **Madeleine** about the behaviour of her colleagues. This also highlights a significant issue surrounding the powerlessness of prison staff and why they refrain from reporting the degrading and inhumane behaviour of their colleagues. When former prisoners were asked if they had reported the *rogue officers*, both **Maisey** and **Nicola** stated that when they made a complaint about their treatment in the complaints box, they were locked in their cell (by another officer) for punishment. In addition **Maisey** stated *“there is no point in putting complaints in, you wait too long and you don't see any change”*.

These examples demonstrate both institutional powerlessness as well as a violation of prisoner rights to utilise the internal complaints procedure within the prison, for two reasons. First, if prisoners are to be locked in their cells as ‘punishment’ for complaining about poor treatment from an officer, this further indicates the power and control that the staff have over prisoners, whilst contradicting the confidentiality of the complaint procedure.

Second, the fear of being locked in a cell for the day, combined with the added concern of the complaint not being handled in an efficient and fair manner undermines the internal complaints procedure that should empower prisoners. An additional avenue for prisoner complaints is to contact the IMB; however they can only act if a prisoner has adhered to the internal prison complaints procedure (Doing Time, 2017) that has been subsequently acknowledged above, as at times, a worthless venture for prisoners. Therefore the schemes such as the internal complaints procedure and the IEP, should be considered as techniques that can further disempower prisoners, whilst providing potential methods for prison staff to facilitate additional power and control.

The presence of *rogue officers* was discussed by the majority of both men and women interviewed (N=15) despite serving sentences in different prisons based on their gender, geographical location and category of risk. The term *rogue officers* was most commonly used by former prisoners to describe officers that were committing forms of gross misconduct that participants have since reported following their release from prison. As both **Maisey** and **Nicola** disclosed traumatic histories, their experiences with prison staff may have further re-traumatised them and thus raises concerns for penal scholars. Liebling (2009:23) noted that due to the “high levels of past abuse in women’s experience, their experiences of trust, relationships and authority in prison should be of major interest to researchers and policy-makers alike”. The recognitions of previous trauma in the histories of women, and the examples deriving from the gendered pains experienced in prison, help to illustrate the way in which prison can further add to an individual’s experience of trauma. They also point towards the potential for a trauma-informed culture shift. The presence of *rogue officers* for men included increased levels of violence, whereas for women, *rogue officers* were sexually inappropriate. Both examples highlight a more significant threat within the prison service as, for these officers, training is unlikely to impact already inhumane practice.

However, some of ‘The Gendered Pains of Imprisonment’ identified by participants in this study, can be addressed through the implementation of additional training and an increased awareness of prisoner needs and their potential trauma histories. For men, the lack of safety and the challenges in gaining additional support are worthy of consideration for male prisoner rehabilitation. For women, the lack of relational mental health support available however this could be improved with additional resources and specific associated training. Findings were comparable with Liebling’s (2008:33) work within the IEP scheme whereby prisoners stated that “a new arbitrary power was available to staff, and that life in prison had become more unfair”.

The majority of participants (N=15) discussed issues they had experienced with the IEP scheme. This acted as another mechanism of power, rather than being a benefit to the

prisoners' life style within the prison establishment. As such the reward scheme shapes the way in which legitimacy is challenged, as the prison has "significant consequences for how liberty and autonomy are conferred and curtailed" (Crewe, 2011b:460). Legitimacy has been outlined by Sparks and Bottoms (1995:50) as being "central to the understanding of official discourse generated in response to prison problems", most visible in episodes like riots and prison disorder. Issues arising from illegitimacy and unjust treatment, highlight the need for a much greater understanding that can incorporate the entirety of an individual and the awareness of the potential trauma an individual has experienced. Liebling (2000) found that staff can distribute a legitimacy deficit, for example, if a prisoner is compliant and well behaved, they would gain respect and extra support. However, if the prisoner does not behave in the manner expected they would receive their minimum IEP entitlement and were effectively 'ruled out', as prison officers can use their discretion both for and against legitimacy (Liebling, 2000).

This is significant to the findings of this research, as three male and four female participants discussed feeling like their "card had been marked" and were unfairly penalised because of their prior poor behaviours. For example **Zara** stated;

They read my file and judged me based on that. I'd been in and out of the prison system for 10 years and I don't recall more than maybe 2/3 times in the whole of that time anyone ever asking me how did you end up here? Yes I know it is as a result of this crime, but how did this happen?

Research conducted by Crewe (2011b) highlighted that when prisoners disputed the legitimacy of certain officers whom they felt were going out of their way to penalise individuals, this resulted in feelings of resentment and illegitimacy which can upset and negatively impact the order of prisons.

This is particularly crucial when considering the impact that previous trauma can have on an individual's behaviour, and the way in which a prisoner may experience further institutional

injustices from the power, legitimacy and pains of imprisonment. One of the key areas highlighted by Liebling's (2008) work, was the significant reduction in the quality of staff-prisoner relationships, if prisoners perceived unfairness and there are feelings of resentment. Within this research, similar findings emerged suggesting that the IEP scheme only further punishes the prisoners whose 'presenting behaviours' do not fit within the behavioural expectations of the scheme and the officers.

5.4.2 Staff-Prisoner Relationships

'The Gendered Pains of Imprisonment' highlight significant issues that will profoundly impact on the quality of the relationships and the prisoners' ability to trust prison officers. The importance of staff-prisoners relationships is perhaps one of the most vital relationships to keep the prison system under control and tolerable for both prisoners and staff (Crawley, 2004a). Crewe (2011b) describes the staff-prisoner relationships as being at the heart of the prison. According to Liebling and Coyle (2009) they are integral to make the difference between prisons being bearable and unbearable for prisoners. The complexities and power imbalances between the officer and prisoner make it difficult to gain an unbiased view of "what is essentially an unequal relationship" (Baldwin, 2015:151) as arguably both are influenced through their individual experiences of having power and being powerless. The prison officer experience will be discussed in the following chapter.

However, as the prison officer plays such an integral role within the experience of prisoners, it is important to explore what we know of the diverse role. Arguably it is a complex amalgamation of many roles, and as such, this makes the role difficult to pin point due to its subjective nature. Studies conducted by Liebling (2000) and Tait (2011) have presented typologies and clear examples of the roles of prison officers, and their approaches to supporting and caring for prisoners. I will cover this in more depth in Chapter Six, however, I want to stress and highlight the complex and interchangeable role of a prison officer.

Given the diversity of needs within the prisoner population, the prison officer role is certainly a challenging one. Baldwin (2015) highlights how a trauma-informed training programme for officers can not only promote resilience and awareness of the skilfulness of officers, whilst avoiding unnecessary harms for prisoners.

My findings indicated that the majority of participants (N=16) disclosed some pleasant experiences and exchanges they had with staff.

*Well it's like anything really isn't it, you get good people and bad people, and it's unavoidable. Some of the officers were nice, respectful and very, very helpful and some of them, they supported me through my darkest days in the jail. But then you've got the bad ones, who make the jail darker and more oppressive and you can just feel it in the air when they are on shift. **Nicola***

*Some were really nice you know, and helpful too but it was harder to find them, and when they weren't in, it was harder to get through the day. **Maisey***

*I used to have a laugh with some of them, smoke burn (tobacco) with them, but it takes ages to work them ones out. **Scotty***

Many positive experiences of the staff-prisoner relationship were discussed by the majority of participants (N=16). These included:

- “Them helping you out like giving you burn (tobacco) and that”.
- “Giving me some time to talk to someone”
- “Helping me get onto counselling”
- “Calling me by my first name, it was respectful and it was such a significant change”
- “This one woman used to smile, and it was such a genuine smile, she didn't really say much but it was nice”.

Findings indicate that small courtesies can make a difference in the day-to-day monotony and the otherwise painful experience of prison. These findings are supported by Crewe's

(2009:120), research that notes how “prisoners were crying out for neutral forms of intervention and explanation”.

5.4.3 Manifestations of Trauma in Prisoner Behaviour

As explored at length already, self-harm, substance misuse issues and trauma are inextricably linked. We know that substance misuse (including NPS) and self-harm are substantial issues that are escalating within the prison estate (HMCIP, 2016; HMCIP, 2017; Prison Reform Trust 2016a; Walker et al., 2016). Although several participants acknowledged either partaking in or witnessing these behaviours during their sentence, **Zara** shared some interesting perspectives surrounding substance misuse and self-harm. **Zara’s** perspective provides an original way of considering trauma behaviours within a prison setting.

5.4.3.1 Substance misuse

Most of the literature surrounding substance misuse and trauma hones in on a strategy used in order to cope with increased stress and adversity. However **Zara** stated;

My substance misuse stems from trauma it was an absolute coping mechanism. But the prisons do not view substance abuse or drug dealing as trauma and as a management tool for trauma. I was segregated a few different times, once for being involved in the supply of drugs in prison. It’s interesting because that’s such a huge issue in prisons, but the issue is that prison is a dog eat dog environment and if you are higher up on that chain you are safer. The things that put you up higher on that chain is the ability to provide something to that system, such as being involved in drug supply. That is a trauma-informed way to look at that problem. How can we make women feel safe enough that there doesn’t need to be a hierarchy here? There will be women who will do it and it’s not linked to trauma. For me it’s about safety, I need to be in a position where I am not under threat... I’m a vibes watcher and I’m aware of things anywhere at any time, you know that is a skill in

prison. It means that I can plan how to get things from A to B, but it comes from a resounding lack of safety. Nobody ever asked me why do you need to be in the middle of everything? Why do you have to know everything about everyone? I did it because it was safer to know. If I know everything about everything, nothing is ever going to come for me again in my life that I wasn't expecting. No one asked those questions. She's shifting drugs from A to B so let's keep her down the seg for weeks on end. If the officers were trauma-informed this wouldn't happen. I don't think it is safe for them to see women in prison as women who have experienced substantial trauma, because I don't think they can compute the two.

Covington (2007) outlines that it is important to recognise that women may have grown up in an environment where addiction and drug dealing are common. However, what **Zara** describes above is a response to trauma known as hyper-vigilance. This is explored within The Diagnostic and Statistical Manual of Mental Disorders (DSM-IV TR) list of PTSD symptoms as a constant scan of an environment for danger, either physical or emotional. However, experiences such as **Zara's** can get lost within the medicalisation of trauma when there are practical solutions which could support this need. If staff had been trauma-informed, they may have been able to discuss Zara's behaviour with her and support her rehabilitation needs. She notes that her behaviour was a coping strategy to ensure her safety, yet she felt the prison did not communicate with her about this. She described being held in solitary confinement for weeks, which as Covington (2015b) outlines has re-traumatising implications. This research argues that an example such as this continues to indicate that prisons are designed to hold perpetrators, not trauma survivors. As such, the prison environment, prison policies and prison practices are continuing to evidence an inability to effectively *recognise* and *respond* to the needs of trauma survivors.

Zara articulates her experience of segregation as;

I remember there was 8 officers who came for me in riot gear that night... it was re-traumatising without a shadow of a doubt and again it further solidifies the us

and them mentality in prison, it completely does. I'm pretty sure when a risk assessment takes place, and a risk assessment must take place before that procedure takes place, it doesn't say anywhere in that risk assessment, is this an appropriate procedure for this inmate and why? There is no justification exercise what you're dealing with when it is the presenting behaviour.

Perhaps what **Zara's** experience further shows is the impoverished nature of the officer role as more training is required in order to ensure that an increased awareness covers the trauma survivor's experience of imprisonment. In **Zara's** case, no one knew about her previous trauma, or asked why she was behaving in the way that she was. The issue of segregation was discussed by another 2 women and 3 men. All of the participants cited the unnecessary use of force used during the move from their cell to segregation and/or care and support units. As such, this presents a challenge for TIP, due to its well utilised role within the prison service. As Covington (2015b) discusses, if this practice is necessary to use with trauma survivors, communication and explanation into the process is very important for trauma survivors, to reduce re-traumatisation.

5.4.3.2 Self-Harm

Self-harm scholarship has discussed this behaviour as a coping mechanism used by trauma survivors (Walker and Towl, 2016). However, **Zara** highlighted an important contribution to the understanding of the role of self-harm in prison that may help us to understand the increase of self-harm within the female prisons.

The environment absolutely exacerbates it and it's a culture, it's a definite culture within the prison system. For some women it's about a lack of resource to manage emotion, what emotional resources are they lacking why does she feel like doing that? The issue in prisons is, at the time as an inmate you don't care that they are over stretched and under resourced, you don't care. Then what you will observe is that someone who is regularly self-harming, regularly gets their needs met in rather a rapid way. If you are on an ACCT in the prison, it explores why you self-

harm, all you have to say is that my canteen didn't arrive for 2 weeks and I wasn't offered a pack, act dumb. It's a culture, it's a currency. The message in prison is, I understand that the system has to take care of its inmates but the message is, if you self-harm your needs will be met, needs should be met anyway that shouldn't even be on the table but it is... Nobody asked why I would be sat in that room with a razor blade telling them if you come in this door this is going to happen. Any prison officer worth their salt would be able to go up to a woman and say, I'm wondering if 15 times you've told us what you need and you haven't been heard and you're feeling like possibly this is a way to be heard, well I need to know that I hear you, it is so simple, meet the need, acknowledge it and you wouldn't have as much issue.

Zara's experience raises numerous issues and frustrations for both the prison staff and prisoners. The prison service has experienced challenges such as a lack of funding and resource, as well as lower staffing levels. It seems this could be contributing to the lower level of support and care available to prisoners that may be increasing the experience of the pains of imprisonment. With self-harming levels rising at a rather rapid rate within prisons (Walker and Towl, 2016), it is important that we continue to extend our understanding within this area.

Psychologist Klonsky (2007) conducted a study on self-harm and found that participants reported varying functions for this behaviour, including;

- Tension release.
- Distraction from painful feelings.
- To control their mind when it is racing.
- To decrease feelings of rage and bad feelings.
- To reduce anxiety and despair.
- Self-hatred and punishment.
- Desperation.

- To get attention/ask for help.

Klonsky's findings were collected outside a prison setting, however the pains of imprisonment will perhaps only add to the functions stated above. Regardless of the motivation behind self-harm, it should never be neglected as the environment of the prison further exacerbates feelings of stress, pain and desperation (Covington, 2015b). Whilst there are mechanisms in place to support prisoners such as ACCTs, **Maisey** stated that often it is the element of communication and the relational approach that is missing within the mental health support provided. This was also missing in the prison officer approach to self-harm as **Laura** noted; when a woman on her wing was self-harming, a prison officer "threw some paper towels at her in front of everyone and told her to clean it up". Both **Laura's** and **Zara's** experience, indicate that there is a deficit in training and knowledge surrounding decent care and prison officer approaches to care and support with self-harming prisoners. This suggests that there may be a deficit in prison officer training surrounding self-harm.

5.4.3.3 Anger and Masculinities

Only the male participants stated that they used anger as a way to communicate their emotions in prison. Three quarters of the men (N=6) acknowledged that they had difficulty regulating their emotions, and they described their reactions in prison as "angry", "aggressive" and "sometimes scary".

*I went radge (colloquial term meaning to express rage), smashed me pad (colloquial term for cell) up and everything then I barricaded myself in and then they wrapped me up (colloquial term for restraint) and put me in segregation. I was a wild child, I'd fight, and did a lot of drugs but it's cos of what happened you know, in my childhood. I was sometimes scary in prisons if I'm honest like. It's not me though really, it's not what is below the surface or the real me. Actually I am the opposite, it's the prison man, it changes you. **Neil***

*Ah I used to always smash me pad up, smash me hostel up, just sheer rage, if I think someone is making a mug out of me I just see red, no one is ever going to make a mug out of me, you know what I am saying, never again. **Joseph***

*It's not an excuse when it's all you know is it? I get angry all of the time but because of that I just think it puts up a barrier for me, you know what I mean? Like in prison, you get wrapped up. Out here (in community services) I behave angry or owt like that, I get told "get out, come back tomorrow", it's like I know why I am like that and that? So why don't they ask me? I'd be honest and that and say I am struggling with stuff, but they just don't get it. **Jimmy***

*You have to fight in prison, it's survival. You can't get in there and be a pussy. You have to show them that you're not, then you will get left alone. When you're alone you can be yourself but to them, nah, you're a hard man. I think as well, because I was like that in prison, the guards didn't like me because I was a trouble maker, so I was very much on me own in there. **Mick***

These explanations about fighting and anger connect with the ideas of masculinity and performativity that I discussed in chapter three. The prison environment provides a setting whereby the combinations of survivability, masculinity and performativity can support the development of 'toxic masculinity'. This term was utilised by Kupers (2005:713) to explain "the need to aggressively compete and dominate others and encompasses the most problematic proclivities in men". Moreover the complex intersections between male characteristics, socialisation and institutional dynamics can play a key role in the development of toxic masculinity. Alternatively, 'toxic vulnerability' separates aspects of hegemonic masculinity, in order to discuss them as either 'socially destructive' (misogyny, violence etc.) or 'culturally accepted/valued' (win at sports, provide for his family etc.) (Kupers, 2005). As participants acknowledged, anger and respect were key elements for them. Much of this derived from childhood experiences of trauma, namely experiences of violence.

Although the desire to be shown respect cannot be deemed as toxic, toxicity can emerge when individuals experience chronic disrespect in their childhood, adulthood and in prison, where very little prisoner power exists. In the prison environment attempts to be respected can be connected to “the tough-guy posturing and lead to many violent incidents” and for those who are not violent, they can become “versed in hyper masculine posturing and violence merely to stay alive and protect their honour” (Kupers, 2005:717). The majority of male participants (N=7) acknowledged that they had to become a “different person to survive in jail” (**Liam**).

Three quarters of the men (N=6) disclosed that anger was an emotion they associated with an inability to both manage and express their emotions. This example corresponds with the findings of Evans and Wallace (2008:487), whereby a participant in their study stated “I would rather smash something up than talk about my feelings”. The suppression of emotions to this extent present as violent or angry, and in the prison estate or community setting this will result in punishment. Therefore as Lewis, Hawton and Jones (1997:352) outlined “it is no wonder they try and solve this problem by turning off their feelings altogether”. Furthermore, victimologists such as Spalek (2006) have noted that an emotion such as anger, may arouse less sympathetic responses from individuals. This is of particular significance when attempting to identify an individual’s need within their outbursts of anger.

More recently, victimology has considered the trauma histories of male prisoners and the impact of masculinity (Spencer and Walklate, 2016). Katz and Willis (2016) identified that many individuals have been failed by mental health and social services. Moreover the authors argued “we are continuously victimizing these young men in prison settings where they have little opportunity to receive the help they need” (Katz and Willis 2016:44). As noted by Kupers (2005), many men in prison have been victims and they have experienced a range of other traumas earlier in their lives. Therefore the appearance of masculinity, bravado and anger within prisons should not be dismissed. Rather, the origins of the (presenting) emotions require additional investigation and consideration to ensure that support is provided to individuals who may be struggling to articulate their need for additional support.

5.4.4 Searching for a Resolution? A Trauma-Informed Prison Estate

The majority (N=14) of participants stated that prison was a traumatic experience. A large number of the men and women (N=13) disclosed that they had experienced previous trauma in their childhood. Therefore with this evidence and the acknowledgement of the plethora of M&C needs within the prison population, there appears to be a convincing justification for an approach to support trauma survivors in custody that can help prison staff to avoid the re-traumatisation of individuals during their incarceration, as this will negatively impact upon their rehabilitation. Although TIP approach is already in the implementation stages, there is very little victimological or criminological research acknowledging its worth.

The findings presented in this chapter highlight some of the complex, multi-faceted needs of men and women who are incarcerated. The needs of the prisoner population appear to be further negatively impacted by the adverse life experiences and traumas that many of them have endured. This presents challenges within their rehabilitation and recovery journey, due to the behaviours that they present and the way in which the prison establishment responds. In order to counteract this in America, institutions have adopted Trauma-Informed Correctional Care (TICC). This has provided;

“A contextual foundation that strengthens the prison setting to provide effective help in increasing pro-social coping skills, creating a calm and safe prison environment, reducing adverse events, and aiding staff morale, all of which can lead to better offender rehabilitation outcomes” (Miller and Najavits, 2012:6).

Furthermore, the author stated that the primary goals of TICC are to ensure that all of the staff are trained to be aware of the impact that trauma can have on an individual, in an attempt to reduce the risk of re-traumatisation. This can be achieved through a “do not harm” approach, that is sensitive to the ways in which the prison setting can further exacerbate traumatic dynamics (Harris and Fallot, 2001; Miller and Najavits, 2012). Although the US prison policy is not a great model for the UK to be upholding, Covington’s (2015a) findings indicate that when trauma-informed, prisons become safer, staff jobs become easier and rehabilitation becomes more effective.

When Covington (2015b) came to the UK to train a selection of prison staff working within the female prison estate, she stated that;

“Implementing the principles of trauma-informed care requires a culture shift within the prison environment, throughout policies and practices, and the behaviour and skill set of staff working directly and indirectly with women-in-custody”.

Out of the 17 participants, one male and four female participants had heard of the trauma-informed approach. This group of participants all agreed that they felt TIP within prisons, could better support individuals in custody. **Zara**, a former prisoner who is now a practitioner at a trauma-informed centre in the South West, described an approach adopted within an open prison where she spent the last year of her final prison sentence.

I went to an environment that was completely different, the very concept of maybe I can do this? I was being nurtured, encouraged, I wasn't involved in moving drugs from A to B anymore, I wasn't doing anything negative at all. I managed to maintain enhanced, it was environmental, the calm and the relaxed feel in the unit. I had a key to my door and it just bred a change. Even the way they wore their uniforms, they addressed you by your first name, you address them by their first name. Trust breeds respect and just because one thing has happened on one day in someone's life, where 65 other things might have been contributing factors, does not make someone untrustworthy and until I came into contact with what I now believe was a trauma-informed approach, someone like me would still be in the prison now

Trust was a key term used by **Zara** when describing what she gained in her final prison environment. Liebling and Maruna (2005) acknowledge that prisons are low-trust environments as they house individuals who have not had positive experiences of placing trust in others. Alternatively, mistrust has been an influence associated with the underreporting of trauma; this

is crucial when considering the ways in which the prison environment can impact upon the underreporting of traumatic experiences (Covington, 2015b). As noted by Crewe (2011b), penal procedures are evaluated in 'relational terms' that are clearly separate from outcome considerations. These include the "neutrality of procedures, the trustworthiness of the authority's motives and the degree to which treatment respects their dignity, rights and feelings" (Crewe, 2011b:465). Scholars such as Sparks, Bottoms and Hay (1996) originally acknowledged this area, as it has the potential to overcome some legitimacy issues that can impact the prison environment, as the "most unfavourable outcome par excellence of modern society" (Crewe, 2011b:465). However, despite the deprivations and disparities in power, Crewe (2011b) notes that prison can achieve a level of 'interior legitimacy', provided the institution can treat prisoners fairly and respectfully. Additionally, Liebling (2000: 350) argues "it is precisely 'the social' that consists of the social relationships, notions of trust, respect fairness and legitimacy that enable the life of a prison to 'flow' at all". Although all of this occurs within a specific context (social, legal, political, cultural and managerial) that forms the uniqueness of prison life, agents such as prisoners and staff can add to the complex framework through their social practices and prison-staff relationships.

I draw extensively on the experiences of **Zara**, as she had experienced a trauma-informed, enabling environment within prison. She stated that the change in environment and the respect and decency that she was shown by staff helped harness her behaviour towards sustainable and positive change. Covington (2015b) acknowledged five key elements of an Enabling Environment as outlined by the Royal College of Psychiatrists (2017).

1. A place where positive relationships promote well-being for everyone.
2. A place where people can experience a sense of belonging.
3. A place where all of the people can contribute to the well-being and growth of others.
4. A place where people can learn new ways of relating.
5. A place that recognises and respects the contributions of all in relationships.

An enabling environment can be created in various locations including and not limited to places where we work and live, schools, neighbourhoods, as well as environments that provide health and social care and within criminal justice settings. The Royal College of Psychiatrists (2013) promoted 10 key standards that are crucial within an enabling environment, these are; *belonging, boundaries, communication, development, involvement, safety, structure, empowerment, leadership and openness*. Similarities can be drawn from the 10 key standards to the five core values specific to TIP. Rather than ‘treat’ a trauma survivor, the trauma-informed approach and the enabling environment seek to provide a decent and safe environment, whereby recovery, support and rehabilitation can be facilitated.

However, to achieve a trauma-informed, enabling environment within the confines of a prison will inevitably require a substantial cultural shift that Covington (2015a; 2015b) has previously recommended. In **Zara’s** experience, she outlined the value of the encouragement, respect and relational approach she received from staff within the open prison setting. To achieve a trauma-informed prison environment she stated that although training will be beneficial to staff members, she felt strongly that “*trauma-informed practice is inherent, it is just about being a decent person, it’s not psychological, you either have it in you or you don’t*”. This notion of trauma-informed being inherent within someone’s personality was also discussed by two other participants who had heard of and experienced TIP within the prison setting.

Contrastingly, Miller and Najavits (2012) remind us that experienced prison staff have developed good strategies to respond to individuals who have experienced trauma, despite facing their own adversities within their role, including lack of formal training (within specific trauma support), lack of resources and potential burn out. This will be explored more robustly in the following chapter within the reflections of prison staff and third sector community staff.

Miller and Najavits (2012) challenge the way in which trauma-informed correctional care focuses predominantly on women specifically. First, the authors argue that training on gender specific issues is vital, to harness advanced education for prison officers, as staff can benefit from understanding both male and female trauma dynamics. This dual understanding is

beneficial as it may help staff to gain a deeper understanding into both 'feminine' or 'masculine' prisoner reactions. Second, Miller and Najavits (2012:6) argue that training prison staff about male trauma can increase the attention and compassion of male staff, who can begin to see trauma as a safety issue, instead of the "abuse excuse or something that only applies to female offenders". According to the author's assessment and the findings of this research, to trauma-inform the prison estate would require investment, training and increase decency and respect within a prison staffs' approach.

To do this will require stringent hiring practices, but also this raises the question of what can be done about the presence of *rogue officers* that my participants highlighted. Much more academic and trauma-informed practitioner attention is required within this area, to overcome the negative impact of such an officer. Such staff counteract and threaten the trauma-informed approach, as prisoners feel they cannot report them due to fears of being punished (see p.134). The main body of this chapter has explored the experiences of prison and the way in which behavioural adaptations of participants can be connected to experiences of trauma. However, now we turn to the experiences of participants once released from prison and how a trauma-informed approach can also compliment the aim of desistance and recovery.

5.5 Life After Prison

In the final section of the interviews, participants were asked about their life following release from prison, as well as their hopes and ambitions for the future. This was an important technique derivative from the trauma-informed methodology discussed in Chapter Four. A key element of TIP is to empower individuals, and I wanted to end the interview by closing on a positive note. Just over half of participants (N=10) disclosed feelings of hopelessness, whilst a small group of participants (N=5) stated that their fears for the future were central to their inability to move forward.

5.5.1 Desistance and Recovery: Trauma-informed Considerations

Aurora discussed that the impact of her prison sentence caused significant difficulty in gaining employment, due to the stigma of her custodial sentence. This was also discussed by just over half of the participants (N=10) as they associated this as being the main reason why they felt they could not move on following their release from prison. **Aurora** stated;

Prison has ruined my life, they say your sentence starts when you leave the prison, and you know what? They are not wrong there.

Following release from prison, participants discussed the challenges they faced when trying to build a new life, following their custodial sentence. All participants had varying and contrasting narratives about their desistance journey. The majority of participants (N=14) at the time of the interview stated that were able to initiate, maintain and sustain positive change to desist from crime. The findings of the Liverpool Desistance Study (Maruna, 2001), set the standard for qualitative research within the area of desistance; the findings showcased the importance of ‘making good’, the process of constructing a positive identity and narrative about their future, as well as focusing on generativity, to give back to society. The term generativity is used by leading desistance scholars (McNeil and Maruna, 2007) to describe the promotion of development and well-being, however it can also be applied to an individual leaving prison and using their experiences towards a ‘generative capacity’ to support and promote the rehabilitation of others.

This was replicated in my findings as the majority of the desisting participants (N=10) stated that they had ambitions of “giving back” by gaining employment to support individuals involved in the CJS, either as volunteers or as practitioners. A small minority (N=2) of participants had secured full-time senior practitioner roles within health and social care organisations (this will be explored further in chapter 5) and another two participants went on to gain paid full-time employment within this sector. For one third of the participants (N=5), attending support groups such as Alcoholics Anonymous, or Narcotics Anonymous, helped provide additional resources and levels of motivation, within their desistance and recovery journey. The importance of considering both

recovery and desistance journeys can be associated with the need of the majority of participants in this study. More specifically, it is imperative to pay reference to the crossover between trauma, substance use and offending in the lives of the participants.

An individual's ability to move on from drug and alcohol addictions is connected to a person's 'recovery capital'. This term has been used by leading substance misuse academics (Best and Laudet, 2010; Cloud and Granfield, 2009). The cross over between desistance theory and recovery theory is significant. Recovery capital depends upon the following four components;

1. **Social Capital:** This includes resources such as relationships, support, family engagement and group commitments whereby support can be provided.
2. **Physical Capital:** This can be understood as having tangible assets such as personal finance, property etc.
3. **Human Capital:** Consists of personal skills, aspirations, health, hopes and personal resources that can increase an individual's agency, such as intelligence and problem solving.
4. **Cultural Capital:** This includes beliefs, attitudes and values that connect with social conformity and can increase an individual's engagement within society.

These are particularly important within an individual's recovery from substances and desistance from crime. However, as trauma is connected with the substance misuse literature, the recovery capital of an individual could also be impacted by experiences of trauma. Therefore this is an area worthy of scholarly attention.

Alternatively, Nugent and Schinkel (2016) have highlighted the 'pains of desistance'. For many offenders, the road towards living a crime free life is not always an easy or pleasant one. Desistance can be incredibly challenging to gain and maintain with M&C needs such as lack of housing (Edgar et al., 2012), challenges relating to employability and financial difficulties (Bottoms and Shapland, 2011; Hlavka et al., 2015), issues with substance misuse (McSweeney, 2010) and mental health issues (Senkans, Thakker and Ward, 2015). Additionally the cessation of offending has been associated with a variety of factors including, but not limited to, maturation,

increase in familial bonds and intimate relationships, employment, shelter, financial capability and the disengagement of criminal identity (Senkars et al., 2015). The term desistance will be discussed within this section in relation to Maruna and Farrall's (2004) concepts of primary and secondary desistance as well as McNeill's (2016) term of tertiary desistance.

Taking into consideration the vast scholarly debates within desistance, I intend to utilise a selection of literature, to highlight the way in which TIP may have potential in supporting an individual's journey towards desistance. Primary desistance relates to a period of no offending, whereas secondary desistance is used to draw upon the process of change, related to an individual's identity and sense of self, whereby the individual no longer sees themselves as an offender (Maruna and Farrall, 2004). Tertiary desistance adds an additional layer in understanding the process of achieving long-term change. This includes a stage whereby the individual recognises the change and progress that they have made, to develop a sense of belonging (McNeill, 2016).

Weaver (2013) noted that the way in which we act is dependent upon not only the way we see ourselves, but also the way we see ourselves in the eyes of others. To further add to the appreciation of desistance as much more than a linear process, Nugent and Schinkel (2016:570) proposed the terms 'act-desistance' to refer to non-offending, 'identity desistance' makes reference to the internal change of identity, and 'relational desistance' to describe the acknowledgement of change by others.

The levels of relational desistance can be discussed first on the micro level. This is linked to an individual's social setting. Second, on the meso-level, this refers to the individual's community. Finally, within the macro-level, this is connected to society as a whole (Nugent and Schinkel, 2016). An individual's ability to achieve relational desistance can be undermined if all of the levels (micro, meso, macro) are not being met. Despite this, the authors acknowledge that individuals can still achieve act-desistance and identity-desistance, as relational desistance is dependent on others and not just that individual. An individual can improve their journey towards achieving relational desistance, through the extension of their formal and informal connections (Weaver, 2015), as well as increasing their social and bridging capital (Putnam, 2000). Further, Nugent and Schinkel (2016)

add to the levels, by providing specific examples, whereby they refer employers to the meso-level, and the ways in which criminal record and disclosures are utilised in recruitment decisions related to the macro-level. This was a significant obstacle for over half (N=9) of the participants interviewed within this research. As **Aurora** disclosed;

I'm having great difficulty in getting a job and keeping a job. I get interviews easily; I've started and lost 12 jobs in a year. People google me. Two weeks ago I got a job, I got the flights, the boarding cards sent by the employer and then she changed her mind. She was upset with me because I hadn't disclosed anything to her. The advice I have had is disclose it at the beginning, disclose it in the interview and disclose it after you have been offered the job and there hasn't been a right time to disclose it, so I am getting a little stuck and frustrated, what am I supposed to do to get back on my feet... I'm just applying for jobs at some point someone is going to not be bothered, fingers crossed.

The majority of participants discussed employability as the main barrier for them to move forward, this was followed closely by issues with housing and challenges in getting custody of children. Throughout the plethora of issues mentioned by participants, the majority (N=13) stated that they were hopeful for the future, despite the issues they raised. Out of the 17 participants, a small group (N=3) of those individuals were still active within the cycle of reoffending. Most participants (N=7) were in full-time employment and the rest of the participants (N=6) were looking for paid employment.

Taking into consideration the range of trauma experienced by participants, it is not surprising that an element of resilience and hope is a key part within the desistance process (Burnett and Maruna, 2004). As Anderson et al., (2011:30) indicated “the reality is that the social circumstances of the lives of many prisoners and ex-prisoners suffocate hope”. However, research conducted by Maruna (2001) emphasised that despite the obstacles, desisters still manage to acquire a sense of agency. Therefore, it is important to recognise the strengths and

resources that former prisoners have, in order to overcome adversity within their desistance journey.

McCulloch (2005) and McNeill (2006) have suggested that as desistance is about discovering agency, the support in place for offenders should encourage self-determination to work in *collaboration* with them, rather than ‘on them’. Interventions and support should consider offering *choice* to accommodate identity and diversity, within an individualised process of desistance, as a ‘one size fits all’ approach within interventions will not work (Weaver and McNeill, 2007). Within the support offered to offenders, Maruna and LeBel (2003) argued that often the focus is placed on the risk of the offender, whereas support should *empower* an offender’s personal strength, resources and capacities. As such, the job of eliciting and maintaining hope becomes a key element for workers (Farrall and Calverley, 2006). The words that I have italicised have been utilised within the five key values of TIP. I have discovered no existing research that explicitly links the impact that a trauma-informed approach can have on an individual’s desistance journey. However, there are similarities within the key values of desistance support and that of TIP. Given, that the trauma-informed approach is growing within community rehabilitation services, much more robust and substantial research is required in this area, in order to ascertain the impact this may have on a desisters’ experience. However, as **Zara** stated;

I never believed in the rehabilitative process until the end, until I came into contact with what I now believe was a trauma-informed approach. Without that someone like me would still be in prison now.

When asked what it was that helped to support her desistance journey, **Zara** reflected;

When society has written you off and no one really understands and life has written you off and all of those things; for someone to take a chance was life transforming it just introduces the very quiet concept of maybe I can do this and that was nurturing, it was being watered and it was being fed. It was

environmental as well, the calm and the relaxed feel of the unit that I was in where I was allowed to leave all of that stuff it just bred a change, a complete change. I think if trauma-informed practice became a key part within rehabilitation you would see a lot more people like me, who are able then to blossom and to grow...I would bet my next wage packet that it would absolutely reduce recidivism, absolutely reoffending rates would reduce, it should be part of every prison male or female and community services.

This account suggests the potential impact that a trauma-informed approach can have within the rehabilitation journey, not only in prison, but in the community services and the support provided to current and former prisoners. As desistance and recovery are processes that include relapse and to-ing and fro-ing, it is important that individuals are motivated throughout and with the addition of strength based approaches such as TIP as this could have the capacity to encourage individuals within their desistance journey. As there is a deficit in the evidence base connecting desistance and trauma-informed approaches, it would be beneficial for researchers to consider its worth as an emerging concept. However, experiences like **Zara's** provide an indication and evidence to justify that a trauma-informed approach within rehabilitation and desistance may have potential. Therefore, this area deserves additional scholarly scrutiny to produce some robust and reliable evidence.

5.6 Conclusion

Within this chapter, I have explored the experiences and reflections of participants, to call attention to the way in which trauma manifests within the behaviours of men and women in prison. This chapter has demonstrated that trauma is pervasive and there are additional complexities associated with men and women in prison that require attention, in order to provide effective support and actively avoid the re-traumatisation of trauma survivors. I believe critical victimology can utilise this research to advance the literature and challenge the dominance of the positivist perspective to further our knowledge of the more complex manifestations of trauma. The consideration of trauma survivors' experiences, pre, peri and post imprisonment, helps us to advance our appreciation of

their behavioural adaptations, complex vulnerabilities, and the way in which the pains of imprisonment are intensified. In addition, there has been an appreciation of the needs of desisters and the recovery capital of individuals upon exit from prison.

First, within Section 5.3 'Life before prison', I explored the childhood, adolescent and adulthood experiences of participants. For the majority, their experiences were traumatic and had long lasting implications on their lifestyle, behaviours and coping strategies. Their experiences challenge the stereotypical assumption of how a trauma survivor should behave. The experiences of my participants highlight that often the most disruptive and challenging behaviour can equate to high levels of vulnerability. Therefore this data contributes to critical victimological theorising, in order to challenge the dominance of positivist victimology and to explore hidden and under-researched complexities within manifestations of trauma.

Second, in Section 5.4 'Life in prison', the findings indicated that prison was a 'traumatic' experience for a variety of reasons. The findings of the 'The Gendered Pains of Imprisonment' indicate that there is a deficit in support for trauma survivors in prison. Moreover, the presence of *rogue officers* indicated additional re-traumatising potential for individuals, and as such, this is an area of concern for trauma-informed scholars and those involved within the implementation of this approach. In addition participants explored their experiences of prison approaches to self-harm as well as the use of segregation, and the findings correlate with Covington's (2015a;2015b) and Kubaik, Covington and Hillier's (2017) argument that the normal practices within prisons are re-traumatising and not considerate of trauma survivors' experiences and reactions. As such, the findings provide justification for a trauma-informed prison estate, in order to avoid some of the exacerbated pains of imprisonment for trauma survivors. The pains of imprisonment are felt more intensely by trauma survivors due to the prison structure, the environment and the practices that trigger and re-traumatise these individuals. The combination of critical victimology, the sociology of imprisonment and trauma theory can advance our understandings of how trauma survivors experience prison, as well as how their imported experiences shape their behaviours. This is

necessary in order to improve both the *recognition* and appropriate *response* to the needs of trauma survivors in prison.

If the experience of prison is ‘traumatic’, it will likely stay with an individual once they leave prison. Liebling (2012) acknowledged that the concept of seeing the self in a better future state, is dependent on whether the trauma is present or reactivated. Further, she states that if the trauma continues throughout an individual’s prison sentence, the prospect of “human flourishing is unlikely” (Liebling, 2012:9). Therefore, the experience of trauma and the trauma of incarceration will likely impact an individual’s ability to achieve their desistance and recovery goals.

Therefore, in Section 5.5 ‘Life after prison’, I explored the experiences of participants following their release from prison. Within this section all participants disclosed that they had experienced adversity during this period, in gaining and sustaining employment, as well as the challenges of staying positive. However, **Zara’s** experience indicated the potential value of a trauma-informed approach within desistance, in order to increase empowerment, self-esteem and hope. However, I have not encountered any literature related to this. As such, it could be an area worthy of increased scholarly attention.

In the following chapter, I consider the experiences and reflections of prison officers and latterly, third sector community staff members, in order to gather their experiences of working with trauma survivors, to explore how they *recognise* and *respond* to the needs and vulnerabilities of trauma survivors. In addition, the following chapter will uncover the challenges staff have faced within their roles; as well as what support is available for them and their specific needs.

Chapter Six

Supporting Traumatized Survivors: The Role of the ‘Forgotten Service’

6.1 Introduction

Following on from the perspectives of men and women who have been in prison, this chapter presents the findings emerging from the 24 qualitative semi-structured interviews, that I conducted with prison staff, across four prison sites. The blanket term ‘prison staff’ has been used for the purposes of anonymity, protection and inclusivity. Participants held diverse roles and responsibilities, including governor grades, senior prison officers and prison officers. The staff perspectives included in this chapter were collected from varying geographical locations within two public sector male prisons and two public sector female prisons (see Appendix Fourteen). The chapter focuses on the ways in which prison staff understand the needs of trauma survivors and therefore how they *recognise* and *respond* to the complex manifestations and vulnerabilities associated. Participants were asked to reflect upon their role, as well as the hurdles and challenges they had experienced. In addition, staff shared their experiences of working with challenging behaviour as well as what staff support they have received (see Appendix Six).

To attend to the critical encounters of prison staff in the previous chapter, this chapter encompasses the reflections and at times, emotive narratives of the prison staff. First, this chapter uncovers the perspective of prison staff, including how they perceived their roles, as well as how they articulate their expertise and the impact of working with *rogue officers*.

Second, this chapter explores the strategies adopted by prison staff to manage the M&C needs of the prisoners in their care. More specifically, prison staff disclose the techniques they utilise to both *recognise* and *respond* to prisoner vulnerability and behavioural manifestations of trauma. To advance the findings of the previous chapter, this chapter considers the ways in which prison staff view substance misuse, self-harm and anger, as managing challenging behaviour was also a key

point of discussion with all prison staff. The ways in which they responded to these prevalent prison issues are further examined in this chapter.

Third, this chapter considers the experiences of over half (N=13) of the prison staff participants who have worked with both male and female populations, as they shared their reflections on the gender differences in prisoner behaviour, specifically linked to the manifestation of previous trauma.

In the final section of this chapter, I explore the challenges and hurdles prison staff disclosed they have experienced during their careers. I move onto to consider how a trauma-informed penal approach could incorporate the needs of prison staff, in order to improve their work-life. As I will argue, the way in which prison staff perceive their treatment and experience of work will inevitably impact upon the support that they are both able and willing to provide to prisoners.

To conclude, I examine the potential of the BTI penal approach, to test if this has the potential to counteract some of the frustrations arising from prison staff narratives. In addition, I explore how this approach could help to shape a safer and more effective prison system for both the prisoners and prison staff. To provide additional analytical depth, at the end of this chapter I briefly apply the experiences of third sector community staff (N=12) working within two trauma-informed organisations in order to highlight if there are any lessons the prison service can learn from the successful implementation within the community setting.

6.1.2 The Penal Journey: Moving Towards 'Becoming Trauma-Informed'

The review in Chapter Three, and specifically the work of Harris and Falloot (2001) and The Prison Reform Trust (2013), highlight that trauma-informed organisations fit within a best practice approach to support women in prison. However, the work of Covington (2015b) and Miller and Najavits (2012) also indicates a trauma-informed potential to support the needs of men in prison. Although originating from work in the US department of corrections, TIP has begun to permeate penal practice within the UK. To provide context, I have designed a timetable that provides a visual guide outlining the implementation stages so far (see Appendix Sixteen). The implementation is

being led by a charity named One Small Thing as well as Lady Edwina Grosvenor and Dr Stephanie Covington, with the aim to fully trauma-inform the female prison estate by the end of 2017. This practice provides a multi-layered strategy to support prisoners, staff and organisations/institutions (Covington 2015b; Fallo and Harris 2009; Harris and Fallo 2001; SAMSHA, 2014). To implement this approach, each prison has been allocated with a BTI trainer, who is tasked to lead the change in NOMS and in the prison (Covington, 2015b). The four functions of the trauma-informed lead are to;

1. Generate interest in the change and to keep the initiative as a central strategic priority.
2. Become the 'point person' for teams, steering committees and groups that will become established to follow up on the implementation across the prison system, each prison and within the programmes.
3. Provide the work groups/steering committee with information so that they can establish representation from all of the stakeholders involved in the receipt and delivery of services within prisons and programmes.
4. Effectively monitor the implementation of all trauma-informed processes, to report to senior management and consultants to provide an up-to-date progress log of the change. (Covington, 2015b).

In addition to this, each prison has trauma and gender champions, who act as role models to deliver practice aspects of BTI, to support the overall culture change goals (see Appendix Fifteen and Sixteen). To sustain the progress of the BTI trainers and the champions, a BTI steering group meet twice per month at the beginning of the implementation, then once per month after to discuss the progress of BTI. The BTI steering group consists of 8-10 individuals (representing a cross section of prison staff including, governor, custody officers, direct care staff, supervisors, and women in custody *if feasible*).¹⁴

¹⁴ My research began in June 2016 and ended in October 2016. The two female establishments were at this stage on their way to implementation. They had BTI trainers, champions, steering groups and were at the stage of feeding back to Covington and One Small Thing about their implementation experiences.

In my reflective diary entries, I noted that the adoption of TIP was notably smoother within the open female prison setting than in the closed setting. The open prison setting was a significantly more relaxed environment, compared to observations within the closed prison. This is due to a smaller population size and increased opportunities including more freedom, improved movement, access to outdoors, ability to apply for Release on Temporary Licence (ROTL) for work commitments and familial visits. Liebling's (2012) findings identified that the open prisons are considered as much more psychologically survivable than closed. This may explain why Singleton (1998) found the lowest rates of neurosis inside the open prison settings. Environmentally, the closed and open prison settings differ substantially. Crewe et al., (2014b) have called for a more robust spatial analysis of prison culture due to the differing experiences of prisoners, depending on their location and categorisation. These authors argue that the focus should be placed onto the social architecture of alternative prison spaces, to explore the impact that penal establishment construction, design and nature of the wings have on prisoner self-censorship and emotional regulation.

However, within both settings there is an emerging need for an approach such as BTI. This is evident in the prevalence of trauma survivors entering Her Majesties Prison Service, as well as the levels of staff dissatisfaction across the prison service. This approach, that promises to increase levels of safety in prisons, has arrived at a critical time of penal reform as the decline of safety in prison custody indicates the need for drastic and swift action (Ministry of Justice, 2016c). In July 2017, the Ministry of Justice (2017) published shocking statistics acknowledging the rise in self-inflicted deaths across both male and female prisoner populations, and from the previous year, an 11% increase was recorded. In addition the report noted that self-harm incidents had risen by 24%. Perhaps most shocking was the substantial 23% escalation in prisoner-prisoner violence, and the assaults that staff experience have also increased by 38% (Ministry of Justice, 2017).

Taking these appalling statistics into consideration, on Tuesday 15th November 2016, The Professional Trades Union for Prison, Correctional and Secure Psychiatric Workers (POA) supported up to 10,000 prison officers to take part in unlawful industrial strike action. This came to

a halt when the government were granted a high court order, to ensure prison officers went back to work. For the POA however they felt that Elizabeth Truss (the then LCSOSFJ) had hidden

“Behind the repressive anti trade union laws imposed upon this trade union by her predecessors and conduct industrial relations via the courts instead of discharging her fundamental duty to provide a safe decent and secure working environment” (POA, 2016:No Page).

As Coyle (2002:9) notes, how can a prison system cope when there is a 50% increase in prisoners and no “corresponding increase in resources”? This influx of violence, increase of substance misuse, rising suicide rates and self-harming incidences have equated to a resounding lack of safety within the prison service, which eventually led to many frustrated officers taking strike action (Travis, 2016). Findings of this research highlight that an “unfairness” and “injustice” in prison staffs’ inability to strike, was a feature in 8 out of 24 of the interviews collected. Concerns such as these suggest that staff are at breaking point. Therefore how unsafe is the prison estate for our prisoners?

In the current penal climate, it is challenging to envisage it ever 'Becoming Trauma Informed'. However this response could be a potential solution to the issues endemic within the prison service, through a top-down systematic approach. Similarly, Brown et al. (2013) highlighted that a trauma-informed shift can appear daunting when staff are struggling with multiple demands such as a lack of resources. However, the authors argue that through adopting a trauma-lens, services and practice can be improved substantially and affordably. However, there is evidence to suggest that the prison service has been improving its regime (specifically towards female offenders) since the 2007 Corston report. As discussed in Chapter Three, the decency strategy adopted by the prison estate in 2002 became one of the prison service's seven strategic priorities. Among its principles, standards were promised that facilities and establishments would be clean, appropriately equipped and maintained and prisoners would be provided with variety and choice, in order to make the prison experience somewhat bearable (Ministry of Justice, 2009a). However, this document also

highlighted that once again the importance of staff engagement and building positive relationships, lies at the heart of the decency strategy.

This was supported in the findings of my own research, as the majority of participants (N=18) discussed the positive impact of the decency agenda. As **Sara (Closed Female)** stated

The decency approach here really has helped us get to know some of the issues from the women, it is like saying, how would you want your son or daughter or loved one treated? That sort of thing.

Similarly **Terry (Open Male)** identified that

The decency approach is very important to us here, it really breaks down a lot of barriers with the residents here, and it says, we are equals here, you are safe.

These examples highlight the attempts of changing the culture of the prison estate, and the movement towards an environment that promotes decency and empowerment. In a similar way the BTI initiative builds on from the decency strategy, towards a much more advanced strategy to increase the work already in practice within this area. The decency strategy has been embedded within the prison policies for the last 15 years since 2002 (Ministry of Justice, 2009a) and its longevity indicates that with the support from prison officers initiatives can be successfully embedded within prison culture. This is crucial for the success of BTI.

6.2 The Role(s) of the Prison Officer

The challenges associated with the role of the prison officer have been widely acknowledged (Baldwin 2015; Crawley 2004a; Crewe et al., 2017; Crewe 2009; Liebling 2000; Liebling et al., 2011a; Tait 2011). In Chapter Three, the role of the prison officer was briefly explored as to whether it was their responsibility to *recognise* and *respond* to the manifestation of previous trauma. As the role is prisoner-facing, prison officers are the initial responders when supporting prisoner needs. However, the role is increasingly demanding and complex, as the prison population has multi-faceted needs and many have experienced previous trauma. Aside from the plethora of

responsibilities of the prison officer, the support of prisoners is perhaps the most crucial one. My approach has been careful to avoid dichotomous thinking within penal reform. The needs of the prisoners and the staff are considered with equal importance and significance. This is consistent with a trauma-informed service implementation (SAMSHA, 2014).

The role of the prison officers, their lives and experiences, were not systematically examined until the late 1970's (Lerman and Page, 2012). Indeed, Liebling (2000:37) stated that in many respects prison officers were the "invisible ghosts of penalty". The role of the officer encompasses the 'power to punish' in every aspect (Garland and Young, 1979). The job role remains entirely subjective, as when I asked officers about their role and responsibilities in 2016, there appeared to be a juxtaposition and uncertainty as to whether they are disciplinarians or therapeutic helpers. Gilbert (1997) however, argued that it was difficult to define what prison officers do, making it challenging to assess their success in their role. This author argued that the direct work of officers is not just security or safety focused. Instead Gilbert (1997) stated that the personal interaction between staff and prison is imperative, as this can help to reduce the levels of tension and pains within the prison environment. As a result, this can indirectly improve the "levels of safety, security and control within the prison estate" (Gilbert, 1997:53). The interaction between staff-prisoner and the relationship developed has been acknowledged as being at the heart of the prison system (Home Office, 1984). Therefore this unique role deserves particular scrutiny.

According to Colin Moses, the National Chairman of the POA (2016:No Page), there are 19 key components that officers must deal with on a day to day basis, he further states that:

"In the last twenty years the role of a prison officer has changed from that of a supervisor or guard to that of a multi skilled manager of offenders. Officers have to fulfil the role of teacher, trainer, welfare officer, agony aunt, listener, enforcer and supervisor".

As such, the variety of responsibilities within the role of the prison officer were discussed in all 24 of the interviews. **Liz** (Open Male) states that “*officers have so many hats to wear and so many jobs to do*”.

Similarly, **Betty** (Closed Female) acknowledged

A prison officer is a funny one because you look at the job description and we have spoken about it many times, you're the person who keeps them inside, keeps the public safe and that's the official role but all of it is like a mother, a sister, a friend, almost a nurse, a teacher, confidant, you could go on forever and sometimes the uniform gets in the way and that's why some people don't wear the white shirt here as it can be a barrier. You have to remind the women that just because I'm in a uniform doesn't mean I'm not like you because I am. We are all humans and we are on a different side of the bar and what I say to you might be helpful and I'm never going to turn you away.

Betty reflected upon how ‘different’ she was to other officers, she disclosed that she found herself going “*above and beyond the call of duty*”, if she felt a prisoner required additional support. She stated that if she felt a prisoner was in need of support, she would regularly stay behind after her shift had ended in order to ensure that the prisoner was settled before she travelled home. During her lengthy interview, it was clear that **Betty** was a caring and compassionate prison staff member, and as the discussion progressed, she described herself as “different to other staff” within the prison. She disclosed her distain for officers she described as *rogue officers* and openly discussed the difficulties she has faced being, in her words, “too soft”. However for **Betty**, the service and support she provided, were linked to her being able to leave the prison estate with a clear conscience. As she explains;

I'm not going to sit there and go home after lunch, then have someone say to me 'you know you left one dead in that cell', nah I couldn't do it I'd rather be ran off my feet. Then I know I've done my job properly, I don't need consequences, I've

got some internal standards that I just can't change and if I ever get somewhere near changing then it's time for me to leave.

The notion of internal standards of prison officers was discussed by over half (N=14) of the other participants. Further, the supportive and interactive nature of the role was discussed by almost all of my participants (N=23). **Don** (Closed Female) explained

As a prison officer, we are psychiatrists, mothers, everything we are a jack of all trades, but really we are the hidden service.

Supporting **Don's** perception of the hidden service, Gilbert (1997) acknowledged that the often rich and diverse working behaviours adopted by prison officers are not always recognised. **Don** further argued that

The role of the prison officers is devalued and de-skilled, it isn't this menial task of opening and shutting doors that is 5%, 95% of your time is spent interacting with people. We are behavioural analysts as well as custodians of care...its jail craft isn't it.

Although Sykes (1958:60) did not explicitly mention the concept of 'jail craft', he did cover the non-technical job requirements of officers to have good characteristics "such as courage, honesty, and so on". The skills that officers require to be able to de-escalate situations, communicate effectively and support prisoners are not readily seen as a form of expertise. Most research attests to the work of a prison officer as 'highly skilled' (Halsey and Deegan, 2016) and recognises the emotional labour associated with the role (Crawley, 2004a; Liebling et al., 2011b). More recently, the topic of 'jail craft' has emerged in the penological discussion as a "multi-layered narrative or discourse, and a set of tactic practices which allow officers to maintain order and have functioning working relationships with prisoners" (Peacock et al., 2017:3). Moreover, the authors argue that 'jail craft' connects with the working identity of prison officers, whilst alluding to their skills, pride and the solidarity within the service. According to Liebling (cited in Ministry of Justice, 2009a), 'jail craft' has been regarded as a common sense approach by officers, however, she argues, it is

not, instead it is a knowledge base built up from years of experiences and judgements made through the under use of formal powers. The concept of ‘jail craft’ was discussed by a large group of participants (N=18). This discussion arose organically when I asked prison staff about their role and what they think are the strengths they bring to the role. As a fairly under researched area of prison culture, the acknowledgment of ‘jail craft’ within the prison staff interviews indicates alternative specialisms to consider within the role of the prison officer.

Figure 6.1 The role of Jail Craft

<i>Participant</i>	Jail Craft Description
<i>Amy (Open Female)</i>	“Jail craft is like another sense, like having the ability to predict issues before it occurs”.
<i>Claire (Closed Female)</i>	“I think jail craft is a million different things but mainly it’s being able to see through nasty behaviours and see a sad person”.
<i>Betty (Closed Female)</i>	“Not being judgemental and talking to people, that’s jail craft”.
<i>Kevin (Open Male)</i>	“You have to have some passion for what is going on in here, to have jail craft is an inherent thing as well as an on the job learnt thing”.
<i>James (Closed Male)</i>	“Sometimes jail craft for me, is the ability to hide my feelings from everyone. Like I used to cry and feel things and I think I have turned some of that off, if I didn’t, I wouldn’t be able to work here”.
<i>Reg (Closed Male)</i>	“Talking to each prisoner differently, this is the type of jail craft comes with experience”.
<i>Holly (Open Female)</i>	“Knowing your prisoner, is the best knowledge

	you can have, so I guess if you think about it as a jail craft, you need time in order to actually get to know the people in your care”.
<i>Richard (Closed Female)</i>	“I think jail craft is being able to feel the atmosphere change”.
<i>Don (Closed Female)</i>	“I take little pieces of what I like of everyone, I still do it now because you’re learning all of the time, so my jail craft is continuously forming and I am near the end of my service”.

Although ‘jail craft’ has been previously acknowledged as something that is learned through experience, the prison staff that I interviewed, shared the more intuitive and character based skills that may not be nurtured or taught. For example, the ability and desire to care, empathise and support prisoners may also derive from a staff’s nature, qualities and individual temperament. Some of the examples in Figure 6.1, highlight that much of the jail craft they have acquired has been an amalgamation of the characteristics both imported into the prison and from the knowledge that they have built up from their experiences during their career. When considering the specialisms of prison officers, typologies can help us to understand prison officer personalities, boundaries, professional practice and qualities into separate categories. For example, Gilbert’s (1997) four broad ways of prison officer categorisation (the professional, the reciprocator, the enforcer and the avoider) provide examples of some of the varying prison officer characteristics present within the prison system.

However, my findings highlighted that there are varying complex and internal pressures that can impact the way in which a prison officer may behave. This will be expanded upon in more detail in section 6.4. Emphasising the use of the prison officer typologies, elicits additional understandings of the varying personalities and characteristics of individuals working within the prison service. Yet, Liebling et al., (2011a:53) confirm that often there is an overlap in the categories of prison

officers. We know that the characteristics of prison officers differ substantially. This is an additional complexity that prisoners will have to negotiate as some officers may be more supportive in nature than others. An alarming finding within my research indicated that three quarters of prison staff interviewed (N=16) stated that they had complained to their management, about a colleague's treatment towards prisoners. More than half (N=13) of participants stated that they felt these colleagues were *rogue*.

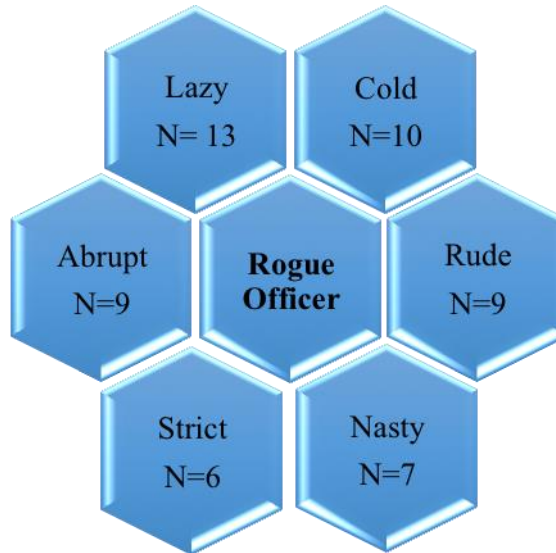
6.2.1 Role Model and Rogue Officers

I use the two terms 'role model' and *rogue officer* to describe a dichotomy in levels of service discussed in the interviews with prison staff. The 'role model' prison officer has been covered initially in the work of Kriminalforsorgens Uddannelsescenter (2004) and then again in the research conducted by Liebling et al., (2011b).¹⁵ The term *rogue officer* is not often used within the prison literature, the closest consideration of this can be found in the work of Sim (2008). However, this phrase emerged organically from the narratives of my former prisoner sample groups (Chapter Five) as well as from my prison staff sample group.

When staff disclosed issues with *rogue officers*, I asked them to describe these officers using three words. Many of the words applied were used multiple times by staff. Figure 6.2 on the page below, illustrates the most common words used by participants when describing *rogue officers*.

¹⁵ To see the full table of role model characteristics of prison officers see Liebling et al., (2011a:49-50).

Figure 6.2 Describing Rogue Officers



Although the words cold and nasty demonstrate the potential engagement in the gross misconduct outlined by former prisoners (Section 5.4), the majority of the words used to describe *rogue officers* indicate attitudinal issues that could be associated with complacency and disengagement in their role due to low staff morale or training needs. Moreover, participants in this case did not disclose any experiences with *rogue officers* that were of a serious nature, unlike the former prisoner participants (Section 5.4).

The findings indicate that the *rogue officers* identified by prison staff mimicked some of the characteristics identified in the ‘damaged’ officer that featured in Tait’s (2011) prison officer typology. The typology explored five key prison officers' approaches to care; the *true carer*; *limited carer*; *old school*; *conflicted* and *damaged*. A brief overview is shown below;

1. **True Carer:** Officers who were described as caring by prisoners, who engaged in positive relationship development, expressed empathy, provided exceptional support confidently and were highly engaged in their work.

2. **Limited Carer:** Officers who provided more pragmatic care such as adhering to the rules and policies regarding bullying, self-harm etc. They see prisoners as socially vulnerable and attempt to support their needs, however this was limited if they detected a lack of gratitude.
3. **Old School:** Usually these officers have worked for the prison service for over 20 years. Their caring was “contractual”, “paternal and protective”, with a “keen eye for detecting exploitation” (Tait, 2011:446). These officers provided reliable, consistent and trustworthy support, however they saw a separation between themselves and prisoners.
4. **Conflicted:** Officers who expressed the lowest empathy for prisoners unless they were individuals they had deemed ‘deserving’ and the care they provided was “conditional on prisoner respect”. This led to prisoners describing them as “untrustworthy and two-faced” (Tait, 2011:447).
5. **Damaged:** These officers were separated into two distinct categories; ‘*damaged withdrawn*’ and ‘*damaged dangerous*’. The damaged officers were described as experiencing a “significant shift in their outlook following a sequence of traumatic events” (e.g. responding to severe self-harm and being assaulted), with a lack of follow-up support from their managers (Tait, 2011: 448).

Out of the six officers identified as damaged within Tait’s (2011) analysis, three of the officers (damaged withdrawn) withdrew from prisoner contact and the other three (damaged dangerous) became aggressive towards the prisoners in their care. Tait’s (2011: 449) findings acknowledged that the damaged withdrawn officers engaged in negative discussions about their management team due to “resentment at having been personally let down in difficult circumstances”; whereas the damaged dangerous officers shared some of the same opinions as the *conflicted officers* who sometimes viewed prisoners as ‘inherently dangerous’ and therefore untrustworthy, due to the experiences of trauma they had endured during their career.

One of the key findings generated from Tait’s (2011:449) research was the “significant relationship between officers’ experience of trauma without aftercare and their uninterested, hostile,

unsympathetic and threatening behaviour towards prisoners”. Further, Tait (2011) acknowledged that some officers were verging on the edges of categories and at times they demonstrated characteristics of other categories. Therefore the care approaches are interchangeable and are not rigid. Moreover, Tait’s (2011) research indicates that the way in which prison officers behave at work could also be dependent upon whether staff feel supported and empowered at work. A disengaged and/or damaged officer will have a significant negative impact on the prisoner experience and therefore the support prisoners will (or perhaps, will not) receive. As such, this is an area of importance for prison researchers.

Although Tait’s (2011) research opened up a dialect around how prison officers become ‘damaged’, there has been little momentum in scholarship that considers the support offered to prison officers. As this is an area that has received little explanation, an investigation into how we can improve the working lives of prison officers is justified.

From my data collection with prison staff, I found that there were examples of the *true carer* approach to prisoner support (Tait, 2011). For example, **Betty** (Closed Female) would fit within this category, as she exerted caring tendencies and also provided regular ‘support, reassurance and encouragement’ to prisoners (Tait 2011:444). She identified that she went the extra mile often, but that this at times was in vain once she took annual leave and was away from the prison. This is where the potentially *damaged dangerous* officer or *rogue officer* may impact the work of the *true carers*.

Alex: “Can you tell me about some of the challenges you have faced working here?”

*I see women going to seg when I wasn’t there, I will have a week off... one woman I work with right she was a bit volatile... Sometimes you look and its negative all the way through but sometimes what ends up on there is the result of us not being able to find the time to help that human being in there. When I came back from my holiday she was in the seg, and it’s a killer. **Betty***

Alex: “What did you do in that situation then? Is there anything you can do?”

You mean report them? Well what's the point, I have done in previous prisons but I just got ostracised from the group (interview paused due to participant becoming upset).

Alex: "I am sorry that this happened to you, can you tell me what happened?"

Well I used to come into work for the girls, and go home. It was a very lonely time. I tried to talk to management about it, but I got the impression that it was a put up shut up issue. I wouldn't complain about my colleagues now unless it was something serious and I would lose sleep over it. Things seem to be better here though.

Betty disclosed some of the challenges she had experienced when she reported *rogue officers*. This as well as **Maisey's** and **Nicola's** experiences (Section 5.4) add some context to help us understand how challenging it is to report *rogue officers*. For staff, the threat is that they will be bullied and for prisoners, that they will be locked in their cell as punishment. Therefore this raises concerns around increasing the ability and reporting culture with regards to *rogue officers*.

Sara (Closed Female) however, emphasised the additional work pressures that can arise when a *rogue officer* is placed on shift with them;

Alex: "Can you tell me about some of the challenges you have experienced in your time as a prison officer?"

These rogue staff, everyone highlights them... you will get staff that come in and think they will just turn up and that's enough to earn their wages and they don't care for the women, they don't care for the other staff and they will do as little as possible and the sad thing is that they get well known really quickly then rise up the ranks it's almost like that's acceptable because they've always done it. It compromises security and you're working harder to get things back on par, and it's like if I did this after a good track record... I don't know why it's like if you come in with low standard that's ok and it never gets better. It's only the odd

person here and there and you know if you work with them on shift you know your work load has gone through the roof and I don't like that, it's not nice.

Similarly, **Ben** (Open Female) also stated

These rogue staff, I hate that! Coming into a mess made by another officer because they can't say the decent thing when they need to, they might say one awful comment then they are rolling on the floor with this woman it's hard.

Betty disclosed concerns with the impact of *rogue officers* in relation to inflicting unnecessary force and punishments onto prisoners. Over half of the participants (N=14) discussed the impact of *rogue officers*. They cited challenges and an increase in their workload that they associated with certain individuals due to their “laziness” and how “they won't talk to the prisoners”. Although only three staff participants acknowledged that their colleagues had been “nasty” to them, Tait's (2011) findings indicated that some of the *true carers* she interviewed, had experienced workplace bullying from their colleagues. However, **Betty** (Closed Female) demonstrated resilience within this area as she stated

I don't give a shit what people say about me. I was told when I started that I had to harden up, and guess what, here I am 12 years later and I refuse to change. Women have said to me please don't change like the rest of them. I can't, it isn't in me not to care, this is me and I think if I ever stop caring, that's when I need to leave and get a new job.

Betty talked about some of the challenges of being a true carer, such as not being taken seriously by other staff. Although she felt she was not considered a role model officer in the eyes of her colleagues, it was clear that the women (prisoners) she worked with would have classed her as such. In a research study in Denmark outlining characteristics of role model prison officers staff were asked to nominate a fellow officer who they felt worked hard, handled challenging situations effectively and set a good example (Kriminalforsorgens Uddannelsescenter, 1994). The nominated officers were then interviewed by the research team to explore their working practices, their

qualities and reflections of their work. From there they produced a table of skills that a role model officer should possess (See Liebling et al., 2011a:49-50). However very little research exists that specifically focuses on the experiences of *role model* officers working with *rogue officers* (see Sim, 2009). This is perhaps an important oversight.

Betty felt strongly about her management dealing with the *rogue officers* she had met, she stated

If I was the boss here and I was in charge I'd sack them, that's me. I could look at a list of all of the staff now and they said who would you keep and who would you get rid of I'd be like sack, sack, sack, sack, sack, keep, sack, sack, sack, sack.

Although *rogue officers* were prevalent in the discussions with prison staff, the majority of staff (N=21) stated that they were “*definitely in the minority*” **Gerald** (Closed Male). In addition **Ben** (Open Female) stated that “*95% of the prison staff here are ace*”. However for **Phil** (Open Female), he stated that “*there is always one lurking... undoing the good that the rest of us do, it is frustrating like*”. Therefore it is important to acknowledge the presence of *rogue officers* as a potential threat to the effectiveness of a holistic prison and specifically to the successful implementation of trauma-informed prison culture shift.

However idealistic it would be to have lots of true carers and no *rogue officers* within the prison system, in order for the prison estate to operate effectively varying characteristics, qualities and personalities are required. As **Gordon** (Closed Male) stated

It takes all different kinds of prison staff to make the system and I don't think everyone is suited for every individual task that we do so some people might be better in certain situations.

Therefore if all prison staff were like **Betty** (Closed Male), as she acknowledged

If everyone was like me they would just stand around talking all day.

The majority of participants (N=22) confirmed that the time they have available to talk to prisoners has been decreasing over the years. This could be connected to the mounting pressures, lack of

resourcing and reduced staff numbers (Liebling et al., 2011a). This poses challenges for the development of staff-prisoner relationships which are pivotal when trying to support the individual and varying complex needs of the prison population. According to Sparks et al. (1996) the staff-prisoner relationship is central to the smooth running of prisons. The personal officer scheme has been an attempt to facilitate behaviour change in prisoners through close staff involvement. For **Claire** (Closed Female), the personal officer scheme enables her to maintain “*a close bond*” and “*build up trust so I can see why they are the way they are*”. However, **Tom** (Open Male) indicated that

It is a long and complex journey when you're trying to get a relationship with a prisoner, they have complex deep rooted issues and to get them to trust you is tough, but it doesn't mean we can't help fix them, it might take years and I'm no specialist, but we need an environment where we can get the best out of each other.

My own findings indicate the importance of the staff-prisoners relationship. Staff identified, challenges in both prisoner care, as well as frustrations indicative of higher workloads associated with *rogue officers*. Therefore the impact of *rogue officers* is an important consideration in the overall improvement of the prison service to both staff and prisoner.

6.3 Identifying Trauma and Vulnerability in Prisoner Behaviour

Effective prison staff rely on their abilities to build up rapport and professional relationships with prisoners. As **Claire** (Closed Female) states

Knowledge is power and the more we know about them, the better we can understand their behaviour.

The overwhelming majority (N=23) of my participants talked about the importance of their relationships with prisoners. Good relationships function to “*keep the peace*”, but also they can be used to identify potential ways to support the needs of their prisoner population. The participants talked about utilising their skillset and jail craft to build up an “*information guide...because the*

more we know about them the better, because that's how we tell if it's trauma or just being nasty"

Holly (Open Female).

Dominant ways of recognising those in need of additional support in prison are often overshadowed by the presenting behaviours of that individual. An individual's vulnerability will likely be measured by their behaviour and presenting need which is often connected to our stereotypical assumptions based upon the notion of the 'ideal victim'. Therefore many of the prisoners who present with very challenging behaviour may not be readily associated as 'vulnerable'. The way in which vulnerability is conceptualised and recognised within the prison service is determined largely by preconceived notions of vulnerability and is very dependent upon how well the prison officer knows the prisoner. Despite having the prison database (CNOMIS) and court information at hand with details about prisoner histories, the way in which trauma presents within behaviour is entirely individual. This is why Covington (2015a; 2015b) argues that all prison officers should receive training to increase their knowledge around the various ways trauma manifests within prisoner behaviour. This she argues will better equip staff to support that prisoner's need and to avoid the re-traumatisation of trauma survivors.

In an attempt to avoid this, a large proportion of the participants (N=18) stated that they utilise evidence and trauma histories identified in court reports and information on CNOMIS to attempt to understand prisoner behaviour and potential triggers in further detail. However, **Sandeep** (Open Female) questioned the information available to the staff as she stated

I don't think we need the reception side to be asking them questions, they could be straight from courts, custody etc. and everything is 100 miles an hour and reality doesn't sometimes hit home until they're in their cells on their own and their brain slows down a bit then reality might hit home and their mood may be low.

The reception acts as the first assessment of the vulnerability of prisoners following court and sentencing. However, this may not always pick up on individual need due to the dependence on the openness of the individual. Alternatively, **Sara** (Closed Female) stated that

They'll (the women) get off the bus from court and straight away they will reel off all of these things that are wrong with them it's like body armour isn't it? We go on a night out and put our make up on it's like this is me and this is what I've got so deal with that.

This highlights the difference in individual responses to sharing information on reception; whilst some prisoners may be very open about their past, others may not. In line with the trauma literature, the individualistic nature of trauma can present itself in a variety of ways within prisoner behaviour (Covington, 2015b). The staff may not always have individual trauma histories on file to read prior to dealing with an individual as these issues may never have been disclosed by a prisoner in reception. An additional issue related to relying on checking CNOMIS for further information was explored in an interview with **Phil** (Open Female), as he emphasised the difficulty checking computers for files

You don't have the opportunity because it's there and it's happening and we need to deal with it, depending on what it is depends on how much time you can give that person to calm down.

This is crucial because when trauma behaviour is presenting in an immediate and volatile way, it will be impossible for an officer to check a file prior to responding and attempting to deescalate the situation. The practicality of having information on file can be called into question as this scenario would require a staff member to utilise their 'jail craft' skills, in order to de-escalate the situation and provide appropriate support to that prisoner, at any given moment.

However, one of the first indications of an individual's level of vulnerability or need is upon entry to the establishment's reception area. As **Sara** (Closed Prison) emphasised; *"they come in shell shocked, they are stunned rigid absolutely catatonic"*. This quote acknowledges the impact that prison may have on individual regardless of histories of previous trauma. The fear of coming to an unfamiliar environment is a trauma in itself as described by **Madeleine** in Chapter Five. Therefore

this supports the need for a trauma-informed prison service to support prisoners during their transition into the establishment and throughout their sentence.

To support this, **Phil** (Open Female) reflected on a previous role in a larger male prison, where he stated that

Staff are booking in 80-90 people on a night time and with all the will in the world we can't chat it's just people coming past you, you process the guy, then the next one etc. then throw them on a wing, I would imagine if you weren't bloody traumatised to start off with you would be by the end of it anyway.

Over half (N=14) of the staff acknowledged the potential traumatic experience associated with a prison sentence. The deprivation of liberty follows a series of losses that have occurred often simultaneously, and all in one day for many prisoners. The loss of a job, home and children would be challenging to deal with, but the addition of losing liberty and the ability to control these circumstances only adds to the helplessness and vulnerability of incarcerated individuals.

To recognise the vulnerability of prisoners, the staff often utilised their experience and 'jail craft' to determine what behaviour they would associate with prisoners vulnerabilities. These included:

Alex: Can you tell me a little bit about any prisoner behaviours you recognise to stem from experiences of previous trauma/vulnerability?

Displaying outwardly, confident and arrogant, but when you break that down, they've had a bad childhood, they've had trauma and that's how they deal with it... with the aggression it is hard to determine but you need to dig deeper, a lot of it dependent on face value, like that's how criminals are but it's from their childhoods and when you look closer, you start to notice and can help them through it. **Holly** (Open Female)

Vulnerability? Ooo well lots really, self-harm is a biggie isn't it, drug use, attitudes, mistrust, shouting, swearing, substance misuse, crying, aggression,

smashing cells up, it presents in a million different ways really. **Claire** (Closed Female)

Vulnerable or not, If someone's swinging at you, you won't want to help them the next minute will you. **Terry** (Closed Male)

Sometimes they can be quiet, sometimes subdued, sometimes angry, and sometimes sad. **Jonathon** (Closed Male)

Aggressive behaviour is their vulnerability; it's a normal sign for us. **Kevin** (Closed Male)

Three quarters of participants (N=18) were able to discuss the varying behaviours that have been associated with previous trauma, as discussed in Chapter Three. According to Cuomo et al., (2008) prisoners who have experienced histories of trauma have higher impulsivity, aggression and poorer resilience. Both staff from male and female prisons cited knowledge of what Covington (2015b) discusses as 'presenting behaviours' that mask much more deep rooted emotions. Victimological inquiries have been slow to consider anger and aggression as legitimate and important indicators of previous trauma; as such this is an area worthy of academic development.

6.3.1 Prisoner Behaviours: Trauma related or Manipulative?

Various researchers outside of the prison context have identified the use of substances and self-harm as potential coping strategies to deal with previous experiences of trauma (Borrill et al 2005; Cuomo et al., 2008; Hochstetler et al 2004; Low et al 2000). Additionally, acute mental health needs and emotional disorders such as anxiety and depression have also been associated with experiences of previous trauma (Wolff and Shi, 2012). The issues above are endemic within the prison service, and the difficulty in supporting these issues is evident in the increase in self-inflicted deaths in custody, rising self-harm incidents and the escalating use of NPS (Ministry of Justice, 2016c). Only recently, in September 2016, has the prison service formally acknowledged the prevalence and pervasive effects of previous trauma across the female prison estate. However,

due to the often disruptive and volatile behaviour that manifests from previous trauma, it is challenging for staff to identify these individuals as potentially vulnerable.

As Covington et al., (2008) highlighted, often trauma-related behaviour can be further heightened by the standard management practices within the prison service, for example segregation and restraint. The steady use of punishments such as removal of privileges, locking prisoners in cells for the day (as punishment), restricting movement, ignoring prisoners and assaulting prisoners have all been identified (see Section 5.4) as staff management tactics to exert control over prisoners deemed to be poorly behaved. Earlier (see Chapter Two and Chapter Three), I wanted to highlight the complex task of differentiating between trauma-related behaviour and disruptive/poor behaviour. I asked every member of my prison staff sample if they were able to distinguish between the two. Out of the 24 participants, a minority (N=8) acknowledged that they were unable to differentiate between trauma-related behaviour and otherwise general bad behaviour. Alternatively, the majority (N=16) of staff stated that by knowing the prisoners well enough, they could identify whether their behaviour was out of character. However, violence and damage to the prison fabric (i.e. cells) were seen by this group as an indicator of poor prisoner behaviour. Yet the prison environment is filled with almost inevitable triggers that are likely to increase trauma-related behaviours, such as discipline and punishment from authority figures, loud noises and lack of privacy (Miller and Najavits, 2012). Nonetheless, Blanche (2003) argues that all staff can play a significant role in reducing trauma triggers, decreasing serious incidents and de-escalating situations. Key to the reduction is the relationship between staff-prisoner, the relational approach and the staffs' understanding of trauma and challenging behaviour.

James (Closed Male) identified that

Generally it's the volatile prisoners that are trouble and who end up in segregation, especially those who break prison property.¹⁶

¹⁶ Prior to the interviews with a senior member of prison staff, I was shown the most recent incidents of cell damage and the subsequent repairs that were required. Following on from this he stated "we need something like trauma informed practice, just to get everyone on the same boat with the violence we see here".

Miller and Najavits (2012) stated that this form of aggression and property damage is precisely the behaviour that staff should be connecting to experiences of previous trauma. Similarly, Sharchiapone et al., (2009) argued that childhood trauma may be one determinant of prisoner aggression. In terms of housing a prisoner who may be experiencing previous trauma, Covington (2008) suggests that seclusion of individuals may only trigger trauma symptoms, making the experience of incarceration further traumatising.

Jonathon (Closed male), stated that in his experience, previous trauma can present in

1,000 different ways, some can be the most violent you will have ever come across but once you actually break that down and when you get to the point where you can have a conversation with them you then start to understand why and also why they deal with their trauma in that way... In their cells mole hills become mountains, so it is important we support them in the first instance.

The inconsistencies in the understanding of trauma related behaviour are evident in the above comments. Whilst some uniformed staff members explored the complexity of trauma-related behaviour and the many manifestation of this, it is clear some officers may be dealing with potentially trauma-related behaviour as a discipline matter, as identified by Covington (2015b).

6.3.1.1 Substance Misuse, Self-Harm and Mental Health

When discussing substance misuse, the majority (N=22) of staff identified that prisoners may use substances as a potential coping strategy for previous trauma both prior to and within prison. For example, **Betty** (Closed female) stated

In my mind, I'd rather grab someone while they have a relatively small issue before they are on an ACCT (Assessment, Care in Custody, and Teamwork), or looking to find drugs to deal with their issues, when really all they need is for someone to actually sit and listen to them, talk to them and acknowledge their existence.

Whilst the majority of staff associated substance misuse as a coping strategy for prisoners, a small minority of staff (N=3) lacked understanding within this area. However, with the growing issues of NPS use in prisons, it is both surprising and concerning that there are staff lacking knowledge within this area. As discussed in Chapter Three, drugs and alcohol are often taken in an attempt to alleviate pain and as such, they can also be utilised to counteract some of the pains of imprisonment such as boredom and lack of control. Despite this, **Gordon** (Open female) expressed

I don't understand why you would take substances that slows your heart down and speeds it up and you can't even remember it, so you almost kill yourself.

Similarly, **Terry** (Open male) stated

Why would you take something that you didn't know anything about? Some of them in here will take anything, and I mean anything. They have no idea what it is, what it does. I don't get that.

This identifies a lack of understanding about addiction. This is particularly problematic given the rise in substance abuse within prisons, and considering the amount of individuals entering the prison service in active addiction. The question **Terry** raises “why would you take something you didn't know anything about”, is entirely the appropriate question the prison service should be asking. Specifically, what is it about the prison environment that lends itself to an increased use of coping strategies such as substance misuse and self-harm. These fundamental questions are worth exploring both within a penal policy context and within prison officer training.

Self-harm and self-inflicted deaths have risen across the prison populations (Howard League of Penal Reform, 2016; Ministry of Justice, 2016c). Moreover, over half of deaths in custody happened within one month of the previous self-harming behaviour (Hawton et al., 2014). This signifies the importance of swift intervention and effective support for self-harm. Initiatives such as safer custody and the ACCT process have enhanced the prison self-harm management strategy to ensure that suicide is every staff members concern rather than that of the health care team alone. According to Forrester and Slade (2014) prison officers can provide more practical support to

prisoners as well as playing an integral role in recognising the signs of distress and undetected mental health issues. The most common trauma related behaviour discussed by prison staff was the adoption of self-harm whether as a coping strategy or as “*attention seeking behaviour*” (**Gerald**, Closed Male) or “*goal seeking behaviour*” (**Ben**, Open Female).

Whilst many of the staff grasped the nature of self-harm as identified in an earlier HMCIP (2016) report, there is still a gap within some uniformed staffs' understanding of how best to support incidents of self-harm. This is particularly concerning, as self-harm in prisons is such a growing and complex issue, however there remain elements of scepticism surrounding prisoner motivation to self-harm.

Don's (Closed Female) interpretation of self-harm is that there are two distinct types of self-harm

There's self-harm and there is attempted suicide and that's a different ball game. So the self-harm thing is what I struggle with a little bit, I've seen many, many variations of self-harm from cutting, burning, rubbing, scratching all kinds and I still don't get it. To this day, I still don't get it...I still don't get the self-harm or where it comes from whether it's self-loathing or what? I remember one young girl, she used to mutilate her face she'd peel the little scars and the skin would deform and she'd do little cuts all over pick, pick, picking away and over time her face deformed, she was only young and I could get it. It wasn't a frenzied attack on herself, she was trying to make herself ugly for men and the psychologist told me about it and I thought I understand a little bit. Although I still don't get it, I could see where she was coming from.

Additionally, he explored what he determined to be ‘attention seeking’ behaviour, whereby he stated

There is also the self-harm for attention, where I've gone in and used my ligature knife to cut the ligature off and it's not a serious attempt because you can put your hand between her neck and the ligature and she's pretending to choke and I'm

going why are you doing that? It's loose you're not choking and she's still pretending to choke while I'm talking to her. There's certain individuals that when they come back I know what sort of shift I'm going to have.

Specifically for **Don**, his views signal a need for refresher and extended training. In a female establishment it is even more important to address such deficits in prison officer knowledge around self-harm as female prisoners are more likely to self-harm than men and do so at a higher frequency (Ministry of Justice, 2016c).

Similarly, **James** (Closed male) stated

A lot of the time they self-harm because they have learned manipulative and maladaptive behaviour in order for them to get what they want and it's worked, so they've carried on with that behaviour ... or it's just something they do when they don't get what they want.

Two terms have been used by health professionals to describe self-harm, including deliberate self-harm (DSH) and suicide attempts/para suicide; however these terms have since been replaced by the term self-injurious behaviour (SIB) (Royal College of Psychiatrists, 2016). This decision was made in recognition of self-injury being different to wanting to end life. There have been studies conducted to explain the differences between less serious forms of SIB and the incidents of more serious SIB (Dear et al., 2000; Goss et al., 2002; Lohner and Konrad, 2006; Walker and Towl, 2016). Lohner and Konrad (2006:383) identified that although prisoners may carry out impulsive acts of SIB without experiencing any pain/traumas, they insist that all SIB “presents a serious act from the medical-psychiatric and psychological viewpoint”.

As disclosed in Chapter Five, **Zara** regularly carried out SIB in order to flag her needs to prison staff. Her needs were often simple and basic. She wanted conversation and many of her needs could have been met through a prison officer having a chat with her. This is to illustrate a more fundamental problem of prison life, where prisoners with basic needs are submerged within the system, left to fester and as such, behaviour may then escalate to SIB. Further this adds to the

frustrations of the officers who discuss self-harming as attention seeking and/or manipulative behaviour. It is therefore important to acknowledge the impact of incarceration on prisoner wellbeing, as Edgar and Rickford (2009:5) noted, “too often we observe prisoners whose extreme, often bizarre behaviour patterns present serious control problems with the prison”. Moreover explanations such as ‘institutionalisation’ (Haney, 2003) have further explored the psychological adaptations that can occur as a response to stressful situations. Specifically within the context of the prison, institutionalisation refers to the “emotional flatness” and “emotional over-control” that can result in the regulation and suppression of prisoner emotions, in long-term sentenced prisoners (Haney, 2003:42). However, within trauma-informed services “survivors in crisis are not viewed as manipulative, attention-seeking or destructive, but as trying to cope in the present moment using any available resource” (Sweeney et al., 2016:179). This can be associated with some of the extreme behaviours adopted by prisoners, in an attempt to gain control within uncontrollable circumstances.

The psychological effects of imprisonment have been covered at length within the sociology of imprisonment (Crewe, 2009; Liebling and Maruna, 2005; Sykes, 1958). My own findings correspond with these assessments, suggesting that the ‘pains’ are still pertinent and enduring across the prison system. With reference to the self-harming behaviour identified by **Ben, Don, Gerald, James** (Prison Staff) and **Zara** (former prisoner) as a way to have needs met, the question that emerges from these findings is why is the prison service not doing more to question why prisoners are prepared to harm themselves in order to be heard? As Walker and Towl (2016) argued, SIB may be used for a variety of functions at any given time; therefore there is a vast range of unmet needs that may be ameliorated through SIB.

Further **Claire** (Closed female) explains

There is a group of girls who aren't quite ill enough to be worked with, but they aren't quite sane enough to just be left; it is frustrating because these are the people constantly getting recalled.

Prisoners have three times higher levels of “mental health morbidity” than the general population (Forrester and Slade, 2014:1109). More than half of the deaths in custody between 2009 and 2014 occurred within a month following a self-harming incident (Hawton et al., 2014:1151). It is surely irresponsible to classify self-harming incidents as manipulative and or attention seeking as emotions, previous trauma and vulnerability are both escalated and exacerbated within prisons.

Despite a small minority of participants (N=4) sharing their frustrations with self-harm, the majority (N=20) recognised the need to address and support individuals through their self-harm regardless of the reasoning behind it. For instance, **Betty** (Closed female) acknowledged that

It's vital we respond, you know if someone is willing to cut themselves, hurt themselves, whether big or small, you have to ask why? Why would you be willing to hurt yourself? Even if it is for attention, it's a cry for help that we can't ignore.

Officers were both forward thinking and innovative in their responses to supporting self-harm. For **Brian** (Open female), he believes that building up a relationship and trust can positively impact an individual's recovery from self-harm.

Self-harm I struggle with, I do struggle with it, and I do. I question it. I just feel why they (the prisoner service) aren't doing more. Some people just say it's attention seeking, but for someone to cut up it's something grim. I had a female in closed, she had been sexually abused by her family, brothers, and uncles all people in the family abused her. She got to such a state that she tried to cut her chest off, scarred her face and neck which was pretty extreme. She didn't like men, it took me 4 or 5 months to earn that trust, we used to talk and sometimes she needed a hug and I would try not to probe her and I made real progress, she was a long sentenced prisoner. They (the prison) decided to ship her out (a term used to refer to an organised transfer to another prison) and within 2 weeks of being shipping out, she killed herself. So sometimes they (the prison service) don't understand the

relationship and how we can make that work...it's a pretty uncaring service to be honest.

Brian's example shows the importance of the staff-prisoners relationship. In other research this relationship has been acknowledged as “the glue which holds prisons together” (Liebling et al., 2011a:85). As **Brian** discussed, the relationship he had formed with this specific prisoner had evidently been effective in reducing her risk of committing suicide. He argued that often the prison estate neglect to consider the positive power of the staff-prisoner relationships. Comparably, (Pilling, 1992) suggested that the relationship built up between a prisoner and staff member can contribute to the safety and order of an environment, built upon mutual respect.

Furthermore, the role of the ACCT assessor (discussed in Chapter Three) can be undertaken by prison officers. This role requires more advanced training and relies upon more meaningful engagement. However, in a recent HMCIP report (2016), the lack of engagement during ACCT assessment periods has been criticised. Half of prisons still located individuals on ACCTs in isolating segregation units, despite having inadequate justification for this. However, the same report also stated that many prisoners subjected to ACCTs felt that they were well cared for (HMCIP, 2016).

Interviews with ACCT assessors (N=8) in the current research indicated that these staff had a much more robust understanding of the manifestations of previous trauma, and the reasons why there is so much self-harm in prison. All of the ACCT assessors interviewed described the importance of the assessment. All of the ACCT assessor participants felt that the conversational and relational approach could be adequate support for prisoners.

As **Betty** (Closed female) highlighted

The assessment can be the breakthrough, just that 15 minutes of you are not invisible and I see you. Sometimes, well most of the time even, just taking that time with them is enough. Sometimes I don't even fill in the paperwork.

Similarly, **Reg** (Closed male) stated

More often than not, I don't even need to open up an ACCT; it is just the conversation and time given to them that can help.

Two of the ACCT assessors interviewed discussed the potential of adopting a 'safe self-harm' response.

Having worked in both an open and closed environment, **Holly** (Open female) argued

I don't think for a minute that putting them on the ACCT will stop them self-harming and I'm a firm believer that they will continue to self-harm they will continue to do it whether they are in prison or not, so I'm all up for letting them do it cleanly and safely, we aren't going to just stop them from self-harming, we take away the implement and they find another, usually much worse.

Similarly, **Gerald** (Closed male) stated

I sometimes wish we could just let them do it safely, things escalate when their frustrations build up, that's all we do, manage prison frustrations, and the self-harm thing helps them express themselves when they aren't ready to do verbally.

Safe approaches to self-harm are encouraged by voluntary organisations such as Mind, who have released research reports advising, "if you feel the need to self-harm, focus on staying within safe limits" (Harrison and Sharman, 2005:3). However, within the prison establishment, safe-self harm approaches raise numerous legal challenges due to potential negligence and the Suicide Act 1961. This Act states that it is a criminal offence to aid, abet or counsel an individual's suicide (Pengelly et al., 2008). For the prison service who prioritise reducing risk, increasing safety and the preservation of life, a safe self-harm approach may be too controversial. Additionally, harm-minimisation efforts have been discussed in relation to self-harm, but unlike addiction, there is no evidence to suggest that it works (Pengelly et al., 2008). For example, the Bristol Crisis Service for Women (1997) suggested that support could equate to educating an individual on safer steps such as washing implements used to self-harm. However, as **Claire** (Closed female) stated

At the end of the day security is one of our priorities and we need to maintain control and it's about safety as well, if you've got someone who is smashing a room the likelihood is they are going to hurt themselves we can't just stand around and let that happen, sometimes they break the TV and self-harm, we just can't let that happen... In terms of trauma restraint will be scary with male officers and big shields it is scary it would scare me, we do give them the opportunity but now you have NPS legal highs they often don't understand what you are saying and you need to remove them from the situation they have put themselves in especially if they are on an ACCT and they are threatening to cut themselves or ligature, pop them in a safer cell. We also have to think about the other girls; they get scared seeing our teams coming on the wing in our gear (the protective uniforms including masks and shields).

The above quote highlights the cautious approach of the prison staff. With the preservation of life and security key goals of the prison service, the procedures have a place. As such, it is possible that safe self-harm approaches may never materialise within the prison service.

It is important to note that the small group of staff (N=4) who associated self-harm with manipulative and attention seeking behaviour were not ACCT assessors. This meant that they have not accessed advanced training in safer custody. The difference in understanding of self-harm from ACCT assessors to non-ACCT assessors was substantial. The ACCT assessors (N=20) demonstrated a much more progressive and compassionate outlook on self-harming in prisons. There could be numerous reasons behind this discrepancy, but one I feel it is important to focus on is the additional training and support provided to the ACCT assessors that the other staff members would not be privy to. Research conducted by Tait (2011) indicated that there was insufficient training on issues such as prisoner mental health. Further, this has been a re-occurring recommendation of the HMCIP (2016:18) in 26 of the prisons inspected, 9 recommendations were made in the area of safer custody care, as the findings were described as “shocking and clearly unacceptable”.

For TIP, this presents further challenges as currently some prison staff lack adequate training or knowledge in the area of self-harm, mental health and addiction, all of which have been associated with prior experiences of trauma (Covington, 2008). Therefore the training needs of the prison staff should replicate the growing need of the prisoner population. Officers ought to be equipped to deal effectively with the multitude of issues that will be presented to them. This includes the manifestation of previous trauma. This is often highly individualistic and sporadically manifested.

6.3.1.2 Manifestations of Trauma: Acknowledging Gender

Interviews were conducted with 12 staff from the male prison estate and 12 staff from the female prison estate. Just over half of the staff (N=13) had experience of working with both male and female prison populations. Naturally in the prison staffs' reflections of their experiences, comparisons between the two populations emerged. The additional vulnerabilities and complexities posed by female prisoners have been noted by both researchers (Covington, 2015b; Worrall and Gelsthorpe, 2009) and government papers (Corston, 2007). Officers were able to discuss their experiences of working with female prisoners in various ways. Some cited issues with being separated from their children

*Aww they miss their children terrible, you know, there is a lot more going on for them here I think. **Sandeep** (Open female)*

Others mentioned challenges of building trust with women as an obstacle in supporting their needs

*They can be very complex, they don't trust you, you can spend months and months building up that trust, you have an off day and bam it's back to square one. **Claire** (Closed female)*

All of the uniformed staff working with women disclosed the rising issues with self-harm and mental health issues. For those officers who have worked with both male and female prisoners, over half of participants (N=7) stated that it was more challenging to support the needs of women than the needs of men.

However, additional complexities were also highlighted by uniformed staff working in the male prison estate. The prison staff stated that self-harm and NPS use were both growing and challenging issues within male prisons. This was corroborated in the HMCIP (2016) report that outlined the high and rising levels of self-harm and self-inflicted deaths, the growing issues with new synthetic drugs (NPS), and the rise in violence in almost every male prison inspected. The notion of masculinity as a barrier to supporting male vulnerability was raised in Chapter Two. However, **Richard** (Closed Male) reflects on the issues of identifying vulnerability within the male and female population and how they differ

I think women gel better together, men don't, they don't try to look for support they try to stand alone...women will tell you what the problem is, whereas a lot of men there isn't that, they are far more guarded, yet they have the same sorts of underlying issues.

Similarly, **Brian** (Open Female) stated

Women have more issues than men, or men hide it more and you miss everything.

All participants who had worked with women stated that their needs and vulnerabilities were often M&C. However, for the participants who had experience of working across both populations, their reflections indicated that many of the vulnerabilities within the male prisoner population were relatively invisible and remained mostly undetected. As a result, this disputes the low levels of recorded data on the vulnerabilities of male prisoners and raises issues in the *recognition* and *response* to the needs of the male prisoner population. For example, **Phil** (Open Female) demonstrated the difference in the staff-prisoner relationship across the two populations.

In the female jails the interaction between the officer and the women is far more relaxed you can have a bit of banter, but in male jails very rarely does it come down to a personal level.... people don't want to be seen talking to staff because generally it looks like they either want something off a member of staff or they're

telling them something, a lot of the males feel like well if you didn't want something, you must be telling them something, then that's dangerous isn't it.

Correspondingly, **Holly** (Open Female) expressed that although

Women are a lot more needy, it's safe for them to ask for help, the men are reluctant to ask officers for help because they will be a grass... my fear is that they (male prisoners) get lost in the system because they present in the negative way so people labelled him he's nuts or he's never going to change and they use it to mask their emotions don't they.

For **Phil** and **Holly**, the relationships between prison officer and prisoner are integral when attempting to identify a prisoner in need of additional support. However, it seems that it may be harder for staff to build up that relationship with male prisoners due to the resistance of appearing to be an informant or vulnerable. This has been discussed in various prison research projects using the phraseology such as 'fronting', 'masking', 'wearing masks' and 'putting on armour'. These terms have been used to discuss the way in which prisoners cope and defend themselves from exploitation (psychologically and physically) within a 'dog-eat-dog' prison environment (Crewe, 2009; Crewe et al., 2013; Crewe et al., 2014a; De Viggiani, 2012; Jewkes, 2002; Jewkes, 2005; Laws and Crewe, 2016). Laws and Crewe (2016:7) argue that "masculinity can function as a 'barrier' to emotionality". Moreover, the authors use the work of Gross (2014) to highlight that individuals may deem their emotions inappropriate and may attempt to regulate them, depending on the specific situation.

According to **Reg** (closed male)

Sometimes the macho bullshit stops some of the good work happening in male prisons... It's a bloke thing, that's why a lot of them are violent and aggressive because that's the only way they can deal with it without looking like a soft nowt (colloquialism meaning to be perceived as weak).

Findings such as this indicate that the male prison may also act as a barrier to men expressing their emotions. As such, this coincides with the findings of Crewe et al., (2013:9) who stated that ‘masking’ is a “defensive behaviour requiring that one stifles or contains traces of fear, pain, weakness and vulnerability”. Further, Laws and Crewe (2016) outlined that ‘fronting’ is used by prisoners to counteract threats in the environment. However, for a prisoner to engage in ‘masking’ or ‘fronting’, would require the prisoners to identify and feel the emotion but avoid showing it. Therefore ‘masking’ and ‘fronting’ can act as a coping method or a responsive strategy. Further, the findings of this current research and that of Crewe (2014) and Laws and Crewe (2016) highlight the challenge in recognising men’s emotions and vulnerabilities. They are easy to neglect.

As **Reg** (Closed Male) asserted

Men can be treated as lost causes, but if you give them a chance sometimes there is success.

It is evident that the complexities posed by the male and female prisoner populations differ immensely. Although those populating the whole prison estate may have histories of previous trauma, the way in which that trauma manifests varies enormously. This reiterates the importance of maintaining a gender-sensitive trauma-informed approach. From a critical victimological perspective, this reiterates how the structure and environment of male prisons further submerges both the male prisoners’ agency to gain support. The environment further impacts the staff’s ability to *recognise* and *respond* to the vulnerabilities of male trauma survivors, due to them either being hidden in silence or exaggerated masculinity. This appears to be an area worthy of further consideration.

6.4 Prison Staff Reflections and Concerns

When participants were asked “what hurdles and challenges have you faced in your career as a prison officer?” all discussed issues relating to reduction in resources that they felt have ultimately impacted their levels of safety at work. From the late 1980’s, strategies for prisons in England and Wales have attempted to transform the prison service into a performance driven and competitive

culture (Mennicken, 2013). The most noticeable shift involved the privatisation of a number of prisons following on from Thatcher's neoliberal reforms, rising expenditure, increased prison populations and the increase of serious incidents (James et al., 1997; Prison Reform Trust 1991). None of the prisons involved in this research were privatised institutions.

As discussed in Chapter Three, the managerialist phase of prison performance management was introduced in 1993 in the form of key KPIs and targets, which arose from pressures to publicly demonstrate prison performance (Power, 1997). This style of measurement is not reserved just for the private prisons. In a speech on prison reform, former Prime Minister David Cameron (2015) stated that prisons would be required to post their data into new prison league tables to support the measurement of long-term outcomes. As Fox and Albertson (2011) suggest, policymakers and practitioners cannot grasp the success of the prison system without meaningful KPI metrics.

Prisons are being forced to fight harder for resources. According to Liebling (2004), the performance measurement tools have changed frequently to reflect the prison's changing priorities. This can result in a lack of clarity, as the Home Office (2000:4) state "no organisation can hope to be confident about its performance when the benchmarks against which it is measured vary so widely or change so often". Consequently, Mennicken (2013) argues that there is a tendency to focus the notion of failure within individual prisons rather than the system itself.

However, the overwhelming majority of staff (N=22) stated that lack of available training (specifically interactive and non-computer based training) was a point of contention for them. As discussed earlier, the role of the prison officer is dynamic and ever evolving, yet the amount refresher and ongoing training uniformed staff receive was described by the majority (N=18) of participants as "*poor*". Given the escalating needs of the prison population, staff training and knowledge growth is an area that requires significant priority. This is particularly problematic for the safety of prisoners and prison staff.

6.4.1 Time Constraints

As identified earlier, the staff-prisoner relationships are integral to the smooth and decent running of prison life. The prisoners and prison officers at HMP Whitmoor (Liebling et al., 2011a) agreed that their relationships are significant for two reasons. First ‘instrumental reasons’ provide efficient operationalisation, gaining intelligence for reports and support. Second, ‘normative reasons’ provide a humane and decent prison experience, making life in prison more pleasant, easier and safer. However, the findings of this study conclude that in order to establish effective staff-prisoner relationships, time is a prerequisite. Out of 24 staff members interviewed, the overwhelming majority (N=22) discussed not having enough time to spend with prisoners. This impacted substantially on the development and maintenance of positive staff-prisoner relationships, being able to identify behavioural changes and staff being overwhelmed and feeling guilty about not supporting prisoners effectively.

Jonathon (Closed Male) outlined that as officers

Have to have the time to build relationships, just even to get them (prisoners) to talk to you and then eventually get them to trust you. All of this takes substantial time. It's not so much anymore because we aren't building those relationships it's a people job and officers are getting frustrated...The role of the officer has certainly been deskilled because we don't have the power of knowledge anymore because we don't have the time with the lads.

These sentiments are reminiscent of those within Crawley's (2004a) research, as she found that the de-skilling of staff was directly impacting prison officer's job contentment. This can result in lack of enthusiasm and motivation in the role itself. Similarly, Liebling et al. (2011a) identified that high staff moral and empowerment are crucial ingredients for positive staff-prisoner relationships. Therefore the lack of time available to staff will impact the flexibility to engage in meaningful conversations to develop good relationships.

In addition to this **Betty** (Closed Female) expressed how she felt she is becoming

Short with the women, because well if you give them 5 mins, they tell their mates, then they flock around you and I just don't have the time, it's awful, and I feel awful.

This typical response emphasises the increased pressures on staff members are resulting in feelings of guilt and inadequacy in the way that they can support the needs of prisoners. As noted earlier, a few uniformed staff members discussed the impact that a short conversation can have on a prisoner's behaviour.

Despite the rolling out of five minute interventions (FMI), a small minority of participants (N=4) claimed that the needs of the prisoner population are so complex, that a short intervention is not enough for their population. **Claire** (Closed Female) explained that

They are rolling out a five minute intervention so it's basically saying even 5 mins talking to someone will help them, I'm sure it does and I know it does especially if they have something simple, but you're dealing with quite a complex section of society especially female offenders their needs are very detailed and they go back a long way and 5 mins isn't enough...They want a lot of the staffs' energy and we don't have the staff numbers that we used to have, you can't sit with one woman out of 134 on your unit and spent 30 mins talking to them you just can't do it anymore.

In an attempt to overcome the lack of time prison officers have to engage with prisoners, the prison service began to introduce the FMI. This was initially trialled in HMP/YOI Portland by NOMS in 2015 and rolled out across the prison estate. The FMI was designed to increase everyday conversations as an opportunity to address criminogenic need and create a rehabilitative culture. Ten staff were then trained in techniques such as active listening, giving hope, Socratic questioning¹⁷, as well as giving and receiving feedback. In the first set of interviews conducted by

¹⁷ Socratic questioning involves a question being structured in a way to encourage individuals to seek more evidence for their views and to think deeper into the assumptions that they make and consequences of their intentions (NOMS 2015c:2).

NOMS (2015c) they identified a typology of officers that explored their rehabilitative orientation, which I have briefly summarised below;

1. **Rehabilitative Officer:** This group of officers believe that the rehabilitation of prisoners is an important use of prison officer time. These officers engaged in positive and rehabilitative conversations with prisoners effectively.
2. **Pre-rehabilitative Officer:** Like the rehabilitative officer, the pre-rehabilitative officer also recognised the importance of rehabilitative work within their role. These officers could have been assigned to the above typology had they demonstrated the skills to encourage rehabilitation with prisoners.
3. **Frustrated Officer:** These officers expressed the value of rehabilitative conversations but were fixated on the barriers to rehabilitation and cited issues such as having a lack of time to facilitate prisoner rehabilitative conversations.
4. **Disengaged Officer:** This group of officers were not engaged in rehabilitative activities with prisoners and cited little or no faith in the rehabilitative potential of prisoners.

The issues discussed in the initial interviews (conducted by NOMS) consisted of prison staff having low morale, concerns of the revolving door and lack of through the gate care, fear of insufficient time to talk with prisoners, and the complexity of mental health issues within their prisoner population. As indicated by NOMS (2015c) and my research findings, prison staff discussed the impact of time as a barrier to effective staff-prisoner relationships. However, the early positive outcomes that emerged from interviews conducted by NOMS (2015c) demonstrated that prison officers had improved rapport with prisoners, had increased job satisfaction and had improved prisoner self-efficacy. Moreover, the possibility of a long-term saving associated with increasing prisoners' thinking skills and self-efficacy was acknowledged. One of the key areas identified in the NOMS research was low staff morale. This was also evident in the narratives of prison staff within this current research and had substantially impacted their outlook and engagement with prisoners. The results from NOMS provide a timely exploration into the role of the prison officers that coincides with my inquiry.

The impact of time restraints, lack of resources and a reduction in prison officers, has resulted in prison staff feeling restricted and unable to effectively support the complexities of the male or female prison population. Most participants (N=17) stated that they have become abrupt and brief with prisoners in their conversations to avoid falling behind on their workloads. This will likely have an impact on the quality of support offered to prisoners, as well as leading to increased frustrations and tensions of prison staff.

6.4.2 Budgets and Benchmarking

All staff members interviewed discussed the reduction in staffing levels as a result of budget cuts and benchmarking. The rationale behind benchmarking within the prisons is a “means of reducing expenditure on the operation of the prison estate quickly” (Parliament, 2015:No Page). A key consequence of benchmarking has resulted in the prison service having to operate with fewer staff (Parliament, 2015). **Don** (Closed Female) stated that benchmarking has directly impacted the amount of time they can allocate to prisoners, but also staff morale within the service. Additionally, **Jonathon** (Closed male) stated

Every year we are supposed to do more for less and we hit crisis point years ago so now it's very much a case of crisis management.

The findings of the ‘Prison Safety and Reform’ (Ministry of Justice, 2016c), White Paper indicate the overwhelming impact of a lack of safety across the UK prison estate. Within this, (the LCSOFJ at the time) Truss outlined the new recruitment of 2,500 prison officers to enhance the existing workforce, within the longer term ambition to see the role of the prison officer as a “prestigious and recognised profession” (Ministry of Justice, 2016c:55). Further the paper covered the importance of building new staff capability through a better induction process and additional support. This support is expected to also impact all officers to improve retention through the development of more opportunities, accredited competencies and intensive development programmes. However, Truss provided examples of the schemes that will be involved in the new recruitment of officers;

this included former armed forces personnel, apprenticeship opportunities and a new graduate recruitment scheme.

One of the main concerns identified by a small group of participants (N=8) was the loss of experienced officers and the replacement of new recruits known as Prison Officer Entry Level Training (POELTS).

Phil (Open Female) articulated

They've got rid of tonnes and tonnes of experienced staff but they've replaced them with people that have minimal experience, no knowledge of jail craft because it is a trade, anyone can unlock door but there is a way to do it and ways to deal with people, to identify if something is going to happen before it happens and you can't teach that in ten weeks... you have taken out some guy who was earning 29k and you've replaced him with someone earning 18k and you get what you pay for and that is fact. As that quality reduces you're going to find the potential to absorb all of this information will be reduced.

Similarly, **Holly** (Open Female) stated

We have lots of POELTS coming into the service and that does worry me. We have had 2 this year and they get hired, they come through recruitment they learn, then they come back as a prison officer ... I went on some training in January and I sat there in the rest room and there were 30 POELTS listening to them frightened me half to death, their attitudes, and what they thought prison was going to be like, I just thought no way do I want any of the women in their care.

As staff raised concerns about the recruitment process for new officers, it is important to acknowledge the significance of attracting the 'right' candidate. Coyle (2005:93) argued that the prison service has no "clear notion of the kind of people that it wishes to recruit as first-line prison staff", as such, the individuals who come to work for the prison service may not "necessarily come

to their new role of a prisoner officer with a sense of vocation or of being involved in an important public service”.

As the managerialist era of prisons remains dominant, prison staff likened the service to

A business, it's driven targets its driven by performance indicators and sometimes along the way people kind of get lost whether that be staff or whether that be prisoners. Amy (Open Female)

The loss of ‘role model’ officers will impact upon the level of service provided to prisoners. Sim (2008:147) has argued that if the effective officers “continue to leave the service, or fail to be promoted, or are psychologically lacerated on a daily basis, then the punitive and demeaning discourses which dominate the prison will continue to be produced”. In his view, it is important that the needs of prison staff are taken into consideration in a collaborative way when attempting to support penal reform.

Jed (Closed Female) shared concerns of the lack of resources relating specifically to the services provided by the institution.

The whole of the prison service has gone through a number of changes over the last few years it's in a constant state of flux and bench marking is the newest thing to come in and it's to identify and breakdown prisons into certain types and it dictates the staffing that you get and its stripped out the quality work we do, safer custody for example is key in a women's prisons, we have just had the whole resource taken out, I've been charged with trying to organise it again, but you know the phrase 'more for less' is correct...A governor of a previous establishment said that previously when we said you have to do everything to a 5 star gold standard and perhaps it's going to have to be a 3 star, but I think there are certain things that we do that we can't afford to do that. Prison suicides are increasing you can't lessen that service, I think it's a dangerous situation we are getting our selves involved with.

In Chapter Three (Section 3.3.2), I acknowledged that the HMCIP had made repeated recommendations for staff to prioritise the safer custody training. Yet Jed disclosed that within his prison, they have just lost that resource, yet they are still expected to produce the results. This will undoubtedly impact the support provided to prisoners as well as adding to the staff levels of frustration. The impact of benchmarking and budget cuts has negatively impacted the prison staff's feeling of safety within the prison service. More recently, there has been a rise in self-harm and self-inflicted deaths across the prisoner populations (Prison Reform Trust, 2017a), and now on average one prisoner takes their own life every three days (Crook, 2017). As a result, prisoners are immensely unsafe and staff are also experiencing a lack of safety and high levels of "unacceptable stress and anxiety" (Prison Governors Association, 2017). The findings of this research also connect with the work of Crewe (2009) who acknowledged that staff were sceptical of the target culture, and how this was linked to feelings of mistrust about prison manager's motives and expertise. Specifically the participants of this study, felt that their managers were detached from the frontline and had very little idea about what both the uniformed staff and prisoners needed, thus resulting in arbitrary decision making, as evidenced in the removal of safer custody resourcing described by **Jed** (Closed Female).

My findings indicated that the staff are concerned with the impact of managerialism, lack of resources and low staff morale. The lack of staff presence negatively impacts the staff-prisoner relationships, and thus the efficient running of the prison.

Other staff members talked about their feelings of unease as the numbers of staff reduced. As **Jonathon** (Closed Male) stated

But you're scared because it wasn't the job that you first joined ten years ago, you weren't dealing with the staffing issues, you weren't dealing with NPS, you weren't scared when you first started and it's that notion that prison officers are scared of change or that you can't adapt but it's hard to adapt without the resources.

Demanding that staff 'do more for less' within benchmarking appears to be conflicting with the prioritisation of safety and security within the prison. As such, benchmarking and budget cuts place unfair strain on the prison officers and they are obligated to adapt their role without the resources required to do so safely.

6.4.3 Prison Staff Support

According to Coyle (2002), if too much attention of the prison management is provided to prisoners, staff feel like their needs are being disregarded and this can result in discontent. The needs of prisoners and prison staff are varying, complex and yet at the same time, they are interconnected. As such, they both deserve significant and robust academic attention. My findings indicate that the prison officer workplace morale is incredibly low and this will undoubtedly impact the prison experience for prisoners. Further, more attention should be paid to the experiences of prison staff, as their role and the relationships they form with prisoners play an integral role in the prison environment. In her research, Crawley (2004a) interviewed staff who discussed a variety of grievances they felt powerless to change with their employer. This occurred within my research. Prison staff participants were asked to reflect on the challenges and hurdles they had experienced in their roles. **Don** (Closed Female) focused on the safety of his role, whereby he confided

I'm skipping appointments because I'm diabetic as well I'm worried that they will finish me up basically, it's called a capability hearing and if I'm not capable of carrying out my job as a prison officer then I will go to a capability hearing, then done you're done, gone. I'm here now and I'm in so much pain, I've got a colleague who has had an operation on her knee so they've put her as an admin officer until her knee is better and if she fails her fitness test she's sacked...All of those years I've given service counts for nothing and now I just actually hate the job, not hate working with prisoners, but I hate the job because of the management ethos of getting rid of you...Every day I come in and there is a little tiny piece of me coming away from me every day, I've never seen staff morale so low.

Here **Don** details his level of frustration and lack of trust he has within his senior management team. In an emotive interview, **Don** shared his anxieties of losing a career he has worked diligently for. In interviews with prison staff, they rarely associated challenges in their work with prisoners. Rather, they stated that the biggest challenges and or hurdles they face are related to the lack of support they receive from their senior management teams. Liebling et al., (2011a) outline the commitments that officers give to their career, including long shifts and anti-social hours. However the research conducted by Tait (2011) acknowledged that even the most caring officers can withdraw emotionally from the service, when they feel they have been let down by their management team and this can result in prisoners needs being neglected.

Similarly, **Claire** (Closed Female) stated that in

This day and age now it's all about capability, especially if it was mental health, I'd never tell anyone, not a chance; I'd be straight on a capability hearing.

A key concern that derived from a small number (N=7) of the interviews related to staff's reluctance to discuss their need for support with their management teams.

The prison service offers prison staff the opportunity to seek psychological support services, however this requires a referral and they are sceptical due to capability concerns that could arise. Findings from Liebling et al., (2011a:66) identified the reluctance of staff to access support from the national "Staff Care and Welfare Service" (SCWS). This service provides support relating to staff transfers, physical health, stress, debt, disciplinary matters and career matters (such as medical retirement). In addition, this service offers critical incident debriefs as well as referrals to counselling and psychological support services. However, staff disclosed

The care team are just officers, your colleagues, I guess if you are comfortable with that it's fine. **Julie** (Open Male)

Betty (Closed Female) stated that in her previous role the care team comprised of

Those lazy people I was talking about earlier and you're like how are you on the care team? Sometimes people like to see their name on the boards just to look important like they support people and you go up to them and say are you on the care team? And they said yeah but don't ask me anything.

Liebling et al., (2011a) stated that the officers they interviewed held a reluctance to access the SCWS as it is an “in-house” service and staff may have seen repercussions for staff using the service or it is not deemed culturally appropriate to seek support as a prison officer. Although the findings of my research support the work of Liebling et al., (2011a), the reflections of **Betty** provide some additional negative aspects of the prison officers within the SCWS. **Betty** stated that it is often the “*rogue officers I talked about earlier, the lazy ones, who just do it to look good for management, I'd never talk to them about my issues, not a chance, so they're pointless sometimes*”. Other staff members spoke highly of the care team, despite admitting that they have never used the service themselves.

Reflecting on the nature of the role of the officer, and the complexities of the prison population, it seems that the lack of neutral and ‘safe’ staff support is an issue that requires further attention. At times, the impact of working with individuals with M&C needs is disregarded. As **Claire** (Closed Female) articulated

Second hand trauma can have a big impact on how staff can feel on a daily basis. With self-harm I think we take it for granted because it's something we see every day when in fact if you take a look at other job roles in society, it's probably something they wouldn't see in their lifetime.

Crawley (2004a) and Liebling et al., (2011a) have acknowledged the challenges and emotions of conducting the everyday tasks expected of a prison officer. As the complexities of the prison population grow, more and more is expected within the role and expectations of prison staff. The prison setting is an emotional place for all staff, as they spend continuous periods of time with prisoners who may have experienced a variety of personal traumas (Crawley, 2004b). Due to the

environment and cultures of prison, emotions are not frequently or appropriately expressed. Therefore the prison staff are attempting to manage their own emotions, as well as de-escalating the rising frustrations of the prisoners within their care. Tait (2011) argued that prison officers, who have experienced a sequence of traumatic events may have a significant and negative shift in their approach to prisoners and their work, if their management team insufficiently support them.

Don (Closed Female) had endured significant traumatic experiences whilst working within the prison service. For example he stated

I've been involved in 3 deaths when I say involved I mean hands on, battling for 15 mins to try and get them going again and that was quite traumatic and it was a few years ago...It was only recently that I was down the wing and I found someone hanging again and I've recently started getting little bits of flashback, I'm not saying it doesn't affect you because it does... The job itself, I've been stabbed with a syringe with blood in in, through the hep c treatment and my daughter has been assaulted outside by a prisoner because she's my daughter, they found out who she was went up to her and floored her, on her birthday in a night club, walked up to her on the dancefloor and smacked her in the face.

Further, **Don** explained that

The worst thing is finding someone hanging and they've died someone who has overdosed and died, someone who has cut their wrists and died, I've had to tell someone that their partner has died, that their mum has died. They are difficult jobs to do and bear in mind that I've got to go home to my family. I go home and I have to tell her that I don't want to share bath towels, hiya love give me a kiss and I can't even be intimate because I've had all of this stuff happening to me, I don't even want to kiss my kids and that's hard.

Evidently, **Don** had experienced a substantial amount of workplace trauma and this has negatively impacted his home life. When asked about the subsequent support he was offered, **Don** stated

Well...(sigh) they make you think that you're supported but in reality you just get on with it.

Liebling (1992) noted the impact prisoner suicide has on prison officers, including feelings of shock, depression and anxiety. In addition, Crawley (2004b) has outlined the 'spill-over' from prison officer lives into their home life as well as the potential threat of a disgruntled prisoner seeking revenge. All of these incidents have accumulated across **Don's** career, yet during his interview he disclosed that he felt insufficiently supported. This correlates with Tait's (2011:451) findings that indicated, "feedback, supervisory support and meaningful and timely post-trauma care for officers was lacking".

In this case, an approach that considers the impact that staff can experience when supporting trauma survivors is of critical importance within the prison. As such, I argue that TIP is one of the first strategies to consider the much wider, structural and cultural complexities within the prison service, as Covington (2015b) called for a complete culture shift to recognise the impact of previous trauma on both the prisoners and the staff who provide the support. The impact of **Don's** experiences act as an indicator of the workplace trauma experienced by officers.

Due to the M&C needs of the prisoner population, the likelihood of a prison officer experiencing and witnessing trauma has become a normal expectation of the role. As Scott (2008:168) noted

"In any day, an officer may find themselves cutting down a person who has successfully hung themselves; providing resuscitation for a suicide attempter; dealing with a person who has smeared their own excrement over themselves or the cell walls and is refusing to wash, eat or drink; or encountering a person so distressed that they perpetually cut up their arms, their legs or neck, mutilate themselves or attempt to burn themselves alive".

Therefore, a practice or approach is required in order to effectively support both the prisoner and the officers involved in such situations. As the ongoing supervision and staff consultation is imperative to the implementation of TIP (see Appendix Fourteen), this further reiterates the

institutional message that trauma-informed approach is the standard practice, for both staff and prisoners. SAMHSA (2014) utilises terms such as “compassion fatigue”, “vicarious traumatization”, “secondary traumatization” and “burnout”, to explore how secondary trauma reactions and psychological distress can impact staff working within behavioural health settings. Yet, within the prison context, very little attention is paid to the very likely emotional, psychological and physical consequences of a prison officer’s exposure to work-place trauma.

Moreover, the culture of the prisons enables prison officers to either decline and or devalue the worth of ongoing and essential trauma support. In light of the data, I argue that the prison service cannot afford to diminish the impact of these experiences, rather they should become an anticipated result from the often extreme experiences of a prison officer.

It is worth quoting at length from **Phil** (Open Female), when acknowledging the limitations in prison staff support

If you are dealing with something and an event happened and a member of staff was involved there’s kind of a list of things where we would make sure everyone was alright or if anyone needed anything. It’s about finding time and that’s a massive complaint not so much here but traumatic events happen on a daily basis now and the trouble is people haven’t got time to take that member of staff to one side and check they are alright, do you need to go home? Do you need not to be here? Because there is another traumatic event that will happen in two minutes time. So it’s like well-done but now let’s move onto this other traumatic event happening now, get over there, so you don’t get breathing space. The unfortunate effect of that is that most staff think that we do not care, it becomes lip service and you are just going through the motions and that devalues any gesture that you’re going to make. So for anyone sceptical, like me I’ve had management saying right have you checked staff are all right and they aren’t asking because they’re worried about staff, they’re asking because they don’t want any comebacks of staff complaining, and it is just purely lip service and a back covering exercise and I

know that when I'm asked about it and they know that when I'm asking about them, it's lost a lot of its personal touch.

Phil's reflection signifies the realities of supporting prison staff, following a traumatic event. Given the M&C needs of the prisoner population, issues arise frequently there is minimal time to prioritise the care and support of staff. This will inevitably impact upon staff's dissatisfaction and well-being. Therefore, this could potentially lead to burnouts, or even staff disengaging from their role (Tait, 2011).

The reality of the role of the officer is, as Crawley (2004b) argued, the daily suppression of emotions, in order to survive the prison environment. Lambert et al., (2010: no page) identified that officers may withdraw "emotionally, psychologically and socially" from their role. Moreover, the issues presented above have the propensity to negatively impact prison officer anxiety and performance (Halsey and Deegan, 2016); in turn this may eventually lead to a lower prison officer retention rate (Lambert et al., 2015) and the likelihood of potential burnouts (Brough and Williams, 2007).

When attending to the needs of prisons, the requirements associated with prison staff demands equal academic and political attention. As **Claire** (Closed Female) stated

We are all people we have all had some form of trauma if you look at a prison officer, one of the definitions of trauma is witnessing a violent act and if you are working in a prison you are used to seeing violent acts so we are all affected by it...Don't ask for help, not if you want to continue as a prison officer.

This quote highlights the way in which prison staff are considering workplace trauma and how this can negatively impact them. Further, my findings suggest that the prison estate has prioritised the implementation of a trauma-informed approach for the prisoners, without initially applying a trauma-informed culture change across management and staff support systems. This section has provided examples of how prison officers' approaches to care may be negatively impacted and how *rogue officer* characteristics could emerge. Although there is no place within the prison service for

officers who are committing misconduct, the majority of characteristics of *rogue officers* (Figure 6.2) highlight the need for additional training and staff support. For the staff who exert the characteristics of *damaged* or *rogue officers*, this is indicative of a much wider failure to provide adequate support and training to meet the needs of prison officers. These are all areas that would require attention within the implementation of a trauma-informed approach within prisons.

6.5 Trauma Informing the UK Prison Service: Recognising Staff Needs

The movement towards the UK prison service Becoming Trauma Informed has been in progress since September 2015. Staff selected from the female prison estate were invited to attend training days delivered by Stephanie Covington to start the process (Covington, 2015b). In June 2017, prison staff working within the high security male prison estate were also invited to BTI training. However this training is yet to filter into Category B,C and D male prisons. The benefits of the penal estate BTI is to better equip staff to be able to recognise and respond to the needs of their prison population. However, in order to do this Covington (2015b) argues that a culture shift is required in order to effectively support both the staff and prisoners within the prison service. Findings from Crewe (2009:61) indicate that staff can feel “collectively undervalued” and often compare their experiences with those of prisoners, as they feel management prioritise the prisoners’ needs over theirs.

The complexities relating to the lack of support, resources and empowerment staff receive emerged in my findings. In order for a trauma-informed approach to be of benefit to the prisoner population, the staff should be fully supported and resourced to cope with M&C needs of trauma survivors. Outlined in the BTI Toolkit for UK (Covington, 2015b), the five essential values are comprised of safety, trustworthiness, choice, collaboration and empowerment. A more detailed explanation of these values can be found in Chapter Three. However, the values relate specifically to the needs of prisoners. To follow on from my findings, I have created trauma-informed values specifically to address the needs of prison staff that I present below.

6.5.1 Trauma-Informed Core Values for Prison Staff

1. **Safety:** Staff should feel safe in their working environments. Independent and impartial support services should be in place for staff to access. Relationships between prison staff and their management should be good and staff should feel comfortable to disclose work-related concerns and their own wellbeing concerns. Staff should have supervision with their line management where they can discuss any issues relating to their professional development, emotional or physical well-being and any issues within their work life. It should be a safe environment for them to gain support, but also to discuss issues with other colleagues that may be impacting their wellbeing or that of prisoners. The likelihood of staff being impacted by workplace trauma is high, therefore support services should become a standard to avoid high staff turnover and staff burnouts.
2. **Trustworthiness:** Staff should feel able to trust their management team and colleagues. This is particularly the case when approaching for additional support.
3. **Choice:** It is important to offer staff a range of options, particularly surrounding their own personal staff development and training. Staff should have enhanced autonomy and choice over day-to-day tasks and might be provided with adequate flexibility and time to speak with prisoners in distress. Each prison staff member has different strengths and management should work collaboratively with staff to meet their individual needs.
4. **Collaboration:** Staff should be consulted on changes to their job role and responsibilities, to ensure they are fully informed. Those working in close contact with trauma survivors should be consulted about what approaches or training they can benefit from. Changes to job role and prison culture should be nurtured through the collaboration of prison staff and their management teams. Management could benefit from listening to prison staff, this can provide empowerment as well as an opportunity to acknowledge further development.

Providing prison staff with a voice and power over their working practice could maximise their enthusiasm, increase staff morale and productivity.

5. **Empowerment:** Staff should feel that the changes to the service, their roles and responsibilities are to benefit the prisoners and their working experience. Staff should have clarity in their role and responsibilities, opportunities to advance career, autonomy, manageable workloads, an increase of staff presence, rewards for excellent service, and be supported well. Ultimately, staff should feel valued and supported with the resources, training, education and opportunities required to become trauma-informed.

As seen earlier, the majority of trauma-informed values for prisoners are relational and conversational. This is similar when considering the needs of prison staff. Many of the values are underpinned by notions of collaboration and empowering staff in order to maximise their potential and improve their work-life. My findings indicated that staff felt disempowered and had become cynical towards their line management. Sweeney et al., (2016) suggest that staff who believe their management value and care about their well-being often are more supportive to the individuals within their care. Therefore it is important to consider the needs of prison staff, as it will also of benefit to the prisoner population.

Specifically **Claire, Don, Holly, Jed, Jonathon** and **Terry** discussed the powerlessness they felt due to their inability to legally strike, the lack of pay rise opportunities and they all referred to the prison service as the ‘forgotten service’.

Don stated

It is a forgotten service... 7 years since I've had a pay rise. You've got the police, the fire service, ambulance and paramedics and we are very much the poor relative...It's more for less, fulfil more, do more, achieve more, for less, for nothing.

Similarly **Claire** asserted

We can't strike, we've not had a pay rise for years, we suffer verbal, physical abuse daily/weekly basis and through to all of this we are getting a lot of poorly people, so prison officers are dealing with that.

Crawley (2004a) examined the public service provided by officers, she paid particular attention to the lack of gratitude prison staff received from their management. My findings indicated that staff felt like their experiences were overlooked as their management did not consider what it is like on the landings. As such, greater communication and collaboration could improve the communication breakdown and the 'us' and 'them' mentality.

Scholarship has explored how a trauma-informed organisation should aim to promote health, well-being, safety and respect of both staff and clients (SAMHSA, 2014). In addition Hoge et al., (2007) identified that when workloads increase a high stress environment can result in low staff morale and dissatisfaction. In behavioural health settings, staff turnover has been described as rampant, due to a lack of awareness and support surrounding the impact of secondary trauma (Saakvitne et al., 1996). My findings suggest that this pattern is emerging within the prison estate. Therefore to prevent this, Hoge et al., (2007:18) suggested that organisations can increase staff morale by providing opportunities to develop their career, providing clarity in their role, affording autonomy, providing staff with manageable workloads. In my own study, all staff were asked about their self-care routines. More than half (N=14) of prison staff interviewed stated that they spend time with family and friends in order to de-stress outside of work. However, the other 10 participants stated that they had no self-care routine as they "just get on with it". Within a trauma-informed environment, the training and ongoing support for staff is of vital importance to ensure that staff can identify secondary trauma in colleagues and how best to adopt a self-care routine (Jennings 2007a; Jennings 2007b; Jennings, 2009). The importance of a self-care routine is paramount within an environment that is challenging; staff should be encouraged to consider the importance and role of such a routine.

Although trauma-informed approaches are being implemented within the prison service, some of the prison staff are sceptical of their success. A small minority of the participants (N=5) raised concerns that the prison service are attempting to mask much larger, structural and organisational failures through adopting a new approach. For example, **Brian** (Open Female) stated

They're bringing in this new thing (TIP), but they (prison officers) already do that, there are loads of things going on and people get bogged down with policies and procedures, but why put a sticking plaster over it you need to look at the whole system.

The analogy of the sticking plaster highlights prison staff's cynicism of the previous attempts of prison reform. Moreover, it indicates the need to have collaboration between policy makers and prison staff to emphasise what is required, when considering penal reform.

Claire (Closed Female) stated

In terms of what prison officers are, we are always going to be those people in prisons who exert control and authority, that's never going away but how we do it will change. Really prison officers do all of these things when you look at becoming trauma-informed, we do it and others do it without even knowing, and without knowing how good they are at their job. Prison officers just do it because prison officers work very hard to achieve nothing. If nothing has happened in your prison all day, your staff are working very, very hard.

This quote highlights the prison staff's role in supporting prisoners who have experienced previous trauma. As Claire articulates, the way in which staff exert control and authority within prisons will change to consider the potential trauma histories of individuals. This is one step towards avoiding further re-traumatising a trauma survivor. Additionally, interviews with many of the staff indicate that the some staff have an advanced understanding of trauma manifestations, as well as how best to support an individual. However, it is evident that staff morale is low. The findings of this research highlight that despite being 8 months into the implementation of TIP, the support needs of

staff have not yet been prioritised. This has been despite Covington (2015a; 2015b) advocating for a significant culture shift within the prisons to improve the support strategies for the prison staff¹⁸. Arguably, prisons are all unique environments, and the culture of each establishment varies depending on many things, including having distinct management teams, the overall variations in the operationalisation of the prison, architectural and structural differences, and the uniqueness of housing varying prisoner populations, within a range of prisoner categories. This will undoubtedly bring substantial challenges for the implementation of TIP. Yet, this approach has been successfully adopted across some female prisons in the USA (Covington 2015a); therefore, there is substantial potential for the UK prison service.

The safety of the prison estate has been called into question by researchers and academics (Crewe, 2009; Liebling, 2000; Scott, 2008; Sim, 2008), policy (Ministry of Justice, 2016c) and from the prisoners and prison staff within my research. Miller and Najavits (2012) argue that a consequence of working with challenging behaviours is the possibility of experiencing vicarious trauma; this can impact the staff working in prisons regardless of their expertise, as staff can still be subjected to burnouts and emotional reactivity. Further, the authors state that in an environment perpetually under-resourced, the overall security concerns of the establishments may outweigh the need to focus on trauma-informed staff care, resulting in an even slower cultural change (Miller and Najavits, 2012). However, trauma-informed approaches have been ongoing within community services since the release of the Corston report in 2007. Therefore we now turn to consider how success is generated, from the perspectives of community based third sector staff who work within a trauma-informed approach.

6.6 Trauma-Informed Lessons: Considering Third Sector Organisations

Any prisoner who is due to be released from prison and has rehabilitation needs relating to issues such as mental health, substance misuse, housing or employment will have had the option and

¹⁸ I am mindful that data collection occurred during the very initial stages of the implementation of trauma-informed practice. However, the timeline of implementation (Appendix Fifteen shows) they were roughly 8 months into the implementation, and no staff disclosed that their support had improved since the implementation, despite this being a critical implementation phase.

opportunity to engage with a through-the-gate in-reach service. This is provided by local community based organisations that usually have access to their local prisons, either weekly or fortnightly. These organisations are granted access to the prisons weekly or bi-weekly, to engage prisoners with rehabilitation services, centres and resources that they can access in their local community, following their release from prison. As acknowledged in the former prisoner narratives, these organisations provide a continuum of support, in order to empower and encourage individuals to achieve their rehabilitation and desistance goals (See Section 5.5).

The movement and implementation of TIP originated in the transformation of behavioural health services that supported addiction and mental health issues (Harris and Fallot, 2001). Arguably, the culture of organisations varies from that of an institution such as a prison. However there is a growing UK evidence base (Sweeney et al., 2016) to suggest that trauma-informed approaches are an example of a best practice approaches when working within offender rehabilitation. Moreover, the trauma-informed approach has been implemented in some services, for as long as 8 years. Therefore, the third sector is in a trauma-informed implementation advantage and as such, we can learn from their success.

Following data collection with 12 staff working across three services that work within two trauma-informed organisations (see Appendix Eleven and Twelve)¹⁹, I had originally endeavoured to dedicate a full chapter to the results. However, my findings indicated that trauma-informed organisations were successful in their *recognition* as well as their *response* in supporting their clients²⁰ who have experienced trauma. This, the staff participants demonstrated was down to their advanced trauma-informed training, knowledge of their client base, the holistic and person-centred approach they took, as well as the underpinning philosophy of TIP within their organisational

¹⁹ See Appendix Ten, Eleven and Twelve for service and organisation information.

²⁰ Service One referred to the individuals accessing their services as 'clients'. Service Two used the terms 'women' and 'client' intermittently. Whereas service Three referred to the individuals accessing their services as 'women'. This is significant when looking at the dis-empowering labels applied to individuals accessing support services. For a critical discussion of labels such as client and service user see McLaughlin, H. (2009) 'What's in a name: 'Client', 'Patient', 'Customer', 'Consumer', 'Expert by Experience', 'Service User',- What's next? *British Journal of Social Work*, 39 (6), pp.1101-1117.

approach to supporting both clients and staff. Although I could have written substantially on this topic, it was important to focus on the specific context of the prisoner service.

When analysing this dataset, I considered what the prison service could learn from the practices and organisational philosophical underpinnings of these forward thinking services. The most significant emerging finding was related to the importance of having effective staff support, as this impacts staffs levels of fatigue, resilience and morale that will then influence the service delivery and staff contact with trauma survivors. Two of the services (**Service One** and **Service Two**) were very new to the trauma-informed approach and were at the very beginning (within the initial 12 months) of their implementation journey (see Appendix Eleven). By contrast **Service Three**, had been operating under a trauma-informed approach for several years, and during my visits, they demonstrated innovative and exceptional practices to improve the experiences of both their clients and staff (see Appendix Twelve).

As such, the results collected from the staff working across the three services revealed that there was a vast difference in their experiences of supervision and managerial support. For example in **Service One** the staff interviewed all stated that they had not had supervision with their line manager in over 18 months. The lack of managerial input and support resulted in both staff members looking for work-related support from their teams, which they stated was effective for them. Supervision is a mechanism for which workers can support other workers in order to “meet certain organisations, professional and personal objectives which together promote the best outcomes for service users” (Morrison, 2005:32).

Staff supervision can take many forms, however the three most common are professional supervision, clinical supervision and management supervision (Lambley and Marrable, 2013). First, professional supervision largely focuses on the duties of the employee and the services provided to the individuals accessing support. Second, clinical supervision often focuses on the individuals learning and competency needs in order to further their knowledge and practitioner skills, to increase their ability to support their clients. Finally, management supervision tends to be task-orientated in order to cover certain organisational outcomes (Lambley and Marrable, 2013).

Particularly for individuals working with trauma survivors, staff supervision should be implemented regularly and consistently (SAMSHA, 2014). However, due to the pressures of working in behavioural health services, staff supervision is seen as a luxury, rather than a necessity (Berger and Quiros, 2014). However, for one staff member the lack of supervision was affecting their life outside of work as they stated that at times they were leaving work feeling high levels of stress and anxiety.

*It would be nice to know if I'm doing a good job, or if I'm doing the right thing, because I do things and I just don't know really what I am doing sometimes... you do take a lot of shit home with you. Some people say to me god, you must never drink, and I'm like what? (Making reference to her role within the substance misuse field) I'm at home, after work with a bottle like (gestures to pouring a bottle into a glass). **Service One Staff Member***

In this case, the lack of supervision and support is an issue for a few reasons. First, as the staff member is not receiving any feedback, they are unaware of their strengths and or areas for improvement and professional development. Second, it is important that staff receive support, to avoid taking work-related issues home as much as possible to avoid their work affecting their home life, as much as foreseeably possible. Supervision has the ability to attend to improving a worker's development and skills, as well as providing empowering support to effectively resource staff, both emotionally and practically. Moreover, supervision has been outlined as a strategy to reduce staff burnouts, to increase staff retention and reduce staff turnover (SAMSHA, 2014).

In **Service Two** and **Service Three**, however, all of the staff interviewed focused on how effective their supervisions were with line management.

Sometimes, I don't even think I'm good at the job until I have a supervision, and it's really in there (supervision) where I am reminded how much I do, and how well I do it. So for me that is really important because sometimes this job isn't rewarding, we see and hear terrible things, we see people at their lowest and it

*takes a toll, so any empowerment is welcome, you know what I mean?. **Service Two Staff Member***

*It is really important to have supervision, it is so important actually, because there is a massive risk of burnout, there's massive risk of vicarious trauma and you have to offload somewhere. As well, this is where you can talk about additional training and stuff, it's really very important. **Service Three Staff Member***

Therefore, the findings of the data collection with the third sector staff highlight the importance of having managerial support and supervision for practitioner development, but also to empower staff. However, in **Service Three**, a dominant theme discussed by all of the staff interviewed, was the importance of having a unifying organisational approach such as TIP. All of the staff discussed the positives of a trauma-informed approach, primarily for the empowerment of their clients. However, the staff also discussed the importance of this approach for them as staff members.

*Before we see any of the women, we sit down and we have our morning meeting. This helps us to discuss the women's needs, but also our own. We make it safe for us as staff and the women who access the centre. I have never worked with more empowering women, I can turn to any of them (the staff) to talk about myself, a client or anything that is stressing me out, because it is a stressful job. But we are a trauma-informed team, with each other and with the women and that's how it should be. **Staff Member Service Three***

*We call ourselves the dream team, it is true though. I think the trauma-informed approach we take solidifies that. **Staff Member Service Three***

I never leave work without getting support, like the people here, they just won't let you leave if they know something is on your mind. It is best to share with your team, and that's something trauma-informed practice encourages, don't go home upset. I also think this links to staff safety, or at least feelings of safety, because it is safe to

talk about things that are affecting us, and it is safe for us to ask for help and that's the message we try to give the women too. **Staff Member Service Three**

In addition to staff supervisions, **Service Three** provides a morning staff meeting, whereby staff can share information with each other about the women they support as well as any other issues that require support before their day begins. The staff stated that the morning meetings have been particularly effective in developing team bonding and rapport, as well as addressing pressing issues outside of staff supervision. All of the staff described the trauma-informed approach as being an integral element of the organisational approach to supporting both the needs of the women, as well as the staff working for the service.

The interviews with staff working within third sector organisations emphasise the importance of having staff supervision, to help avoid low staff morale and increase staff safety. The issue of lack of staff safety was also a dominant theme discussed by prison staff, who at the time of interviews were very early (8 months) into to the implementation of TIP. According to staff working within **Service Three**, the several years of adopting TIP have encouraged regular supportive mechanisms (supervision and team meetings) across the organisation, to facilitate effective staff support strategies. Therefore, as the planned TIP implementation timeframe is indicated as being 3-5 years in duration (Covington, 2015b), the staff support for prison officers may have already improved since data collection. However, as we have witnessed in policy, practice and academic research (Crawley, 2004; Tait, 2011) the support of prison officers has consistently failed at reaching the priorities of the prison service, which, in 2016, resulted in a mass prison officer protest. As such, the findings indicate those years of failed penal reforms and the lack of recognition of prison officer needs have fed into the low staff morale culture that currently exists. Therefore, much more researcher attention is required to capture and evaluate the continuation of TIP within prisons to assess the future progress and effectiveness.

6.7 Conclusion

This chapter has explored the perspectives of prison staff and briefly, the experiences of third sector community staff working within trauma-informed organisations. Overall the findings suggest that more work is required within the prison service if TIP is to be as successful as it is already appearing to be within community services.

This chapter has demonstrated that largely, prison staff are aware of the complex manifestations of trauma and how they might impact upon prisoner behaviour. However, a small number of staff interviewed demonstrated a lack of knowledge surrounding self-harm and substance misuse. This suggests that there is a training need required, given that these are such prevalent issues within the prison service. This advanced level of knowledge emerged in the narratives of the prison officer experiences who were ACCT assessors. This showcases a simple training variation that all staff members could potentially benefit from, in order to increase knowledge in these areas. This is crucial for trauma survivors, as we have established these behaviours as potential manifestations of trauma in Chapter Five.

A key finding of this chapter concerned what staff described as one of the key challenges within their role as a prison officer. They referred to this issue as *rogue officers* who are colleagues that they described as being largely lazy, cold and abrupt. Surprisingly, issues with prisoners did not emerge as one of the key challenges in the role of the prison officer. Despite the high levels of challenging behaviour prevalent within the prisoner population, issues emerging from prison officer narratives suggested that the major obstructions in their role emanated from their fellow colleagues and their management. Staff felt like they had to put up with staff members who they described as ‘rogue’, as they disclosed their reluctance to report such individuals due to previous experiences of this being ineffective. However, when considering the safety of prisons, it is important that staff can address issues at work confidentially. Covington’s (2015b) request to challenge the culture of the prison service is a key area that could be investigated further. The presence of *rogue officers* has so far emerged from the narratives of prisoners and prison staff,

therefore the impact of their presence deserves additional scrutiny, as this may impact upon the success of TIP.

However, research conducted by Crawley (2004a; 2004b) and Tait (2011) has highlighted the struggles and emotional challenges related to the work life of a prison officer. The role of TIP also opens up further inquiry into how and why a prison officer becomes 'rogue' and disengaged. My findings support Tait's (2011) work, as she suggested that damaged and disengaged prison officers might have experienced poor support following dealing with a traumatic event at work. This is imperative for the implementation of TIP, as it is evident from my findings that prison staff support has not yet been prioritised within the implementation.

Another major finding of this chapter is the lack of staff support available to prison staff. The feelings of not being valued, lack of resources and benchmarking and feelings of disempowerment are impacting prison staff morale. The quest to deliver value for money and improve cost-effectiveness of the prison is directly connected to evolving prison policies and ever-changing roles of the LCSOSFJ. In Chapter Three I emphasised that there has been a lack of accountability placed onto failed governmental and ministerial initiatives, and that the continued ignorance of this has resulted in a damaged and stagnant penal reform momentum. Moreover, my findings indicate the very real cost of benchmarking, as staff associate these changes with a significant drop in prison staff numbers, and thus both their own and prisoner safety.

Low staff morale within the prison service is not good for the service, the staff, or the prisoners. As such, this area is worthy of additional attention. Staff discussed that they felt over-worked and that there was a decrease in time available to have meaningful engagement with prisoners. Given how important the relationship is between staff and prisoners, the time required to facilitate this should not be underestimated. As the nature of TIP is largely conversational, prison officers having time to engage with prisoners is crucial within this approach.

Having heard several prison staff refer to the prison service as the 'forgotten service'. I have conducted emotional interviews where prison staff have cried when disclosing their frustrations and

levels of powerlessness to change their working conditions, as well as the time they have to engage with prisoners and the impact work stress is having on their well-being. Therefore I argue that this area should be provided with additional investigation. The experiences and emotions of prison officers will directly impact the experiences of prisoners. The element missing within the implementation of TIP has emerged from my findings as a chronic lack of staff support.

This is where the organisations within the community (service two and three) demonstrate a best practice approach, as the staff feel valued, empowered and resourced in order to support the men and women accessing their trauma-informed service. Although there is significant potential to improve prison safety and staff morale within trauma-informed approaches, unless the implementation phases are fully adhered to, this initiative and approach will likely fail to permeate the prison successfully. In addition, much broader and complex issues such as benchmarking and lack of resources cannot be solved by TIP. Such significant and endemic issues require much more focus and attention, as they threaten the safety and efficiency of the prison service.

Covington (2015) and Harris and Falot (2001) have demonstrated that the adoption of a trauma-informed approach requires fundamental shifts in practice, thinking, culture and theoretical framework at all levels. In order to place prisoner care and rehabilitation at the heart of the agenda, the trauma-informed culture shift should begin at the top of the prison managerial hierarchy, become embedded within staff practices and support systems, then it can be fed down to the prisoners and the support service available to them. However, the findings of this chapter indicate that despite Covington's (2015b) training emphasising the importance of prison staff support, the needs of the prison staff are yet to become embedded within the prison service's ambition to become trauma-informed. As such, the future of TIP could be under significant pressure if such issues are not addressed.

Chapter Seven

Conclusion

7.1 Introduction

In this final chapter I draw together my arguments and place emphasis onto the long-lasting impact that trauma can have on the behaviour of men and women in prison. In order to support the needs of trauma survivors in prison as well as the responding prison staff, this research suggests that TIP is a necessary and practical penal response. First within this chapter, I will explore the ways in which my findings shed light onto the research questions. In addition I will identify some of the key areas that my findings indicate require additional scrutiny. I draw on the findings of previous chapters and the areas of original contribution that this research provides, both theoretically and practically. Second, I will address some of the limitations of the research, before I outline the potential new developments and future directions for my research and me. Finally, I end this chapter by sharing some final words, on what I observe to be the wide implications for TIP and how the needs of prisoners and prison staff should be at the forefront of any strategy as ‘One Small Thing’ and the UK Prison Service continues to progress with the implementation.

Within this qualitative and exploratory research inquiry, I set out to consider how previous experiences of trauma can manifest within the behaviour of men and women in prison. I then explored the criminal justice strategies that had the potential to support the needs of trauma survivors in prison. In addition, I set out to investigate what impact supporting trauma survivors had on staff as well as what supportive measures are in place, to increase levels of safety for both trauma survivors and prison staff. The rationale for a contemporary study into this niche area of victimology/criminology studies relates to (i) the lack of social, political and scholarly focus aimed at understanding the way in which previous trauma impacts the lives of men and women in prison; (ii) the lack of any sustained or detailed investigation dedicated to exploring the complex manifestations of previous trauma, and the impact that these behaviours have on the prison service

(such as self-harm, anger and aggression and substance misuse); (iii) the ongoing penal crisis affecting both staff and prisoner safety; and (iv) the way in which criminal justice strategies have overlooked the experiences of trauma survivors in prison, as well as the needs of the prison staff. Accordingly, I evaluated the way in which the new policy directions and the criminal justice strategy TIP, could support the emerging needs of both trauma survivors in prison, and of the responding staff members (e.g. prison officers).

The over-arching research question was;

1. In what ways can victimisation, vulnerability and trauma manifest within offender behaviour?’

In this broad context, I also addressed sub-questions that I present below.

2. How does the prison service recognise and respond to the needs of prisoners who are trauma survivors?
3. How are staff working with trauma survivors supported?

I revisit all of these questions in this final section of my thesis.

7.2 Revisiting Theoretical Contributions

Most importantly, this research has provided the first UK based victimological inquiry into the manifestations of trauma within the behaviours of trauma survivors in prison. This research pushes theoretical and multi-disciplinary boundaries in order to combine victimological theory, prison theory and trauma theory, to further our understanding of a trauma survivor’s prison experience.

The research questions derived initially from my experiences of working with trauma survivors in prison, however they were also developed from my extensive reading and subsequent literature reviews. The scholarly reviews in Chapter Two and Chapter Three explored the complex ways that victimisation and trauma can manifest within behaviour of prisoners. In addition, these chapters explored why the experience of prison will be significantly more painful for trauma survivors. The literature reviews identified the challenges within traditional victimology that have resulted in the suppression of the experiences of trauma survivors in prison. I argued that positivist victimology

and the notion of the 'ideal victim' permeate our understandings of both how we expect individuals who have experienced trauma to behave, but also our punitive stance of punishing the guilty offender. This over-simplistic and stereotypical understanding, I argued, permeates the victimological, criminological and prison policy discourse, resulting in a distinct lack of support for trauma survivors in prison, until the innovative work of Covington (2015b) and 'One Small Thing', in 2015. I argued that the dominance of positivist victimology has influenced the lack of research momentum in this area, as well as societal and penal assumptions of how vulnerable individuals and/or trauma survivors should behave.

In order to counteract this deficit in knowledge within victimology, I have adopted a critical victimological lens. This enables the freedom to explore some of the more complex manifestations of previous trauma that are present within the challenging behaviours of prisoners. The critical victimology theory is influenced by feminism, and I have argued that it is the most suitable, due to its appreciation of the social, structural and institutional forces that can increase an individual's likelihood of experiencing victimisation or trauma.

More recently, US based researchers Katz and Willis (2016), have capitalised on the strength of critical victimology, and have applied this theory to the narratives of male trauma survivors in prison. This was the first research project of its kind. However, their conclusion simply reiterates the intergenerational cycle of abuse, without considering a potential way forward and/or solution for the male trauma survivors in prison. As evidenced in the work of Katz and Willis (2016), the critical victimology rhetoric has begun to consider the intersections between a victim and an offender, this study adds significantly to the evolving and multi-disciplinary, critical victimological imagination.

My study advances the work above, to include the perspectives of men and women who have been in prison within the UK, as well as the reflections of the staff that support the needs of trauma survivors. The findings together provide justification and demonstrate a need for the implementation of TIP. More and more studies continue to highlight issues, however the strength of this research is that there is a practical response at the helm. Not only does this study provide

theoretical and scholarly contributions to knowledge, but the findings also have practical value to trauma-informed practitioners and those involved within the strategic implementation.

Initially, I argued that within victimology, we can benefit from exploring the complex manifestations of trauma to further advance our understanding of the long-lasting psychological legacy of victimisation and trauma. This deficit in knowledge can also be transferred within prison officer understandings of challenging behaviour and how best to respond to it. To further this, I explored the sociology of imprisonment and trauma theory to investigate the pains of imprisonment and how the experience of trauma will likely impact upon an individual's ability to adapt and therefore behave and engage within the prison system. I argued that the experience of prison and the associated pains of imprisonment (Crewe, 2011a; Crewe, 2015; Sykes, 1958), would be felt more harshly by a trauma survivor. I argued that the inclusion of trauma theory within victimological and prison studies can increase our understanding of trauma survivors exponentially. I argue that this study has provided significant evidence that the behavioural manifestations of trauma challenge much of the traditional victimological theorising. Thus, this research has provided examples that challenge the stereotypical presumption of victimhood and trauma. The aim of this is to broaden the victimological imagination in order to strengthen victimology's ability to advance as a discipline that is specifically designed to appreciate the complex experiences of victimisation and trauma.

Whilst this research provides a platform for the experiences of trauma survivors in prison, the needs of the prison staff emerged as a key focus. I argued that the needs of the staff are important if we care about the welfare of prisoners. From a trauma-informed stance, the value of recognising and responding to prison staff needs can only be of a benefit to the effectiveness of the prison service as a whole, as well as increasing levels of safety and decency. The emotional impact of working as a prison officer has featured in scholarly debate (Crawley, 2004a; Crawley, 2004b; Liebling, Arnold and Straub, 2011). However, little has emerged in order to increase the support provided to prison staff. My findings indicate that there are significant levels of disempowerment

across the service and as such, this study has identified key areas of development that I will feed back to the implementation team at ‘One Small Thing’.

7.2.1 Contributions to Penal Scholarship and Practice

Overall, this research has contributed to prison scholarship in a variety of ways. First, it is the only UK-based research inquiry to have explored prisoner trauma histories and the associated behavioural manifestations, through a victimological lens. Second, it is the first study to take a trauma-informed approach that explores the needs and narratives of both staff and prisoners, in light of the current prison crisis, and prison-wide reduction in levels of safety. Third, this research considers the trauma histories of prisoners (within a critical victimological framework) and posits that these imported experiences will significantly impact a trauma survivors experience of the pains of imprisonment. Finally, this research considers all of the above in relation to the implementation of the penal strategy towards BTI and the original contributions and findings of this research can contribute to the ongoing implementation of TIP.

7.3 Research Questions and Reflections

Here, I aim to explore the findings of the research, paying attention specifically to the ways in which they answer the research questions. I will present each question separately, and then chronologically, I will explore the emerging findings from the two analysis chapters and present the originality of this research more explicitly.

7.3.1 How trauma manifests within offender behaviour

When considering the overarching question **“In what ways can victimisation, vulnerability and trauma manifest within prisoner behaviour?”** I had to combine literature within psychology and existing victimological literature, as the complex behaviours I wanted to explore (substance misuse, self-harm and anger) were not readily or extensively covered within victimology. When considering the way in which the prison environment exacerbated previous trauma, I then crossed over into prison research, more specifically Sykes (1958) and Crewe’s (2011a; 2015) work within the sociology of imprisonment and prisoner adaptation (Crewe, 2009). First, the findings from the

narratives of former prisoners and experiences of prison staff indicated that the experience of trauma can impact an individual's behaviour in a variety of ways. As acknowledged by Covington (2008; 2015a; 2015b), a trauma survivor will find it difficult to trust prison staff. This is made additionally difficult by the culture of the prison service as well as the varying personalities of prison officers that a trauma survivor will have to negotiate.

Findings also indicated that trauma survivors in prison are more likely to engage in risky behaviour such as taking substances and/or drug dealing, demonstrating anger and/or aggression, damaging prison property and/or cells, as well as engaging in SIB. In addition, findings showed that male trauma survivors may appear angry or hostile as they struggle to articulate their vulnerability in the traditional sense. The complex manifestations of trauma are thus contradictory of what we stereotypically associate with vulnerability. As such, they are challenging to support as the presenting behaviours appear refractory and often break prison rules; therefore they are not always associated with increased vulnerability or an additional need for support. For example, findings within Chapter Five highlighted the ways that participants engaged in self-harm and substance misuse as a means of coping with their experiences of trauma. This behaviour was both continued and originated in prison due to the lack of positive coping strategies and/or a lack of ability to gain support.

In addition, male participants also discussed their use of aggression as a way to express their inability to cope and release some of their frustration both inside and outside of prison. Imperatively, behaviours such as these often result in staff making assumptions relating to attention-seeking behaviour, goal-seeking behaviour or poor behaviour. As such, some of these behaviours (excluding self-harm) often result in the use of prison practices such as loss of privileges, isolation and in some cases segregation and control and restraint techniques. These are re-traumatising and all resemble punishment, further inflicting pain onto a trauma survivor. These are simply common practices in prison. Yet, my findings indicate that a lack of consideration relating to a trauma survivor's needs further instils the experience of powerlessness and trauma. When we consider the findings emerging from the former prisoners' experiences with *rogue*

officers, we can start to see the many ways that the prison service attempts to move away from triggering experiences of trauma.

Findings emerging from Chapter Six indicate that a small number of prison staff do not associate self-harm, substance misuse or aggression as a sign that a prisoner is not coping with their adaption to prison, or experiences of previous trauma. This is concerning, due to the increased levels of self-harm, NPS use and violence within prisons (Ministry of Justice, 2016c). Moreover at a time of reduced safety within prisons, this research arrives at a timely juncture within the prison crisis. However, on a positive note, the majority of prison staff do associate many of the manifestations of previous trauma that have been identified in the work of Covington (2015b) Harris and Fallot (2001) and the experiences of former prisoner participants. This indicates capacity within the prison service to grasp TIP, as within my study the majority of prison staff could demonstrate the emotional intelligence, reflection and knowledge required within the approach, despite most (N= 20) stating they had not yet attended trauma-informed training.

7.3.2 How the prison service supports the needs of trauma survivors

When considering the next research question **“how does the prison service recognise and respond to the needs of prisoners who are trauma survivors?”** I explored this from the perspectives and experiences of both former prisoner and prison staff. The findings within Chapter Five indicated that the men and women I interviewed received relatively little support. Some of the former prisoner participants in Chapter Five discussed their experiences of ACCTs and being observed by staff. The support participants valued from prison officers centred on more relational, conversational and respectful relationships. More specifically, participants discussed the relationships they had with some of the prison staff as being largely indifferent. However, they also described some staff as being friendly, whereby they felt they could approach them for additional support and or referrals to other prison services. None of the former prisoners acknowledged anything above what would be expected from prison staff. Alternatively, former prisoner participants largely discussed the lack of support they received and the at times unacceptable

responses they received from staff, included in what I referred to within ‘The Gendered Pains of Imprisonment’ (see Section 5.4).

The impact of *rogue officers* was particularly shocking. I have argued that the *rogue officers* that former prisoners describe will disrupt the success of TIP. For example, I present to you a case study that I have created from the findings presented in Chapter Five and Chapter Six.

Imagine that there is a female prisoner who has self-harmed. **Betty** is on shift and as an ACCT assessor she is supporting and attending to a woman in distress. **Betty** leaves to go home from her shift and the next officer on shift and in charge of the women, is the officer that **Laura** describes (see p.141). Imagine that the female prisoner continues to self-harm that evening. The responding prison officer that **Laura** refers to then throws blue roll at the prisoner, telling her to clean up her mess and then leaves the woman, without providing any support or comfort. Then the prisoner is held in her cell overnight and **Betty** returns to work the following morning to an incredibly distressed woman. This is precisely the very real and negative impact of having prison officers who are either ‘rogue’, detached from prisoners needs and/ or improperly resourced to support the M&C needs of prisoners. They can effectively ‘undo’ much of the hard work and support provided by ‘role model’ prison officers, as described in Chapter Six. Therefore this area requires some additional scrutiny, particularly for the future of TIP. Although I am passionate about the issue of rogue officers, I urge researchers to direct criticisms away from the staff, as the scrutiny should be placed primarily onto the prison service that also supports and trains the prison staff, but also facilitates the development of ‘disengaged’, ‘damaged’ and *rogue officers*.

Overall, the majority of prison staff that were interviewed actively recognised challenging behaviour as potentially trauma-related. The small minority of prison staff who lacked knowledge within this area were the only non ACCT assessors interviewed. I suggest that the advanced training that ACCT assessors receive could impact upon the disparity in knowledge seen in this study. Therefore I posit whether or not there is potential to roll out this advanced training to all staff, as a training need is evident from some of my findings. Until all staff can demonstrate a broad

knowledge of the ways in which trauma manifests within prisoner behaviour, and staff are resourced and supported effectively, the success of TIP will likely be impacted.

The importance of the staff-prisoner relationship has been noted by a variety of penal scholars (Crawley, 2004a; Crewe, 2009; Liebling, 2004; Liebling, Arnold and Straub, 2011; Lloyd, et al., 2017). The findings of this study reiterate the importance of these relationships for two key reasons. First, when asked how staff supported prisoners, the majority of former prisoners talked about staff having conversations with prisoners that had led to verbal support or sign-posting to services. Generally, prisoners acknowledged how helpful and practical prison staff can be including adaption to prison life. Participants such as **Zara** benefitted from positive engagement with prison staff. She discussed the way that a trauma-informed approach she had experienced in prison, helped to instil respect both for herself and others. Second, prison staff discussed the importance of staff-prisoner relationships as they help staff to recognise when a prisoner is in need of additional support. The prisons staff articulated that building up relationships with prisoners helps them to understand the prisoners' life experiences prior to prison, and also allows them to better recognise an alteration in behaviour that may require additional attention. All of the prison staff discussed the important of gaining and sustaining positive relationships with prisoners, as **Claire** stated in Chapter Six, *“knowledge is power and the more we know about them, the better we can understand their behaviour”*. Therefore this relationship is integral for both staff and prisoner and for the development of trauma-informed prison approaches. In Chapter Six, **Betty** acknowledged that often having a conversation with a prisoner can often deescalate much of their anxieties. Similarly, in Chapter Five, **Zara** noted that when she was self-harming in prison she would have benefitted from a prison officer having a positive conversation with her.

However, prison staff noted that due to budget cuts, benchmarking and a lack of staff presence, they had experienced a significant reduction in the time they had available to establish those important staff-prisoner relationships. This is a significant issue for the implementation of TIP that is predominantly relational and conversationally based. Time is a very important commodity. However, as **Claire** indicated, some of the women within her prison have such complex needs that

interventions such as the FMI are pointless as the women require much more of the staff's time and energy, yet they feel they lack the resources to provide this. Key to the staff-prisoner relationship is the staff member's ability to effectively and positively engage with prisoners. Staff stated that this would fit within 'jail craft' as these skills develop over time and with experience rather than in any formal training.

Here, I think it is important to recognise the skills of prison officers. The role of the officer is not a clinical one, nor is it necessarily classed as a specialist role. However my findings indicate that to being an effective 'role model' prison officer is in fact a specialism. The prison staff participants talked at length about what they called 'jail craft' (Section 6.2) and how these skills sets have developed over time, through experiences that have shaped the way in which they are able to predict issues arising as well as work with many of the M&C needs within the prison estate. However, these skills are not just learned. Prison staff participants discussed the importance of having good characteristics and the imported influences that prison officers bring to the role. Interestingly, 'jail craft' was interpreted differently by each participant, some noting that jail craft has helped them better suppress their emotions and 'cope' with the issues they see whilst on duty.

Overall, the importance of the staff-prisoner relationship emerged as key to both former prisoner and prison staff participants. Challenges were identified in gaining and sustaining these important connections, due to a lack of time, resources and lack of staff. The prison environment harbours unavoidable trauma triggers and psychological pains within its policies, procedures and the emotionally gruelling culture. Despite this, my findings suggest that change is possible, and positive steps are being taken to reduce the exacerbation of trauma within prison. However, there are still significant issues evident within the prison service. Although the existing empirical evidence suggests trauma-informed approaches can increase prison safety, there are a number of barriers. According to prison staff interviewed, budget cuts and benchmarking has impacted the time they have to speak to prisoners. A trauma-informed relational approach cannot exist in the absence of positive staff-prisoner engagement.

7.3.3 Supporting Staff Working with Trauma Survivors

When considering the data relating to my final research question "**How are staff working with trauma survivors supported?**" my findings suggest that prison staff do not received adequate support. Staff talked about not receiving appropriate after care following deaths in custody. Some staff discussed taking for granted what they have to deal with whilst on shift. As **Claire** noted, many people would not come into contact with self-harm, suicide, levels of violence, and a lack of safety in their working life. Key areas of concern within the findings indicated that staff would not ask for either mental health or physical health support, due to a fear of negative consequences. The disempowerment and lack of value staff feel was evident in their reference to 'the forgotten service'. Staff discussed the lack of managerial support, lack of supervision and why they would not use the 'care team' for support. The staff do not feel like asking for support is safe if they want to continue as a prison officer. However, this results in levels of dissatisfaction and chronic disempowerment that will eventually impact a staff member's work morale and thus, their performance. Both Sim (2008) and Tait (2011) have covered the issues with having disempowered prison staff in the service. Whilst Sim (2008) acknowledges the likelihood of high staff turnovers Tait's (2011) 'damaged' prison officer typology eludes to the potential creation of a *rogue officer*. This is particularly concerning, as my findings identified the presence of the *rogue officer*.

However, care should be taken when critiquing these staff as Tait's (2011) research indicates, they could have experienced trauma at work and then been ineffectively unsupported by their management teams. This resulted in prison officers becoming withdrawn, disgruntled with the prison service and disengaged in their role (Tait, 2011). Therefore effective staff support is an area that requires additional attention. Moreover, as a key implementation requirement for TIP, my findings indicate that the effective support of prison staff has not been a prison service priority, and more needs to be done to provide staff with safe and (where appropriate) confidential, support.

This is where the culture of trauma-informed third sector community organisations differ to the prison service. For example, within Service Two and Service Three, the staff reported how satisfying it was to work there, as well as how supported, empowered and resourced they felt

within their team and their role. The staff all stated that they received substantial support from their team and their management, as the trauma-informed culture was embedded throughout the service. All of the third sector staff interviewed demonstrated advanced knowledge in trauma and how this impacts the behaviours of their clients. However there is no evidence that can demonstrate the role of TIP on an individual's desistance and recovery journey. This could be an area worthy of future research.

In order to experience the full success of a trauma-informed approach, the prison service should place greater emphasis on re-designing and addressing staff support strategies during the implementation of TIP. To ignore prison staff needs will have a significant impact on the success of TIP. My findings reveal that in the context of the prison setting, the trauma-informed culture shift to focus on staff needs has not been prioritised.

The importance of prison staff needs, prisoners' needs and the staff-prisoner relationship has emerged from the data within this research. Overall, my findings agree with those of Crewe, et al., (2011), Liebling (2011), Lloyd et al., (2017) and Tait (2011), whereby the staff-prisoner relationship emerged as an integral aspect of prison life. However, to further add to these findings, my research indicates that the role of the prison officer is integral for an additional reason. Although prison officers have a more practical role within prison, it is not just this role that places prison officers in a powerful position to "help or hinder" prison initiatives (Lloyd et al., 2017:4). Rather, the way in which prison officers interact with prisoners is just as important. For example, the therapeutic and conversational approach that prison officers take (or do not take, as the case may be) when responding to prisoners (e.g. episodes of self-harm or when a prisoners asks for support) can impact the success of prison initiatives, particularly that of TIP as this approach fundamentally relies on active and positive engagement between prison officers and prisoners. If prison staff are not adequately supported or resourced, it is likely that this will over time, negatively impact upon their care of prisoners. My research therefore suggests that the needs of prisoners and prison staff inevitably cross over and impact upon one another, thus additional

attention should be afforded to explore the complexities and nuances relating to staff-prisoner relationships.

7.4 Brief Acknowledgments: Research Limitations

While I am confident that this research helps to advance the understandings of the manifestations of previous trauma and how best to support both trauma survivors and staff in prisons there are some issues I feel obliged to address.

First, this research is qualitatively driven and exploratory in nature, and it provides a platform to hear the voices of the former prisoners, prison staff and third sector staff included in this study. Despite the collective narratives of the participants pointing towards the need for a trauma-informed approach to improve rehabilitation, the experience of prison and support in prisons, I cannot claim that this research has a generalisable impact. The varying geographical locations, as well as the wealth of prison establishments that were both worked in by staff and lived in by prisoners, points to much more widespread issues than the four prisons that acted as data collection sites. However, I acknowledge that the findings of this research represent only the viewpoints and experiences of the participants included. This research was never designed to produce generalisable results. Rather, it was to provide the first victimological exploration into understanding the complex manifestations of previous trauma. The experience of prison is unique to every individual both serving custodial sentences and working within the UK prison service. In addition to this, the experiences of BME trauma survivors are not represented within this research, however this alludes to an area of further research required. Despite this, this research is the first victimological/criminological study that has considered the combined experiences of former prisoners, prison staff and third sector staff, to shed light onto a niche and sensitive research area. As such, the findings indicate an area of research worthy of additional exploration.

Second, and in light of the above, this research is an original contribution and the first of its kind; therefore I acknowledge that the considerations within this research are broad. I had collected so

much rich data that I needed to be selective when considering what data to include within my thesis. As a result, there are areas that I believe deserve additional exploration. I discuss this below.

7.5 Future Directions

An in-depth study into the ongoing implementation of TIP across the prison estate is required. Larger bodies of empirical evidence are also needed in order to demonstrate TIP's worth within rehabilitation and desistance journeys. Researchers could focus on measuring the progress of the trauma-informed implementation. Additional scholarly attention could also focus on the way in which trauma acts as an imported factor that can hinder and negatively impact a prisoner's adaptation to prison. Although my research honed in on this area, it would be worthy to conduct a study explicitly exploring this area and the associated nuances.

My findings indicate that a gender-sensitive trauma-informed approach could be of benefit to the male prison estate. The data I collected shows a great level of need within the Category B male prison establishment. However, this is not where TIP implementation is occurring. It would be worthwhile considering this category of male prisons due to the prevalent M&C needs.

As TIP is an ongoing initiative working to support victims and trauma survivors, it is important that victimology also moves with the pace of policy and practitioner direction. The findings indicate that staff members working with trauma survivors have advanced knowledge of the complex vulnerabilities and experiences of victimhood/trauma, in comparison to what is academically discussed within victimological scholarship. Therefore, critical victimology could concentrate on building up a literature focus onto some of the manifestations of trauma that I have identified within this research. Although there is fertile ground within critical victimology to explore trauma theory, there has been limited exploration into much more challenging behaviours that have been explored by trauma scholars. For example, the findings of this research support those of Covington (2016a; 2016b) Harris and Fallot (2001), and Kubiak, Covington and Hillier (2017), to suggest that behaviours and coping strategies such as anger, aggression, self-harm and substance misuse can all

be associated with manifestations of previous trauma, and that these issues shed light onto the many vulnerabilities of trauma survivors.

Additional victimological consideration could be paid to male prisoner vulnerabilities. My findings indicated that anger and aggression were connected to an individual's experience with previous trauma and/or an inability to appropriately express their need for support. Most concerning was the amount of fear connected to asking prison staff for support, due to appearing vulnerable or as a 'grass'. Therefore there may be many trauma survivors in male prisons that we are unaware of. Therefore this is an area worthy of additional victimological, criminological and policy scrutiny, in order to advance our understanding in this area and to capture some otherwise hidden voices and experiences. In addition, here it is important to emphasise the need for additional scholarly focus on the experiences of BME men and women in prison surrounding ethnicity and trauma and how this will likely impact upon the recognition and response to additional manifestations of trauma.

I also think it is important to consider that it was Corston (2007) who originally demanded a consideration of the vulnerabilities of women in prison, and despite highlighting the levels of trauma experienced by women in prison. It was not until the 2015 implementation of TIP, whereby a response to women's experiences of trauma was initiated. In order to achieve this within the male and female prison estate, the BTI initiative has been funded by a prison philanthropist, and not by our prison service or government. Therefore, we should remain critical as to whether this approach would be in existence without the work and funding of 'One Small Thing'. Future directions should also be more critical of the stagnant change that occurs within rehabilitation and prison policy. Indeed, the ever-changing individual within the role of LCSOSFJ should attract more criticism from prison researchers. I have argued that the legacy each leaves behind plays a role in the stagnation and lack of momentum within prison reform.

Within criminology, future directions could include a more detailed scrutiny on the prevalence and impact of *rogue officer* within the prison service. More academic attention could also be afforded to the support available to staff, with the aim to scrutinise and improve resources for staff. Although research exists in the area of staff support, my research has indicated that the staff

support that is available is run by prison staff's colleagues. As such, this is not impartial; staff do not feel it is confidential or helpful, and as such, they avoid using it. It would be therefore be beneficial to have a support service that staff could trust and make use of.

It would also be worthwhile to research the ways in which prison staff and prisoners can report the unfair treatment of staff. This research highlighted significant issues within this area that are troubling for the prison service. Practically, more transparency is required in order to identify the hidden processes that are obscuring our awareness and discussion of *rogue staff*, namely, prison officer and prisoner fear.

Specifically for desistance and recovery researchers, the way in which TIP can impact upon an individual's sense of identity, agency, hope and empowerment, and thus their rehabilitation, desistance and recovery journey, could also be a future avenue worthy of consideration. I hope to be able to build upon this research myself, in my future career within academia.

Appendix One: Former Prisoner Information Sheet



Title: Trauma-informed Practice: Exploring the role of adverse life experiences on the behaviour of offenders and the effectiveness of associated criminal justice strategies.

Researcher: Alexandria Bradley

This study aims to collect your opinions of prison, to help make changes to the way people are treated in prison.

The chat will focus on your life before prison, life in prison and life after prison. This sheet gives you some information about the research. It is important you understand why the research is being done and how you will be involved. Please ask any questions as you read through and remember that you do not have to take part, it is your choice.

Who is doing this research?

One researcher (Me, Alexandria Bradley) from Northumbria University and full ethical approval has been given.

Why is this research being done?

- To include your experiences of life before prison, life in prison and life after prison.
- To hear about your life so we can help to understand what support was good for you and what may be needed to help others.
- To find out how prison staff helped and treated you while you were in prison.
- To see if we can learn from you, to help practitioners/prison staff to better support people in prison.
-

If I say yes, what happens next?

You can choose to take part in an interview with myself and you will have the choice to;

- Create a visual timeline of your life on paper.
- Talk to me about your life, starting from your childhood and moving towards what future goals you have.

The interview will last no longer than 2 hours (with breaks and refreshments) and I will ask you if I can record the session and/or take notes while you speak.

You have full control over the interview, as well as how much information you share with me.

Why have I been asked to take part?

You have been asked to take part as you have an important story that could help us to understand how to improve support to people while they are in prison.

Do I have to take part?

No. Taking part is your choice and you can change your mind at any time up until April 2017. You do not have to give a reason and you can contact me anytime. If you do not want to take part it will not affect your rights or support from [insert community service name].

If you do want to take part, you will be asked to sign a consent form.

Is the research confidential?

Please be aware that whatever you say in the interviews is confidential unless you tell me that you or someone else is in danger of harm, or I am told about something that is likely to cause serious harm. If this happens, I will raise this with you during the interview and tell you what could happen if you continue to talk about it. I will encourage you to seek support from members of staff. If I feel unsure that you will go and get support; I will ask your key worker to talk to you about what they need to do to keep you or someone else safe. In an extreme case, for instance, where a person is at serious risk and you chose not to seek help/advice I have a duty to disclose this to the relevant agencies/staff members. Your name, location or age will not be included in this research; but your gender will be included.

I will ask you to create a unique name that you are happy for me to use in the data to ensure anonymity.

You will not be identified in any research outputs (e.g. reports, papers, presentations).

Why take part?

Taking part in this research will help further our understanding of your experience of life before prison; the challenges you have faced and how you became the person you are today. Hearing your voice will help us understand how to best support people in prison. It is also important to understand what support you have received which you feel has helped you. There will be no negative consequences for taking part in this research.

Who will see the findings of this research?

The findings of this research will be reported to a range of people. This will include other participants and academics. The results will be shared at conferences in the form of posters, presentations and journals. If you would like to see the findings of this research, I am happy to provide an executive 2 page summary of the results. The PhD will be published without restricted access in 2018 as all data will be anonymous.

What will happen if I agree to take part?

After signing the consent form you will be told where to go for the interview. If you become worried from taking part in the research, please contact the researcher using the drop box provided at the [insert community service name] reception desk. There will be no negative consequences for you after taking part or deciding to withdraw from this research.

How will my information be stored / used in the future?

All information and data gathered during this research will be stored in line with the Data Protection Act and will be destroyed 5 years following the conclusion of the study.

What happens if you are not happy with the researcher?

If you want to complain because of the way you have been treated, please contact a staff member at [insert community service name] who can help you with your complaint.

How can I withdraw from this research?

You can contact me to withdraw from this research by asking a member of staff to contact me on your behalf. You have until 1st April 2017 to withdraw, after this date, it may not be possible to withdraw your individual data as the results may already have been completed and published. All of your information is anonymous, your name or location will not appear in the research.

If you have any questions or want more information about the research, please speak to me at any point before, during or after your interview.

Thank you for reading this.

Appendix Two: Former Prisoner and Community Staff Consent Form

Research Consent Form

Name of project

Trauma-informed Practice: Exploring the role of adverse life experiences on the behaviour of offenders and the effectiveness of associated criminal justice strategies.

Researcher Name

Alexandria Bradley: PhD Candidate

Research Organisation

Northumbria University

Participant's name – write your initials here.

- I understand that taking part is voluntary and that I am free to withdraw at any time, without giving a reason.
- I agree with the researcher recording and having this information about me.
- I consent to the use of a voice recorder throughout my interview.
- I am aware that this information will only be used for the reasons as stated in the information sheet.
- I have been told that any data collected from this research will be secure and protected with Northumbria University's guidelines.
- I understand that all notes and documents will be confidential with only the research team having access to them.
- I confirm that my consent is conditional as long as the University is complying with its duties and obligations under the Data Protection Act.
- I understand how to contact the researcher if I was to have any concerns or questions.
- I understand that I can withdraw anytime up until April 2017.

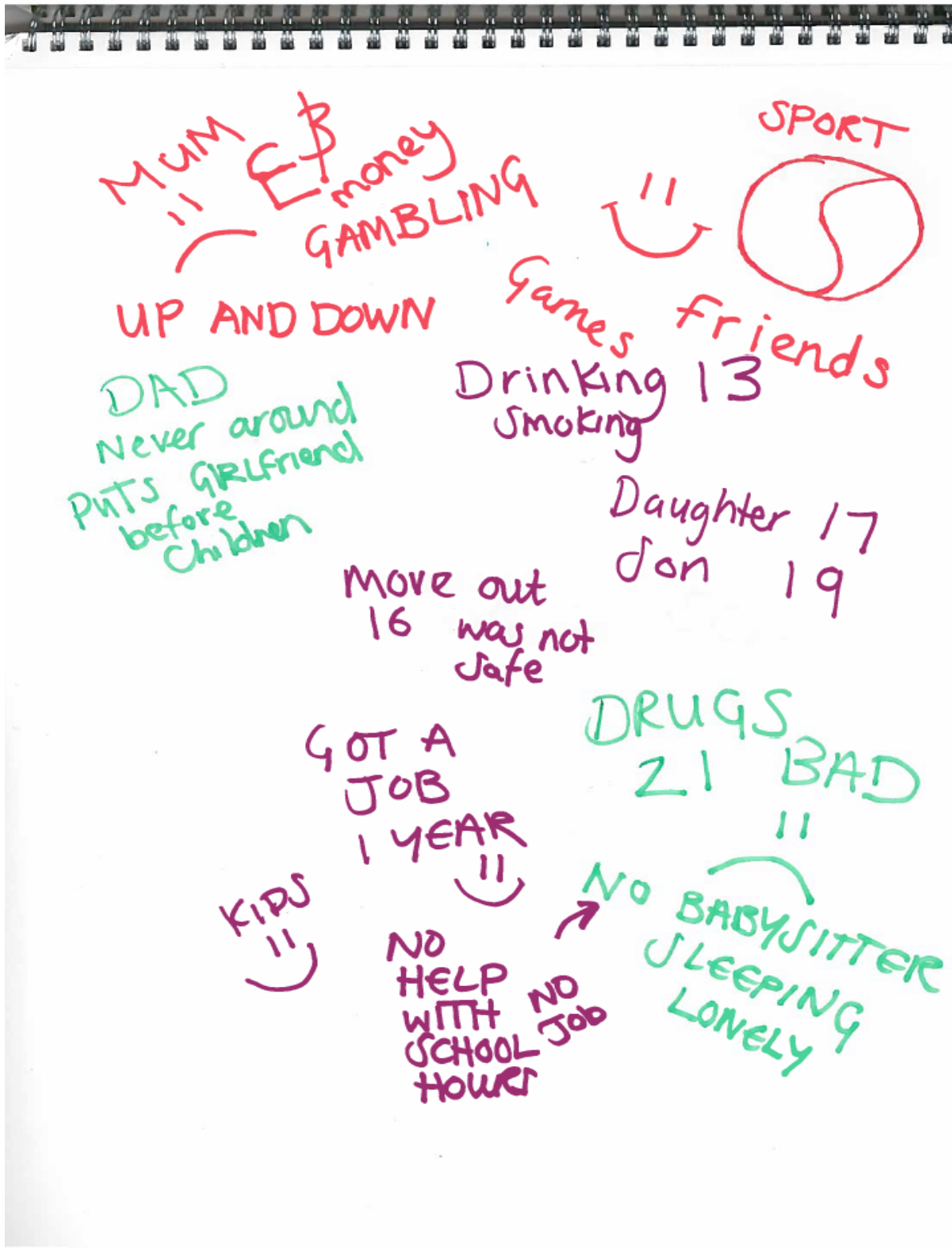
By signing, I confirm that I am above 18 years old

Date

Signature of Researcher

Date

Appendix Three: Biographical Narrative Interview Timeline



BULLIED! HMP
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CHILDREN
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Appendix Four: Prison Staff Information Sheet



Title: Trauma-informed Practice: Exploring the role of adverse life experiences on the behaviour of offenders and the effectiveness of associated criminal justice strategies.

Prison Staff Information Sheet

Name of Researcher: Alexandria Bradley (PhD Candidate)

Experience of Researcher: Former DART Programmes Facilitator based at HMPYOI Deerbolt and HMP Low Newton.

1. What is the purpose of the project?

The aim of this project is to investigate the intersections between victimhood and offending through the inclusion of practitioner, prison staff and ex-prisoner narratives. This study will examine the complex displays of victimisation, vulnerability and trauma; with the aim of extending knowledge and understanding of how to support that individual. Questions will surround your experiences of working with challenging behaviour and prisoners (male or female) who have experienced previous trauma.

2. Has this investigation received ethical clearance?

Yes, the study and its protocol have received full ethical approval from the Faculty of Social Sciences Ethics Committee at Northumbria University. The research also has ethical clearance from NOMS. The interview schedule has been piloted.

3. Why have I been selected to take part?

It is important that I ask staff members working with prisoners with complex needs for their perspectives and you have indicated that you are interested in taking part in this study.

4. What will I have to do?

Once you have finished reading this information, you will be required to sign for a consent form which indicates your confirmation to take part in this research. An interview date and location will be organised at your convenience. The interview will last no longer than 45 minutes.

You do not have to answer any individual questions posed by the researcher and you can also terminate the interview if you feel uncomfortable. There will be neither an advantage nor a disadvantage for your participation/non participation in this research.

Follow up contact may be appropriate if the researcher requires any clarification, this would be in either a telephone call or an email, whichever you prefer.

You will not be asked to access any NOMS records.

Any information disclosed such as behaviour that is against prison rules and can be adjudicated against, illegal acts, and behaviour that is potentially harmful to the research participant will be disclosed to the relevant professional.

You will be provided with contact details of a member of staff working in your prison, where you can direct any requests for information, any any complaints of queries. You can terminate the interview and withdraw at any point up until April 2017.

5. How will confidentiality be assured?

The researcher has put into place a number of procedures to protect the confidentiality of participants. Your name or other personal details including your job role and location will not be associated with your data and pseudonyms will be provided. Only the researcher will have access to identifiable information; and all electronic information will be stored on a private password-protected computer, which only the researcher has access to.

You will not be identified in any research outputs (e.g. reports, papers, presentations).

6. Who will have access to the information that I provide and the thesis?

Any information and data gathered during this research study will only be available to the researcher. As the research will be presented at conferences or published, all personal details including name, location and job title will not be used and select quotations will be used, therefore making vicarious identification unlikely. If you would like to see the findings of this research, I am happy to provide an executive 2 page summary of the results.

7. How will my information be stored / used in the future?

Following transcription, all recorded data will be deleted. However the transcriptions will be anonymised and kept with the aim to publish in academic journals and for the thesis. All information and data gathered during this research will be stored in line with the Data Protection Act and will be destroyed 5 years following the conclusion of the study. The data will be stored on a password protected computer at Northumbria University. Any notes taken will be stored in a secure locker at Northumbria University. No company or organisation will be given any individual's information, and neither will police, security services, social services, relatives or lawyers, unless forced to do so due to restrictions in confidentiality regarding individual safety.

8. How can I withdraw from the project?

You can inform the researcher by email at any point up until 1st April 2017. After this date, it may not be possible to withdraw your individual data as the results may already have been completed and published. As all data are anonymised, your individual data will not be

identifiable in any way. If you are not happy with the researcher and wish to make a complaint, please contact my principle supervisor at pamela.davies@northumbria.ac.uk.

If you have any questions or want more information about the research, please speak to me directly via my email address alexandria.bradley@northumbria.ac.uk

Thank you for reading this.

Appendix Five: Prison Staff Consent Form

Research Consent Form

Name of project

Trauma-informed Practice: Exploring the role of adverse life experiences on the behaviour of offenders and the effectiveness of associated criminal justice strategies.

Researcher Name

Alexandria Bradley: PhD Candidate

Research Organisation

Northumbria University

Participant's name – write your initials here.

- I understand that taking part is voluntary and that I am free to withdraw at any time, without giving a reason.
- I understand that there will be neither an advantage nor a disadvantage for taking part in this research.
- I understand that I can refuse to answer any questions asked by the researcher and that this will not compromise me in anyway.
- I consent to a follow up contact if appropriate by email or telephone call.
- I understand that any information disclosed which is against prison rules will be reported.
- The researcher has given me a contact in my prison, where I can direct any requests for information, complaints, grievances and queries.
- I consent to the use of a data encrypted voice recorder that will record the full interview.
- I agree with the researcher recording and having this information about me.
- I am aware that this information will only be used for the reasons as stated in the information sheet.
- I have been told that any data collected from this research will be secure and protected with Northumbria University's guidelines.
- I understand that all notes and documents will be confidential with only the research team having access to them.
- I confirm that my consent is conditional as long as the University is complying with its duties and obligations under the Data Protection Act.
- I understand how to contact the researcher if I was to have any concerns or questions.
- I understand that I can withdraw anytime up until April 2017 and this will not compromise me in any way.
- I understand that the information I provide will be stored by the researcher for 5 years following the interview, however the Dictaphone recording will be

deleted following transcription.

- Before I start the interview, I confirm that the researcher has provided me with the names of a member of staff working in this prison that I can speak to regarding this research and they can direct any complaints, requests for information and queries following the research.

By signing, I confirm that I am above 18 years old

Date

Signature of Researcher

Date

Appendix Six: Prison Staff Interview Themes and Questions.

Participant Role

- Main responsibilities.
- Relevant and beneficial training attended.

Experience working with prisoners who have experienced trauma.

- Do many of the men/women you work with discuss experiences of trauma?
- Would you say this is a big issue for men/women in your prison?
- What sort of trauma histories do prisoners discuss with you?
- When you think about the trauma survivors in here- how do they behave?
- Would you associate these as vulnerable?
- Is support fundamental to your role?
- Supporting prisoners who Self-Harm
- Supporting prisoners who use substances.
- Supporting Challenging Behaviour.
- How has your role changed over the years?
- Would you say the role is therapeutic/holistic? Can you give examples?
- What are the hurdles have experienced when working with prisoners who have experienced previous trauma?
- Trauma-informed practice.

Support Systems Available

- Prison staff Self-care.
- What support systems are available for staff?
- Have you used them?
- How is your job satisfaction?

Appendix Seven: Community Staff Information Sheet



Title: Trauma-informed Practice: Exploring the role of adverse life experiences on the behaviour of offenders and the effectiveness of associated criminal justice strategies.

Name of Researcher: Alexandria Bradley (PhD Candidate)

Experience of Researcher: Former Recovery Coordinator and DART Programmes Facilitator.

1. What is the purpose of the project?

The aim of this project is to investigate the intersections between victimhood and offending through the inclusion of former prisoner narratives. This study will examine the complex displays of victimisation, vulnerability and trauma; with the aim of extending knowledge and understanding. To enable an exploration of current practice and support strategies. Questions will surround your experiences dealing with men and women who have been previously victimised and the support your organisation offers to them.

2. Has this investigation received ethical clearance?

Yes, the study and its protocol have received full ethical approval from the Faculty of Social Sciences Ethics Committee at Northumbria University. The research also has ethical clearance from NOMS.

3. Why have I been selected to take part?

I want to explore what support you and your service offer former prisoners, but I also want to hear about your experience of supporting former prisoners.

4. What will I have to do?

Once you have finished reading this information, you will be required to sign for a consent form, and this indicates your confirmation to take part in this research. An interview date and location will be organised at your convenience. The interview will last no longer than 60 minutes.

You do not have to answer any individual questions posed by the researcher and you can also terminate the interview if you feel uncomfortable. There will be neither an advantage nor a disadvantage for your participation/non-participation in this research.

5. How will confidentiality be assured?

The researcher has put into place a number of procedures to protect the confidentiality of participants. Your name or other personal details will not be associated with your data as pseudonyms (if required) will be provided. Only the research team will have access to any identifiable information; and all electronic information will be stored on a private password-protected computer and only the researcher has access.

You will not be identified in any research outputs (e.g. reports, papers, presentations).

6. Who will have access to the information that I provide and the thesis?

Any information and data gathered during this research study will only be available to the researcher. As the research will be presented at conferences or published, no personal details will be used, therefore making vicarious identification unlikely. If you would like to see the findings of this research, I am happy to provide an executive 2 page summary of the results.

7. How will my information be stored / used in the future?

All information and data gathered during this research will be stored in line with the Data Protection Act and will be destroyed 5 years following the conclusion of the study. No company or organisation will be given any individual's information, and neither will police, security services, social services, relatives or lawyers, unless forced to do so due to restrictions in confidentiality regarding individual safety.

8. How can I withdraw from the project?

You can inform the researcher by email at any point up until 1st April 2017. After this date, it may not be possible to withdraw your individual data as the results may already have been completed and published. As all data are anonymised, your individual data will not be identifiable in any way. If you are not happy with the researcher and wish to make a complaint; please contact my principle supervisor at pamela.davies@northumbria.ac.uk.

If you have any questions or want more information about the research, please speak to me directly via my email address alexandria.bradley@northumbria.ac.uk

Thank you for reading this.

Appendix Eight: Community Staff Interview Themes and Questions

Experience working with service users.

- What is your role?
- Do many service users discuss experiences of previous trauma/victimisation?
- What types of trauma experiences do your clients discuss with you?
- Is it common for clients to discuss traumatic histories with you?
- How do they present? How do your clients behave?
- Would you recognise those as signs of vulnerability?
- Have you had any trauma training?
- Do you feel it helped you?
- What are the hurdles you have experienced when working with trauma survivors?

Prison

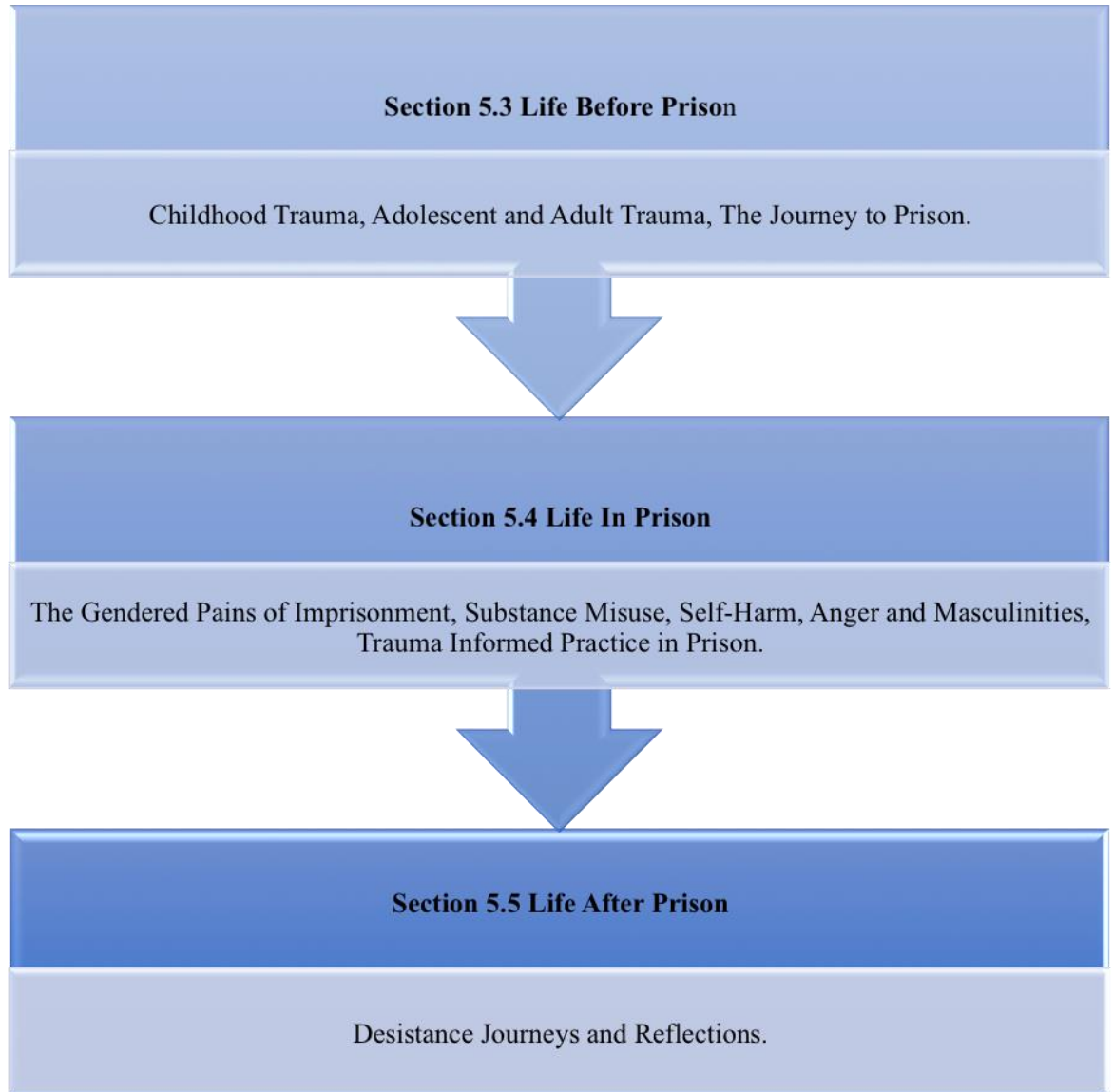
- Tell me about the in reach work you do in prisons?
- What are your experiences of that?
- Do many service users talk about their treatment/experiences in prisons?
- Can you think of anything that could help to support your clients while they were in prison?

Support Systems Available

- What services are available here for your clients?
- What support is available for you as a staff member?
- Do you have supervision and good support from your manager?
- Is there anything that could improve your work life?

Appendix Nine: Data Analysis Themes for the Three Sample Groups.

Sample Group 1 Former Prisoners



Sample Group 2: Prison Staff

Section 6.2: The Role(s) of the prison officer

- Jailcraft.
- Role Model and Rogue Officers.

Section 6.3: Identifying Trauma and Vulnerability in prisoner behaviour

- Prisoner Behaviours: Trauma related or Manipulative.
- Trauma Behaviour: Gender Differences and Similarities.

Section 6.4 and 6.5: Prison Officer Concerns and Reflections of their role

- Time.
- Budgets and Benchmarking.
- Lack of Safety.

Section 6.5 and 6.6: Trauma Informing the UK Prison Service: Recognising the needs of staff.

- Safety.
- Trustworthiness.
- Choice.
- Collaboration.
- Empowerment.

Sample Group 3: Community Staff

How trauma manifests within client behaviour.

- Challenging Behaviour.

What organisations recognise as trauma.

- Childhood Experiences.
- Adolescent and Adult Experiences.
- Prison.

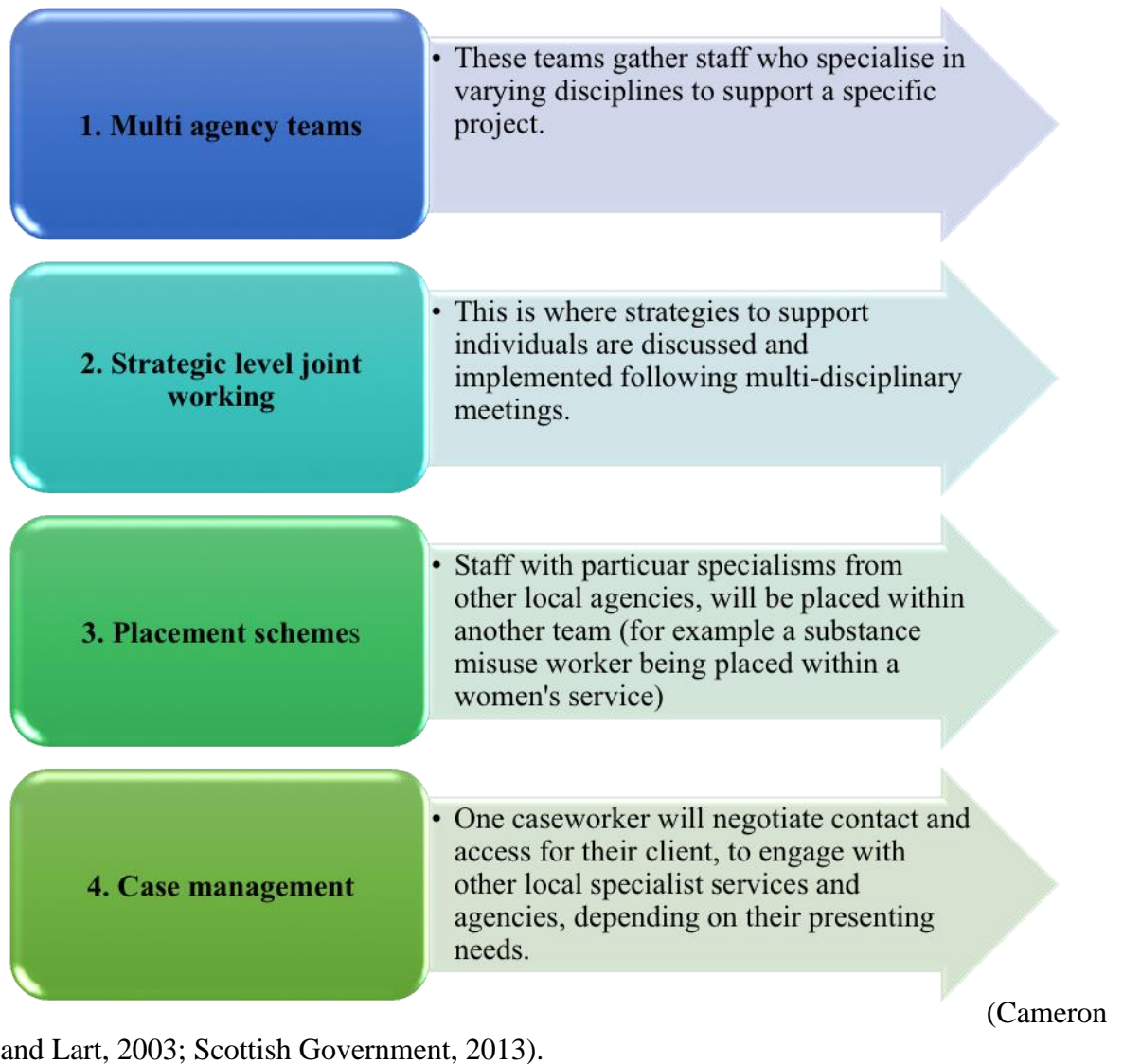
How organisations support client. Section 6.6 Trauma-Informed Lessons: Considering Third Sector Organisation

- Relationships, trust and flexibility.
- One Stop Shops.
- Experts by Experience.
- Trauma- informed approaches.

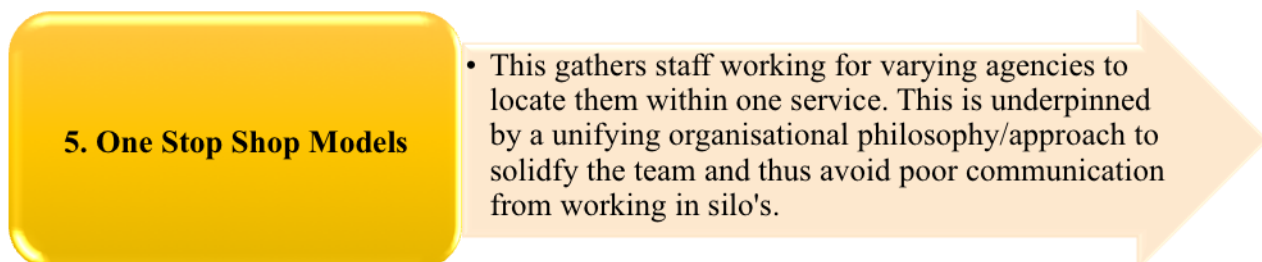
Section 6.6: Staff Support.

- The Importance of supervision.
- Team work.
- Trauma-informed approach.

Appendix Ten: Multi-Disciplinary Approaches to Working with M&C Needs (Community Organisations)



My proposed new and additional approach, stemming from the findings collected with third sector staff.



Appendix Eleven: Organisation One, Service One and Two Description

Organisation One (North East): This organisation is a national registered charity, providing specialist support services nationwide, to promote positive and lasting change with vulnerable people and families. The organisation offers help and support to individuals experiencing homelessness, addiction, mental health problems, exploitation and violence. This includes looking at accredited training programmes tailored to support women and girls, and also employment opportunities to help raise self-esteem and confidence in all of their clients. Further, the organisation is supported through funding from the local authority as well as successful social enterprises including charity shops and food re-distribution schemes. They also work in partnerships with other agencies and services to support individuals experiencing homelessness, addiction, or are moving on from offending. This organisation has begun to implement trauma-informed approaches within their services.

Within organisation one, I visited **two** services²¹. The two services adopted a more common model of case management approaches informed by multi-disciplinary strategic planning. These types of services signposted individuals to other specialist services in the area, to facilitate a multi-agency approach. Both services provided an in reach service into the local male and female prisons to support prisoners close to their release date to aid the transition into community services.

Please see below for service description.

²¹ Data collection ended in June 2016 with community staff and staff in service two were due to attend Stephanie Covington Trauma Informed Training in August 2016.

Service One

focused on addressing the needs of men and women who were experiencing multiple exclusion homelessness and M&C needs, to provide both in reach and outreach services. Provides housing support, kitchen and shower facilities and various activities. Recently, operating under a trauma-informed approach.

This service was closed shortly after data collection and staff were dispersed to local services within organisation one.

Service Two

women's only service, underpinned recently by a trauma-informed approach based to support the growth in client self-esteem and to raise aspirations through offering opportunities and choice. They offer tailored programmes, specialist accommodation and outreach projects within a safe women only space, individuals could access one morning each week. In addition, they invited specialist services and agencies to the women's only centre to meet and attend appointments with their clients within the safety of the woman's centre.

Appendix Twelve: Organisation Two: Service Three Description

Organisation Two (South West): This organisation was underpinned by a trauma-informed philosophy, their aim was to support individuals to gain the skills, understanding and tools that they require to build positive relationships, manage the stresses of everyday life, to progress to study, work and achieve their goals without the need to use substances. Through a wide range of therapies, workshops, courses and one to one key working, the client journey is personalised and tailored to their specific needs, to provide choice, empowerment, safety, collaboration and trust.

Service Three

Trauma-informed womens only service, offering a one stop shop model, to support the active engagement of the women. The centre offered women a weekly timetable of activities including, accredited educational courses, one to one support, workshops and group work which covered topics such as well-being, life skills, empowerment and creativity. To promote client engagement and a community feel, a fully staffed crèche facility was provided, to facilitate easier access and attendance to group session to advance the women's rehabilitation. In addition to this, showers, a washing machine, clothing donations, internet access, a garden and café facilities are also provided. A full team staff morning meeting supports active client information sharing between the varying disciplines and agencies working within the service. It also ensures that all staff working within this centre is that they operate and adhere to the trauma-informed approach.

Appendix Thirteen: Participant Pseudonym Table Sample Group 1

Pseudonym (N:17)	Gender	Age Range	Location	Been in Prison within the last 3 years	Discussed previous trauma	Disclosed a history and or current substance misuse	Disclosed a lack of stable housing
Aurora	Female	45-64	South West	Y	N	N	Y
Diana	Female	45-64	North East	Y	N	N	N
Jimmy	Male	45-64	North East	Y	Y	Y	Y
Joseph	Male	25-44	North East	Y	Y	Y	Y
Laura	Female	18-24	North East	Y	N	Y	N
Liam	Male	18-24	North East	Y	Y	Y	Y
Lottie	Female	25-44	South West	Y	Y	Y	Y
Madeleine	Female	25-44	South West	Y	N	Y	N
Maisey	Female	25-44	South West	Y	Y	Y	Y
Mick	Male	25-44	North East	Y	Y	Y	Y
Nicola	Female	18-24	North East	Y	Y	Y	Y
Neil	Male	25-44	North East	Y	Y	Y	Y
Scotty	Male	18-24	North East	Y	Y	Y	Y
Susey-Mae	Female	25-44	South West	Y	Y	Y	N

Thomas	Male	18-24	North East	Y	Y	Y	Y
Victor	Male	25-44	North East	N	N	Y	Y
Zara	Female	25-44	South West	N	Y	Y	N

Appendix Fourteen: Participant Pseudonym Table Sample Group 2

Pseudonym (N=24)	Gender	Category of Prison	Location	Worked with Male Prisoners Y/N	Worked with Female Prisoners Y/N
Amy	Female	Open Female	Yorkshire and Humberside	N	Y
Ben	Male	Open Female	Yorkshire and Humberside	Y	Y
Betty	Female	Closed Female	North West	N	Y
Brian	Male	Open Female	Yorkshire and Humberside	Y	Y
Claire	Female	Closed Female	North West	Y	Y
Don	Male	Closed Female	North West	N	Y
Geoff	Male	Closed Female	North West	N	Y
Gerald	Male	Closed Male	North East	Y	Y
Gordon	Male	Closed Male	North East	Y	Y
Holly	Female	Open Female	Yorkshire and Humberside	Y	Y
James	Male	Closed Male	North East	Y	N
Jed	Male	Closed Female	North West	N	Y
Jonathon	Male	Closed Male	North East	Y	Y
Julie	Female	Open Male	North East	Y	Y
Kevin	Male	Open Male	North East	Y	N
Liz	Female	Open Male	North East	Y	N

Lucy	Female	Open Male	North East	Y	Y
Phil	Male	Open Female	Yorkshire and Humberside	Y	Y
Reg	Male	Closed Male	North East	Y	N
Richard	Male	Closed Male	North East	Y	Y
Sandeep	Female	Open Female	Yorkshire and Humberside	N	Y
Sara	Female	Closed Female	North West	Y	Y
Terry	Male	Open Male	North East	Y	Y
Tom	Male	Open Male	North East	Y	N

Appendix Fifteen: The Six Domains of Trauma-informed Implementation

(Adapted from Covington, 2015 and Harris and Fallot, 2001).

Domain 1: The Five Core Values Safety, Trustworthiness, Choice, Collaboration and Empowerment.

1. Maximising women in prisons, safety, trust (through clarity, consistency and boundaries), choice (control), collaboration (sharing), and empowerment (skill building).

2. The same five core values are also applied in the context of the staff to increase the involvement and support of staff through effective communications and empowerment.

Domain 2: Formal Services Policies.

Policies must regard the confidentiality and clarity of information, to protect the privacy of both the women and staff members. There should be a de-escalation strategy that avoids the re-traumatisation of prisoners wherever possible. The policies have considered the input and preferences of the women when responding to a crisis, to include choice. Incident reviews should be prioritised to reduce staff vulnerability.

Domain 3: Trauma theory in trauma services.

There must be a trauma theoretical foundation based on women. The screening of women should be sensitive and supportive and follow-up should be standard practice. Trauma specific services should be provided to coincide with trauma informed practice.

Domain 4: Administrative Support.

Administrators should track the effectiveness of trauma informed and proactively track and encourage the change process. This section points to the importance of all individuals being trauma-informed, whether they are working both directly and indirectly with trauma survivors.

Domain 5: Staff Training

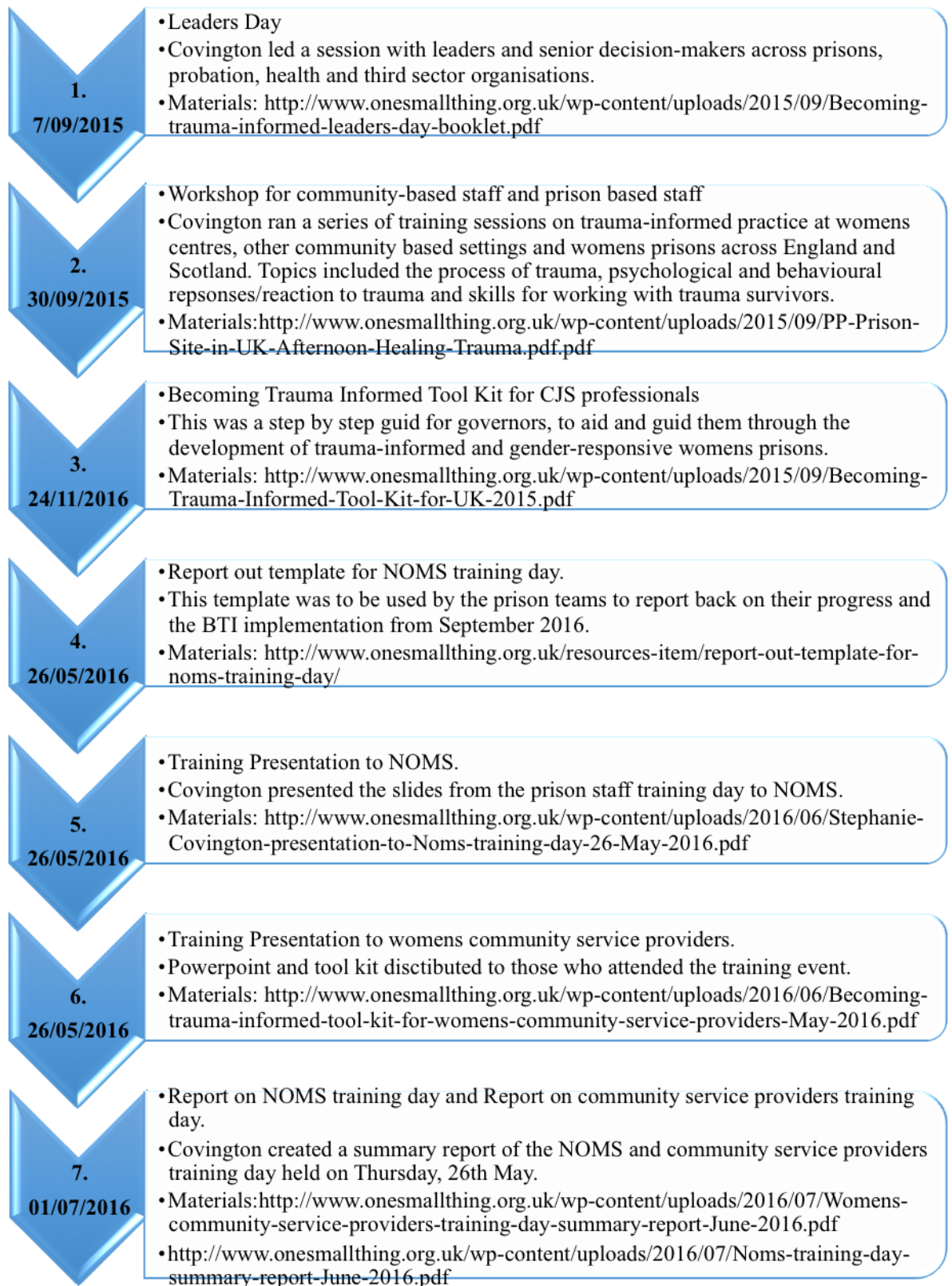
Staff should receive trauma-informed training, with emphasis on sensitisation to trauma-related dynamics, coping strategies and difficult behaviours.

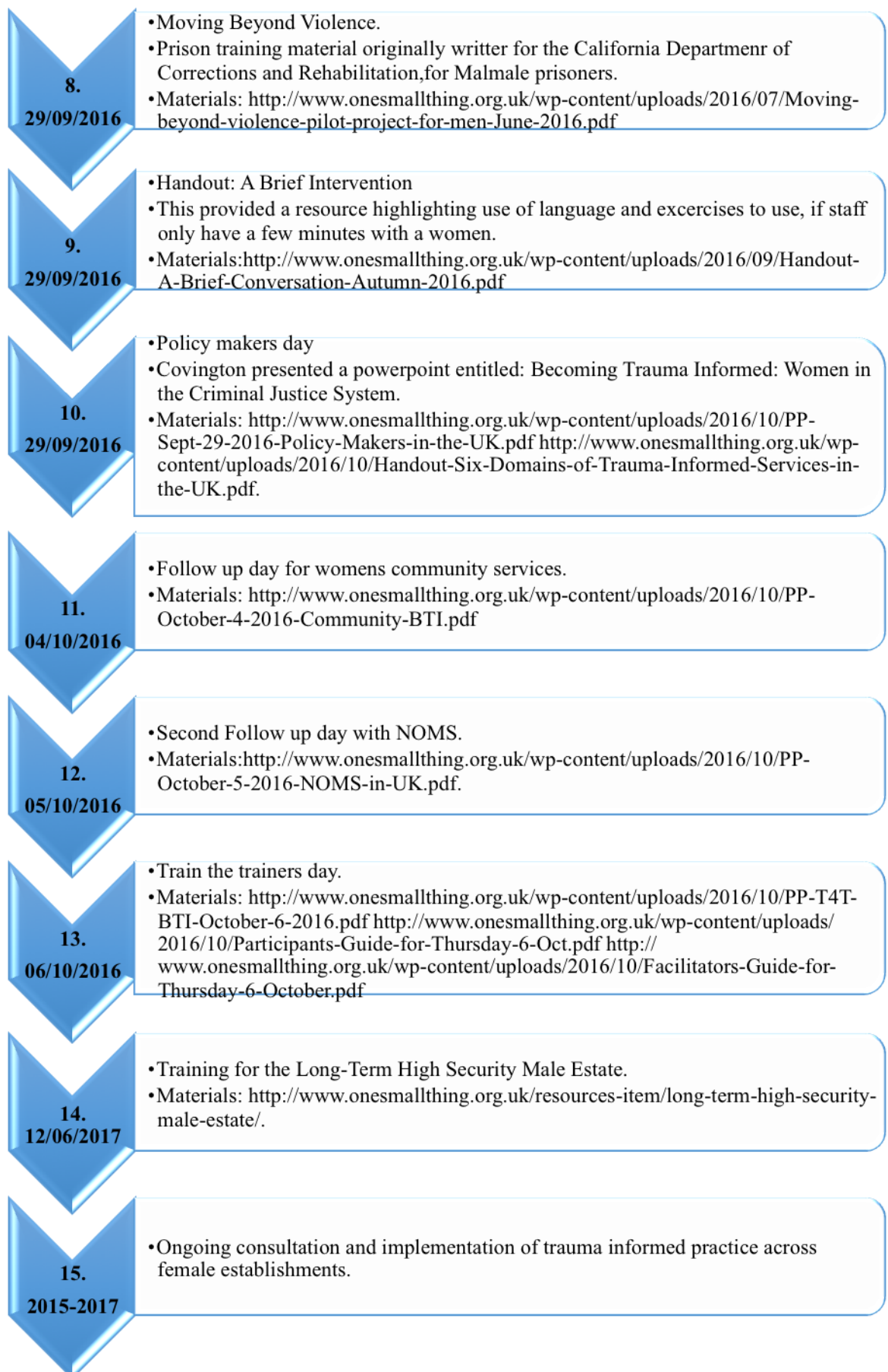
Domain 6: Hiring

Hire sensitive people. Provide incentives for those who engage in trauma- training and development

Appendix Sixteen: Timeline of Trauma-Informed Practice Implementation UK

Prison Estate





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