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What are the barriers prison governors and staff face in implementing the Healthy Prisons Agenda in England?

Presentation by

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WHO Healthy Prisons Agenda (2007)

Four components:

- Reduce health risks (education, prevention, protection);
- Protect human rights;
- Equivalent health services; and
- Whole prison approach (justice system).

These aspirations have been recognised as part of the core principles of a healthy prison by the HM Inspectorate of Prisons (HMIP) (2012).
Current challenges in prisons

• The operational funding for the National Offender Management Service (now Her Majesty's Prison and Probation Service) decreased by 13% over the course of 2009-2017.

• Prison governors tend to be preoccupied with safety and institutional management. Additionally, they are instructed to embrace regulations and instructions by the central government, which are often vague and conflicting.

• There is a tendency of prison officers to focus upon punishment and control, rather than care and empathy in prisoner-staff relationships.
Methods

• Grounded theory, which builds theory from qualitative data, helps to generate greater insights into this research area.

• Semi-structured interviews were conducted with 30 key informants. Interviews lasted between 21 and 65 minutes.

• All transcripts were analysed via NVivo 11. Data saturation was achieved at 30 interviews, as reflected by the fact that no new themes appeared in the data.

• To establish credibility for the research, we triangulated data sources. Additionally, a reflexive journal was maintained throughout the research process.
Theme 1: Institutional challenges

- Participants who operated outside the prison structure, such as representatives of NHS England and health care organisations, felt that prison governors construct an artificial boundary and that these external representatives need to respect the frontier of the governors’ management.

- Similarly, they believe that the central government does not give sufficient strategic guidance to prompt prison governors and staff to promote the Healthy Prisons Agenda.
We ask nicely and we try to negotiate, and all, “Come on, let’s have a go,” but fundamentally I can’t say to a governor, “You will ensure that these patients are seen.” I can’t do it. (Participant 1, Head of Commissioning, NHS England)

..There are 116 prisons and not all governors will understand what is being asked of them (Participant 16, Commissioning Director, NHS England)
On the other hand, internal informants argued that top-down control from the central government was thwarting their ability to embrace the Healthy Prisons Agenda.

[Y]ou get a budget; you're told what to spend it on; you're told how many staff you need; you're told what your core day looks like... If [we deviate from this procedure] then [we] get beaten up for it.

(Participant 22, a Prison Governor)
Theme 2: Occupational challenges

- Despite the fact that prison officers play a crucial role in implementing the Healthy Prisons Agenda, external informants feel that prison staff often use concerns about security as an excuse to subordinate the Agenda.

[It] may be in the best interest[s] that prisoners are able to go run around in the yard for an hour a day, but actually security might override and the Prison Officers might say, “Well, we can't do that”.... (Participant 11, Prison Advocacy Lead)
• Internal informants, in contrast, rationalised resistance from the perspective of practicality. The systems approach that underpins the focus of the Healthy Prisons Agenda would have to bow to security requirements.

A number of prison staff openly said that they **would turn a blind eye to prisoners who smoked**. The reason for that was sometimes practical – **they didn’t have the time or resources to address that because they were dealing with more pressing issues**... (Participant 12, a former Probation Officer)
Our informants also described a need for education of the prison staff to support the Agenda.

... [As] they don't have that experience in health, you have to teach them to be able to reach the population that you're trying to reach. (Participant 26, Health and Justice Lead)
Theme 3: Sectoral challenges

• All participants unanimously articulated that the lack of resources that resulted from the fiscal austerity measures of the central government impedes realisation of the Healthy Prisons Agenda.

In my prison...one prison officer supervised 30 prisoners. It would be in the newspaper [if teacher-student ratios were this low], because people say that actually 30 is too many for a teacher to attend to, but if you replace 30 children with 30 prisoners who are using drugs and who probably have mental health issues...it makes it very, very difficult to do [anything].

(Participant 22, Prison Governor)
• Recruitment issues stem from aspects of the job. Working for a prison is generally considered a “marmite job” (Participant 1).
• A head of service at a prison watchdog remarked that in some places prisons are paying less than McDonald’s, which makes recruitment almost impossible.

[The government] introduced the voluntary early departure scheme, in which we lost a massive proportion of mature prison staff... [Although] they've taken on thousands of new officers...a massive percentage don’t last beyond the first six months so there's a constant recruitment drive... (Participant 15, Prison Service Manager)
What does this study add?

• The reduction in penal resources illuminates the tension among aspirations to promote health within prisons and the reality of institutional instability. Dedicating more resources to this sector may restore the current regime of prisons to an equilibrium.

• There is a consensus that England’s penal system urgently needs education and training that will prepare prison officers for the increasingly complex health and welfare needs of the prison population.

• A new policy document that encapsulates expectations and promotes collaborative work that breaks down the insular mentality, particularly for prison governors, may ensure greater longevity of the Healthy Prisons Agenda.
Thank you for listening!

We would like to thank all the study participants who made this research possible. The views expressed here are those of the authors and not representative of UWE Bristol.