"Don’t Think This Stuff": An Analysis of Prisoners' Accounts of Being Suicidal in Prison

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Abstract

Qualitative research based on prisoners' experience is an important part of knowledge about suicide in prison. It is a valuable supplement to approaches stressing the centrality of risk assessment, which is not highly successful in assessing the likelihood of who will commit suicide in prison. In interview, prisoners demonstrate stages of reflectivity about their interaction with and personal adaptation to prison, and they repeatedly express their need for more opportunities to talk about their feelings. This material has implications for suicide awareness and prevention policies. One form of reflective stage in particular is shown to be highly resistant to risk assessment, and some prisoners may become fixed at this stage. Prisoners have the capacity both to provide valuable data for research purposes and also to contribute to the consequent development and implementation of policy. Recognising these capacities is fundamental in establishing the principles of the 'healthy prison' identified by H.M. Inspectorate (1999) in relation to the problem of suicide awareness and prevention.
Introduction

There is a growing body of statistical, psychiatric and psychological data about the problem of suicide and suicidal feelings in prison. Scraton et al. (1991) point out that many researchers earn a crust by assuming that the troubled feelings involved in this problem are the result of individual psycho-pathological characteristics. There is a shortage of qualitative research, especially which focuses on the accounts given by prisoners of their experience of and interaction with prison. This is part of a general dearth of social research into the identities of troubled selves (Parr & Philo 1995), and an unwillingness to accept that paying them critical attention is worthwhile and useful. Where attention is paid to suicidal prisoners, it is often in the context of risk assessment and risk management, which are seen as pivotal to the implementation of the current suicide awareness strategy (McHugh & Towl 1997).

But only about a third of prisoners who commit suicide have a background of mental disorder, compared with 90% of completed suicides in the community (H.M. Inspectorate 1999). Clearly the problem of suicide in prison is not primarily an issue of psychiatric disorder. In 1997, only 22% of completed suicides had ever been identified prior to their suicide as at risk, by virtue of open F2052SH documentation[1], and a further 35% had had a previous history of F2052SH documentation which had been closed because the risk was no longer judged to be significant (H.M. Inspectorate 1999). So there are obvious limitations to a policy which places too much faith in risk assessment.

The research on which this paper is based is qualitative and focused on the interaction of prisoners with prison, as defined by prisoners themselves. The most obvious characteristics of prison were discussed with prisoners - its capacity to control time and space, and to remove personal autonomy. Prisoners were asked to reflect on how these characteristics had affected their sense of personal identity and well being (Medlicott 1998, 1999).

Because most prisoners survive prison without resorting to suicide, it has been customary to view personal identity as compromised in particular cases. Liebling (1992) points out that the prison population suffers disproportionate levels of vulnerability on account of the backgrounds and life experiences of so many prisoners. ‘Vulnerability’, in this sense, is an individual characteristic possessed by some, and not by others. It has been considered useful, for example, in understanding why some prisoners attract unwelcome attention from other prisoners, or suffer particularly badly in prison. In this usage, vulnerable prisoners are defined in terms of particular social and/or psychological characteristics, such as “sex offenders, prison debtors and those vulnerable for personal reasons such as appearance, hygiene, age/disability, or behaviour” (McGurk et al. 1996)

But qualitative research (Medlicott 1998, 1999) indicates that very many prisoners, regardless of whether or not they have actually been defined as vulnerable, suicidal or coping, experience acutely painful interactions with prison, and they consider suicide as a possible option. All prisoners stress the scarcity of talk in prison, and those with suicidal feelings especially crave the opportunity to talk about their feelings and feel sure of being listened to. Samaritans now go into very many prisons, and in the period 1991-1998 they set up Listener schemes in more than 80 prisons, selecting, training and supporting appropriate prisoners to help other troubled prisoners. But in busy local prisons where the problem of suicide and suicidal feelings is disproportionately high, the continuity of such schemes is constantly under threat by the large remand population and the rapid turnover of prisoners both in specific locations and the prison as a whole.

A brief outline of the methodology used in the research for this paper now follows. A summary of findings which relate to three different types of accounts by prisoners of their interaction with prison is presented. These accounts are characterised as forms of telling, a term which indicates something of the revelatory significance of these frank, highly personal and painfully charged accounts for the prisoners concerned. Three types of telling are then presented, two of which, ‘presentational’ and ‘waiting’ evince weak autonomy and personal management over what is happening to the self. The third type, ‘dialogic telling’, demonstrates the self beginning to assert its capacity for innovation and survival, entering into an internal dialogue where the unconscious goal is to endure and/or transcend the prison experience. Finally, the conclusion addresses some policy implications of this research.
Methodology

The fieldwork on which this paper draws took place over the period of a year, and consisted of forty recorded interviews with prisoners in a busy local male prison, which were conducted in as private a manner as conditions permitted, and lasted up to two hours. Half of the interviews were with prisoners defined by the prison as 'at risk of suicide'. The other half were prisoners defined by senior officers as coping well with prison, and this group included some who had previously been suicidal. If this risk prediction was meaningful, the two groups would be expected to show patterned differences in relation to coping with imprisonment and the expression of suicidal feelings. As far as possible the two groups were matched in age and type of offence, which ranged from murder and rape through to minor drugs offences. The interviews were loosely structured: after some questions about their interaction with the temporal and spatial constraints of prison (Medlicott 1999), prisoners were invited to reflect about what the prison experience was doing to their sense of self. The strategy of Douglas (1985) was followed, in which circles of relevance were woven in talk: painful points were approached in a flexible fashion, retreated from if necessary, and returned to later when intimacy and trust were greater.

The interview method was based on a 'philosophy of listening' (Corradi di Fiumara 1990) and adopted a strategy of disciplined empathy. The capacity of the human scientist to empathise with other human minds is a distinctive and indispensable capacity, particularly useful in social research in difficult environments. The use of disciplined empathy was a methodological attempt to follow Wilhelm Dilthey's (1833-1911) endorsement of human experience as the foundational base for knowledge in the human sciences. Dilthey (1978) stressed the centrality of the experiential categories of willing, feeling and imagining at the heart of the knowing human subject, and the incarcerated subjects in this study express these categories in exemplary and informative ways.

There is a potential problem in getting prisoners to talk frankly in prison: frequently they suspect that what they say will be reported to staff and used against them in disciplinary ways. So it was necessary to pursue empathy in more self-conscious ways than is usual in research, actively trying to present a warm, non-judgemental and interested demeanour, being totally frank with prisoners about the purpose of the research, respecting them as knowledgeable sources about the matters under scrutiny, and assuring them of confidentiality. It was emphasised that in this case the researcher was an 'outsider' with no official connections to the Prison Service or the Home Office. As a result, even the most initially monosyllabic of prisoners seized the opportunity 'to present a self' (Goffman 1959). When people talk about themselves, they are producing an account of identity. "The fact that people believe they possess identities fundamentally depends on their capacity to relate fragmentary occurrences across temporal boundaries" (Gergen and Gergen 1993). Prisoners repeatedly stated that the rare opportunity to talk about themselves was valuable.

However, in an environment where the opportunity for the presentation of self through intimate talk is somewhat circumscribed, these interviews, as well as being valuable in research terms, can be dangerously personal for the teller. Prisoners wept and suffered extremes of anger, grief, guilt and regret: the interviews were a reminder of Finch's (1984) declaration that the interviewee deserves protection from people like herself. Each encounter had at least some potential for harm, and the benefits of the encounter against the possible costs had to be weighed (Erikson 1967). The rarity of this kind of material in the literature on prison suicide, and its value in enriching present approaches to the phenomenon, provided some justifications for proceeding, although it is arguable that 'the only safe way to avoid violating principles of professional ethics is to refrain from doing social research altogether' (Bronfenbrenner 1952:453). Criteria of empathy for the actual interviews were developed as a result of a pilot study. If these were not met in interview, that data was discarded. Limitations of space prevent a full
discussion of the criteria, but they can be summarised as concerned with the frequency and duration of eye contact, the quality of body language, the consistency of voice before, during and after interview, the establishment of mutual listening, and the apparent maintenance of mutual respect.

**Findings**

There did not emerge clear, consistent and patterned differences in coping with prison between the group assessed as being 'at risk of suicide' and those regarded as coping well. Of more striking significance were some characteristics which were common in all the prisoners' accounts. All tellers spoke about the pain and effort of having to live in role: Life in prison is like taking part in a long-running play, where you're on stage all the time. You've got to play your part, have a front. It's a guard, and you never drop it. Yes, I even continue it in my cell, you tend to keep yourself switched on 24 hours a day. If you show any sign of weakness, you've had it. Cheerfulness is the most important defence of all. It's nothing to do with personality or temperament - my cheerfulness is learned. Learning guards and learning parts - that's what it's about. (G......)

A range of other effects figured repetitively in prisoners' responses. They spoke of the compulsion to act out tough *macho* roles, of living in roles until the roles took over, of acquiring false masks, of stress, fear, grief and suspicion of others, of the loss of integrity through forced relationships and/or forced involvement in illegal activities. They spoke feelingly of the lack of privacy, the despair, the degradation. But they also talked of the opportunity to reflect upon the deep issues of life and self, and to decide upon change, shape a future and improve self esteem. They spoke of the opportunity to observe peers at extremely close quarters, and to use this observation to further their understanding of their own uniqueness. They spoke of the novelty of having opportunities to speak with significant strangers such as the chaplain, Samaritans, Listeners and senior officers, and of the opportunity to do courses such as 'Thinking Skills' which offer the possibility of change. What these accounts emphasise is that prison is *not* a form of human warehousing, keeping prisoners suspended in some sort of penal vacuum and then releasing them unchanged. Prison is a place which is richly productive of effects and constitutive of continual personal change. Risk assessment is a tool drawn from a narrow clinical approach to well-being, which does not acknowledge the range, strength and diversity of reactions to the prison experience. All states of mind in prison are constantly being re-created in a dialectical process between the prisoner and the prison society, and although inmates participate as unique individuals, they do so with severe restrictions on their autonomy. Their autonomy is reduced because of a variety of factors: structural constraints, from the bleakness of the architecture to the compulsory daily timetable with its paucity of activities, are so extreme that they seem designed to drive out opportunities to express personal identity. Inevitably this extreme environment produces extreme and unpredictable responses. Prisoners stressed that it is the extreme nature of prison which is such a shock to their internal sense of self and well-being. They were on the whole realistic in acknowledging that even if they were not in prison, they would be enduring a range of experiences, some undoubtedly unpleasant, and they would be interacting with these experiences in ways that would change them. This constitution of the self is a continuation of a whole set of lifelong social forces and processes. Inmates do not enter prison with either a *tabula rasa*, or a strong, virtuous or impregnable identity, at which a repressive institution then proceeds to chisel away. Prisoners have a range of moral identities, and are accustomed to a broad range of governmental strategies, some of which have been directed intensively at the private self (Foucault 1979, Rose 1989). But the on-going process of constitution of the self has a special intensity in prison. There are long solitary hours, which bear painfully upon self identity for the duration and which follow the inmate into the outside world. Prisoners stressed that prison is a place from which they never become really free, for the internalised experience and the emblematic power of that experience last for ever.
Apart from the shared reactions to prison, the interview data fell naturally toward three types of telling, which are characterised below as 'presentational', 'waiting', and 'dialogic'. Within whatever limits are chosen, rising out of human potentialities, a panorama of types confront us (Wright Mills 1959). But the types in this paper are not fixed categories. Each prisoner’s account is unique, and maps onto an individual biography, subjectivity and situatedness, and although each tended to express one of these three different forms of interaction with prison, these should be viewed as contingent stages. Whilst some prisoners appear to get ‘fixed’ at a particular type or stage, others may enter and leave these stages, sometimes repetitively, during the course of their stay in prison.

**Presentational Telling**

The prisoners in this category produced a type of account that was shallow, repetitive and static. A gap was evident between the performer who fabricated the account, and the character who ‘is’ the impression that is fabricated (Goffman 1959) The self that was told in this kind of talk was a performance, for it was the presentation of a self ‘who is sealed inside a story’ (Young 1989). These tellers told their story, each defining himself as an object to himself and as the subject of the story. But by listening carefully, and paying attention to simple things, it became apparent that the presented story was a lifeline to cling onto because of grief, unease and disorientation which threatened to overwhelm the teller.

This kind of telling was characterised by a view of the self as blameless, caught as if in freeze-frame in a static story which was not subtle enough to account for the level of present suffering. Inconsistencies were avoided which threatened the given story-line: anecdotes were told and re-told which bolstered the story-line. The cues of others were invoked, and cues were solicited from the interviewer to collude in a projected ‘happy’ fantasy ending, not logically compatible with what they had disclosed.

Before I came in, I took every day as it came. People called me happy-go-lucky. But I've got a bad temper, a split personality, I'm a bit of a Jekyll and Hyde. I like my good side, the side I am today with you. But my bad side, I hate it, I really hate it. But it's the way I've been brought up, and not only that, what I've been through, over the years.

(Relates an anecdote where he helps another prisoner)

That's the type of person I am, very caring and very helpful. I've got a split personality disorder, me. One minute I'm o.k. and the next minute I can change like the weather. I value myself very highly. I like myself a lot. I do. I like the good side. But I hate the bad side. Prison's made me do a lot of thinking. It's made me understand that prison ain't a place for me.

But I'm a loner, I don't mix with anybody, I don't trust anybody. I've lost my trust in people, because a lot of certain people have let me down in the past, and I don't trust anybody any more. I mean, I might make friends with one or two on the ward, but there's no telling what they'll do behind your back, so I don't get involved.

I do care for people, you know. I may not trust anybody, but I care for people. It doesn't stop me from caring for certain people. I mean, I may have been involved in a bit of trouble on the wings, but it were never my fault. I care for people, I do. (H......)

Inmates at the presentational stage of telling tended to present some specific characteristics which ensured extra attention from staff. H......(above) constantly self-injures, and K...... is visibly shaky, weepy and, at times, refuses to come out of his cell. P...... grieves and weeps, and only finds solace in prayer. Each is receiving attention, sufficient to maintain in stasis the protagonist sealed inside the story. This helps each of them to 'cope' from the prison's point of view, and desist from suicide.

Prisoners at this stage of interaction with their situation in prison are extremely vulnerable to a sudden unfavourable event or bad news. They may look for small ways in which to exercise choice, for instance in food preferences, but these tend to be decisions which are sealed within stasis, and are not (yet) part of movement toward change. Presentational tellers cling to their stories, in order to cope, but their stories may be too shallow to sustain them if they are
subject to extra stresses, such as bad news from home, bullying from other prisoners, or a move to another prison. Several of the prisoners in this category made serious and repeated attempts to self-harm prior to and/or following interview. And yet talking about their painful interaction with prison, this group were adamant that they did not want to die: what they wanted was care and attention that was not punitive, as well as the opportunity to talk at length to someone who would not be judgmental. They did not feel that this opportunity was present: they felt observed, but not cared for.

Self-harm is evidence of extreme vulnerability: out of the vast pool of vulnerability in prison, some prisoners go on to commit suicide, and Liebling (1992) points to the similarities of those who self injure and those who die from suicide. Additionally, some suicides, particularly amongst young prisoners, are as a result of acts of self-injury which misfire. About half of completed suicides in prison have harmed themselves previously (H.M. Inspectorate 1999). The ambiguity of self-harming behaviour, which may conceivably at some future point in time prove fatal, baffles mental health practitioners, prison officers and the self-harmers themselves. Clinicians do not agree about the appropriateness of classifying the wide range of self-damaging behaviours under a single classification or according to the strength of the individual's intention to kill himself.

Each of the prisoners producing this type of telling was identified as at risk of suicide and made the subject of 20525H documentation. In terms of suicide prevention policy, then, each prisoner in this group must so far be reckoned to be a success by virtue of still being alive. But in terms of the persistent self-harming behaviour of some of them, it was hard to see how this blunt weapon of assessment related to the nuances of their behaviour and states of mind. Additionally, it appeared to produce ambiguities in staff attitude. They frequently classified this group of prisoners as manipulative, and resented having to appear to take their behaviour seriously. There is a case for abandoning use of the worst-case assessment of 'at risk of suicide' for this type of prisoner, and classifying prisoners in ways which produce more recognition and understanding of their propensities for self-harm. It may even be counter-productive to label them as 'at risk of suicide' when they see themselves as both at risk of something quite different, and also wilfully misunderstood in existing assessment strategy.

**Telling about Waiting**

This type of account came from prisoners who had never been defined as 'at risk of suicide' and who were suggested as appropriate interview subjects for the contrasting group of 'those coping well with prison'. Some had been in prison many times, serving the equivalent of more than one life sentence over their life span. But others were young, with backgrounds in institutional care. The characteristic they all shared was passivity, and the failure to express autonomy in any significant way. Unlike prisoners engaged in a more active interaction with their predicament, they did not look for ways of exercising personal choice. In interview, their body language and what they had to say about their time in prison seemed to suggest that they were just waiting passively for the day of their release. T....... was one such coper. He had conformed to the expectations of institutions all his life. He found the children's home 'quite easy', the approved school 'pretty much the same', and prison 'a holiday camp, really'. He could not think of anything critical to say about prison except that the wages were low, and that because of staff shortages, he could never be certain of the unlocking time on his wing. What keeps me going is looking forward to the day I get out. I look forward to getting out, and my problems start the day I get out. You go out there, you do what you do, you know full well you're gonna get caught and you're gonna end up in prison. There's no hardship about prison, prison ain't hard. You know when you're getting out and you just work toward that reality. Any decision-making was difficult, and even when the cells were opened up, T.....often found himself unable to make the decision to wander out onto the landing to mingle with others. The most reiterated phrase in his narrative was 'I don't know, to be honest'. He thought long and hard but could not identify any 'low times' in prison. T....... did not engage in relationships in
prison, except of the most superficial kind. He slid passively through prison life, almost invisible. He caused no trouble and was therefore gratefully ignored by staff. It was only at the end of a two hour interview that T... sighed and inadvertently disclosed through his facial expression the extent of his despair. He was talking about whether it was better to share a cell or be in a single cell: Really and truthfully, you are better off being in with someone. I've done a 6, I've done a 5, I've done a 4, and you know that when the cell door bangs shut, if you want a game of cards, or a conversation, you can have it if you want. But if I'm on my own....well, the door's pushed shut, and I've gone like this, and sighed. (T...sighs: there is a long pause and his face crumples as he stares at his hands: for a moment he look utterly lost and alone, before his face resumes its customary bland mask). It can be like that, on occasions. Quite soon after this, his voice drops: There's one of two ways out, you can either walk out the door or you can try and kill yourself. I'm looking at 12 or 14 years, now. It has crossed my mind......my wife turned round and said to me a little while ago, if it got bad we'd do it together. Because if you look at it, what has she got and what have I got left? I'm 43 and she's 48. If you look at it logically, by the time I come out, my life's finished really. What can I say......my life has been H.M.P. from day one to the end, you might near enough say, because that's how much time I've spent in prison custody.

T..... exemplified the prisoner whom no risk assessment as presently practised would identify, unless that process involved an empathetic encounter in which he inadvertently betrayed his ultimate emptiness and desperation. The needs of such institutionalised prisoners would not be identified through official assessments hurriedly undertaken. They would cope with these through habit, providing bland and monosyllabic responses: it is as if they have been trained for the official assessments of prison all of their lives. T... had been in one institution or another since the age of 9, and yet he told me that he had found this interview encounter surprising, because "this is the first time I've ever spoken to someone like you, about myself, ever in my life". But one day T..., and others like him, may join the statistics of successful suicides with no previous psychiatric history, and no F2052SH documentation. Even if identified, these 'Waiting' prisoners present establishments with an enormous problem. To staff, they appear to have a stable and sustained form of coping, and they never express any need for attention, so they are not identifiable in terms of current suicide awareness strategy. In terms of suicide prevention, they present a greater challenge than would first appear. These institutionalised inmates, so prevalent in prison, would need a different kind of 'care' and attention from that presently offered, if they were to be helped toward sufficient autonomy to survive and stay outside of institutions. For all they do is wait quietly, not drawing attention to themselves, until they can bear the waiting no longer.

**Dialogic Telling**

Some of the prisoners in the 'at risk of suicide' group, and some of those allegedly coping well, produced a qualitatively distinct account best described as dialogic. This type of telling came from prisoners who had passed through a cycle of stages which involved some reflective internal dialogue and often some significant dialogue with others. They may have begun by blaming everyone else except themselves for their predicament, they may have felt overwhelming despair and hopelessness, but this had not led them to cling to a fixed and static story. At some point they had struggled with the reality of the prison place and, in many cases, accepted some measure of responsibility for what they had done and why they were there. Their accounts were full of fluidity and movement: they talked about coping with prison as a process, in which they sometimes made progress, sometimes got knocked back, and sometimes just had to endure. They became aware of the things which helped them, and they exercised autonomy in pursuing those things in order to keep alive their sense of self and purpose. With some, it was making sure they got a shower each day, or had a chat with another prisoner. Having exercised autonomy, they then pulled something from that experience, as G... showed:
I make sure I read a paper every day, and I try to get hold of business journals. Keeping in touch is important to me. I want to look out. People go inward here, rather than outward. But it's a time thing, isn't it? This is after all temporary, time will pass and they've got to let me out eventually.

I suppose, this sentence, I look upon prison not as a punishment but as something that's pulled me back from the brink. It's made me re-think, in a positive way. There's a lot of positive sides to it. I think that the last three years before I came in, I was in a self-destructive mood, not giving a shite because I didn't know if I would live through the next year.

But as well as the positive things, G.... was able to reflect on the negative aspects, and use these also as part of the process of recognising and monitoring change in the self: I think the negative aspects of prison are to do with the fact of becoming institutionalised. And you tend to live in an unreal world - what people would hang around with rapists, murderers and child molesters for choice! And I say this to their face! I mean, you can be talking to someone, and you suddenly think 'Hang on, he's got five life sentences for rape!

G..... did not dwell on the negativity of his fellow inmates: he was ready to talk and joke with them, whatever they had done, but remembering what they had done was his way of reminding himself who he was. His internal dialogue was rounded out by non-trivial, authentic dialogue with others:

We have lots of conversations in here about coping: people sometimes come up to me and ask me how to do it.

I think the expression that covers it is 'finding the mark'. We each of us have to find our mark. You know, that's a time thing, too. The past is gone and I must face the future. That's the reality principle again. You do your time. In your head.

It's the time thing again, dealing with here and now, and then you can face the future.

I think there's a cycle of stages to coping - everyone goes through the same stages but at different speeds and in different ways. There's the loss stage - 'I'm bereft, because I've lost so much, so many lost times and lost places, and all of that is outside'.

If you can move on from that, there is the enquiry stage - 'I've got to find out how the system works, and try to understand it'.

Then there follows the knowledge stage - 'now I know how the system works, I can try to manipulate it, and make it work for me. And I have to work with it'.

Talking to the right officer can save your life....there's Mr. B......, he spends hours with anyone who needs it - if anyone can move you on, it's him.

The cycle of coping described by the inmate G.... (above) begins with the loss stage, at which so many inmates get stuck, and to which they respond by producing the static type of account demonstrated earlier. It is hard to identify the spurs which work to move prisoners on from this stage, or the reasons a good coper can revert to the loss stage after years of coping. Nor is it easy to see why some prisoners remained immured in grief, whilst others, by their own admission, spent as little as a month at that static stage of grief and despair.

A recently convicted lifer, B.... was already turning expectantly to the future and looking for ways in which to express himself:

Yes, I've got a few plans. A lot of it depends on availability, I suppose. I've got some ideas and intentions but I can't do anything in the short-term. I'd like to get involved in music - I was a sound recordist till I came here.

B....’s telling of his learning process included dialogue with himself and with one particular senior officer, whose name cropped up repeatedly as someone prepared to set time aside for empathetic talk. Other inmates engaged in reflexive dialogue through reflection and/or writing:

When certain things happen I write in a journal, I write a little piece about it. If I've got to thinking about something one day, or something particular happened on the legal side, and how it's made me feel.....so I do, yes. I don't keep it religiously, sort of Dear Diary, but I think sometimes if you can write down what you're feeling, and what may have caused you to feel that way and stuff, you can kind of analyse it a bit later on. And maybe you think, when I react that way I could have reacted another way. So you can go back to it, and add that to your experience, I suppose (D.....).

This prisoner spoke about adding to his experience and knowledge, and his picture of himself was not fixed and static. At one point, I observed that he seemed to be a strong person, and he picked up on this, not in a dogmatic way, but in a reflective and dynamic way:
Well......I think I am. I try hard to be. Umm......it's alright to fail, but as long as you fail trying, then it's not a real failure. And if you keep trying, then you can turn a failure inside out, into a success. The trick is, never to give up. You can always make some changes.

For others, the dialogue was engaged in through reflection, and the process of actually talking to oneself, as if to an other:

Yeah, of course at times over the sixteen years, thoughts of suicide come into yer mind. And sometimes they just won't go away, you know? I'd talk to meself, 'Come on now M....., this won't do. Make yourself busy, man, read a book, and don't think this stuff.'

As he recounted this and similar crises, M... put his head in both hands and slapped his forehead, vividly conveying the image of a man trying to talk himself out of a course of action. During his worst suicidal period, the compulsive thoughts lasted for four days, and he held a razor to his wrist and stared at it for a very long time. Again, he reported a dialogue in which he talked himself round, reminding himself of his partner, his daughters, and his self-development during his life sentence. Again, the dialogue was re-enacted with the same body language, so that although he was recounting it cheerfully and informatively, the full flavour of the self in dialogue and struggle with itself was conveyed.

Another lifer, A...., described self-dialogue as occurring in the long bang-up: on the surface he was reading, playing games and music, and chatting to his cell-mate, whilst deep down, a process of reflection about personal change was taking place:

I think I'm thinking during all of this time, thinking about what's to come, and what me next prison will be like. It's not about when I come out, that's too far off. I think I'm changing, I was reckless and full of fun before all this, now I'd say I'm becoming more patient and more reliant on meself. I think it's change for the good, it depends on how you do it. It's up to you, how you want to change. I've just chosen that way. I knew I was going to be sentenced, never any doubt, so I thought I'd make the best of it.

Being presented with choices can prove more difficult than if there were none, and yet it is the coping with choices which provokes more change and development:

Having the 23 hour bang-up (on 'A' Wing) in some ways was better, for getting on with the thinking. Sometimes you want to be banged up, and get on with it. Then there's other times you don't want to be banged up. But you just have to take it how it comes.

Here (on 'C' Wing) you got the choice - you can either bang yourself up or be out. It can be harder, having the choice (B....)

This issue of choice is an important dimension in learning to cope with prison. It was evident that when prisoners were overwhelmed with grief and loss, if they exercised choice at all, it was initially in small ways, such as saving a boiled egg for later consumption. For dialogic tellers, richer ways of expressing autonomy evolved, and these expressed involvement in something ongoing. It was as if each was cultivating the self as a project, and taking actions which expanded the self even though the possibilities for expansion were so limited:

It's just a case of trying to get through: you set goals. Will I get a shower today? - the little things of life. You set a goal, and that keeps you going until the next day. Then you set bigger goals. Now I try to read a newspaper everyday, and I listen to the radio every night as well.

I learned from my last sentence that you had to do these sorts of thing to survive. And the whole reality is, that you've got to DO your sentence. It's not something you can run away from: it's not like life outside where you can run away. You're stuck, you're in it (G....).

Like the presentational tellers, this teller used repetition a lot in his narrative. But the extract above showed that these repetitions were not superficial: they disclose both acceptance of the here and now of prison ('you've got to do your sentence'), as well as an orientation toward movement and future time (e.g. as in the setting of goals). G... spoke from inside a story, but he is not sealed inside it in a static way. Despite being 'stuck' in a set of structures he cannot control, he was managing to insert movement and contingency into his interaction with prison, and his approach to his own coping was evolving and fluid:

Some people have stronger minds than others. Just as some people are physically stronger than others. And it's how you cope with it in your mind that determines how you get through your sentence. But, you know, it's actually learning (his emphasis) to cope with it in your mind, it's not automatic that you do or you don't and there's an end of it. I've had some pretty bad times.

So the dialogic teller can turn to the past and recover it in terms of personal history and identity, in such a way as both to achieve a connecting thread with what is going on in the present, and to practice and express personal agency. Despite the prison experience being productive of a grim view of future time, the dialogic teller is able to consider the future, and
make representations of it to himself. Faced with an almost overwhelming loss of control over personal time and space, the dialogic self can manage the most complex representations of time consciousness, which attempt to grasp at the unity of past, present and future, even though the present is so painful and casts shadows over the future. In doing this work, dialogic tellers are facing up to the realities of structural constraint but their identities are not being crushed: through reflection, dialogue and growth, autonomy is expressed in ways that nurture identity and self-esteem.

**Conclusion**

In a paper of this length, it is only possible to offer a glimpse of the range of interactions between the inmate self and the prison place. In summary, most spoke of the erosion of their social selves, and of how their energies were becoming concentrated upon self-survival. Despite their best efforts, however, their private selves were decaying also. All spoke of the grief, despair and loss of self induced by the shock of the structural constraints of prison life, and of the difficulty of re-asserting personal agency. "I just want someone to talk to" was a remark that echoed through the data like a mantra, both in prisoners who were desperate and prisoners who had "found their mark".

Such data is a powerful reminder to policy makers that prisoners are subjects, and their voices are a necessary part of the knowledge base on which suicide awareness and prevention policies must rest. Until the depth of suffering induced by the prison place is understood, and the threat to the basic personal autonomy of all prisoners, at different times and to differing degrees, is recognised, suicide prevention policies will always suffer from an awareness deficit.

Apart from these general implications, there are important specific ways in which the data presented relates to current policy with its emphasis on risk assessment. The types of telling which have been presented emphasise that it is unhelpful to use the blanket classification of 'at risk of suicide' presently embodied in policy: this masks the complexity and variability over time of each prisoner's interaction with prison. Vulnerability to suicide is neither clear-cut nor static, and the strategy of focusing on a few identified cases can reduce the attention which all prisoners require as they move in and out of coping stages. In addition, to categorise selected prisoners as 'vulnerable', thereby implicitly categorises the rest as invulnerable, and staff can feel an extra burden of failure when one of these completes suicide. The prisoners who were classified as 'telling about waiting' belonged to a group which would never receive attention through risk assessment, and yet their characteristics - passivity, institutionalisation and quiet conformity - are extremely common in the prison population, and make them vulnerable to eventual desperation[DM1]

Prisoners as tellers reveal both the dangerous levels of passivity, as well as the depth of awareness and insight that reside in the prison population, and the extraordinarily innovative ways in which some prisoners learn to cope. This resource, which should be shared with others, is for the most part neglected and untapped. Prisoners have the capacity not only to contribute to research about the phenomenon of prison suicide, but to form part of the policy responses to it.

All prisoners stressed the scarcity of talk in prison, and the value of talk in producing and sustaining a sense of personal agency. The establishment and growth of many Listener Schemes across the prison system is a valuable initiative in encouraging communication, but these schemes are hard to sustain in local prisons. Schemes can be changed, however, to suit particular conditions, if the commitment to do so is present and is matched by strong leadership and appropriate support or training. Opportunities are endless to expand care through talk: prisoners such as those quoted in this paper at the stage of dialogic telling could be deployed to help newcomers through reception and induction procedures, as mentors on the wings, in appraisal schemes and a host of other interactive roles[3]. Prisoner committees on the wings could prove a valuable tool in promoting social and ethical bonds between prisoners, and in encouraging the development of self-awareness amongst men who may never have been given such opportunities during familial or educational socialisation. The
dialogic tellers exemplify extraordinary personal growth, and have immense experience to impart. This is particularly true of those who had once been suicidal but have grown through this stage into a more positive interaction with prison. Opportunities for these prisoners to become a resource for others could be made explicit: currently much of their hard-won expertise is going to waste.

The expression of self and the expansion of talk within prisons is about changing the culture of all prisons, and H.M. Inspectorate (1999) makes it clear that there is a long way to go, pointing out that because staff are so used to prison, they can forget its immense impact upon incoming prisoners. Being operationally efficient need not rule out disciplined empathy as a significant tool in staff dealing with prisoners: on the one location where prisoners encountered it in this study, it was respected and valued, producing a culture in that particular location that was at least as satisfying to staff as to prisoners.

Individual prison establishments are now more at liberty than in the past to develop the expansion of care through talk, as governors are operating more direct management of their establishments. And yet prison audits show that empathy is often marginalised, and good initiatives are either not expanded or closed down Disciplined empathy must be a valued part of the operational efficiency of everyone working in prisons. Recognising and rewarding it in specific locations will enable its spread throughout the system as a whole, to the ultimate benefit of all who live and work in prisons.

Creating the conditions for an expansion of care through talk is part of the natural progression of making the problem of prison suicide a shared social concern, in the way in which H.M. Prison Service (1992) recommended. The revised 1994 strategy emphasises the shared responsibility of all staff in caring for the suicidal, and developing multi-disciplinary responses. The logic of risk assessment and risk management fit neatly with goals that are bureaucratic and managerial rather than multi-disciplinary. Such approaches do not necessarily address the inherent unpredictability of suicide, nor the widespread need for a more humane approach toward the necessary expression of feelings by all prisoners. The secretive suicide, the persistent self-harmer and the inmate occasionally engulfed with suicidal feelings for highly rational reasons will not be identified except by a strategy that is truly flexible, multi-disciplinary and attentive to the variation in states of mind over time. Only by the wider provision of consistent care and attention through talk can implementation of the strategy be effective in terms of meeting prisoners' needs.

Healthy prisons of the future (H.M. Inspectorate 1999) will recognise the crucial and proactive role that prisoners can play in suicide awareness and prevention strategies, particularly in local prisons where there is the greatest need. Prisoners have proved their worth in the context of prisoner befriending schemes, but there are very many other ways in which their knowledge and expertise can become part of future strategy. Qualitative research which draws on prisoner experience is important in order to strengthen the framework within which the current strategy can be developed and implemented.

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**Notes**

1 The F2052SH is the documentation developed following the setting up of the Suicide Awareness Support Unit in 1991 at Prison Service headquarters. It is used to identify a prisoner judged to be at an unacceptably high risk of suicide: the definitional problems surrounding its usage are immense and beyond the scope of this paper.

2 The location chosen reflects the fact that disproportionate numbers of suicides occur in local male prisons.

3 A seminar on ‘The Responsible Prisoner’ held at HMP High Down on 23rd November 1995 discussed these possibilities.
References


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