Prison Mental Health: Context is Crucial - A sociological exploration of male prisoners’ mental health and the provision of mental healthcare in a prison setting

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ABSTRACT
This thesis represents a sociological exploration of Her Majesty's Prison Service, male prisoners’ mental health, and the provision of National Health Service mental healthcare in a prison setting. This qualitative social science study is conducted in one prison establishment. The work is characterised as a policy and practice orientated exploratory case study. The study implements an inductive approach to the datum–theory relationship, a constructionist ontological position, and an interpretivist epistemological orientation. Semi-structured interviews are conducted in a male category B prison with healthcare centre staff (e.g. registered general nurse, registered mental health nurse, health care assistant, plus varied administration and clinical management staff), the secondary mental health team (psychologist, psychiatrist, community psychiatric nurse), prison governors, prison psychologists, primary-level mental health service users/prisoners, and secondary-level mental health service users/prisoners.

The subject of place is salient when deliberating the mental health of prisoners as a social group. The prison setting can fashion or exacerbate mental illness. In comparison to the general population, the prevalence of mental distress experienced by the prison population is exceedingly high. In order to consider issues that concern the mental health of prisoners (i.e. aetiology, prevalence, severity, interventions, and outcomes), the prison setting as a communal and procedural place requires attention. Therefore, this medical sociology study devotes attention to social and institutional arrangements that permeate the prison locale. As examples, these include prisoner–staff relations and prison regimes.

The prison environment is not conducive to good mental health, and is not often a useful catalyst for mental healthcare for myriad reasons. Notably, the custodial treatment setting is important here. The provision of mental healthcare and the pursuit of good mental health in the prison milieu are challenging. Thus, the prison-based exceedingly complex three-way relationship between culture, mental health, and mental healthcare is addressed. As, if one wishes to provide appropriate healthcare in a prison, one also has to understand something about those for whom the healthcare exists. Knowledge of the specific patient group is important. Therefore, prison healthcare ought to be increasingly fashioned (i.e. commissioned, provided, managed, and practiced) in accordance with the prison social environment, the institutional set-up, and the specific health requirements of patients/prisoners. The proposition is that context is crucial to the provision of wholly apt prison mental healthcare.

Study data are analysed thematically. Resultant themes include: the nature of clinician–patient/prisoner rapport; the working environment of the healthcare setting; the notions of healthcare provision and receipt in a custodial setting; patients'/prisoners' perspectives regarding prison mental health; aspects concerning prison existence and mental healthcare.
users’ experiences; prison staff mental health knowledge, roles, and responsibilities; prison service and healthcare services collaborative working.

The penal milieu in relation to an extensive variety of issues impacts mental health and mental healthcare. These range from the overarching ethos of imprisonment right through to individual interactions in the setting. To précis, mental healthcare provision and receipt experiences and environments are important for clinicians and patients/prisoners alike.