Self-Inflicted Deaths in Prison:
An Exploration of INQUEST’s Challenges to State Power

By Carly Speed

Abstract:

In a modern day society dominated by a culture of crime and punishment there has been an increased use of prisons which has resulted in the prison population in England and Wales reaching an all time high. This persistent use of prisons has resulted in an increasingly vulnerable population being in the care of the state. Statistics demonstrate that self-inflicted deaths in prisons is a persistent problem which raises serious questions regarding the state’s ability to adequately care for prisoners wellbeing. This is where the charity INQUEST has been instrumental in supporting and campaigning for the rights of these prisoners and their families. This dissertation examined the work of INQUEST including their main achievements and problems they face as a counter hegemonic organisation. To discover this information, a vast amount of data was gathered from various staff members at INQUEST, historically right through to the present day. The dissertation was able to develop a profound understanding of how a counter hegemonic organisation like INQUEST can successfully challenge the state’s dominant truths surrounding the topic of self-inflicted deaths in prison and develop alternative truths as a result of their dedicated and tireless work.

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1 Liverpool John Moores University, School of Humanities and Social Science
B.A. Honours in Criminology

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Introduction

Self-inflicted deaths in prison are a ‘persistent problem’ (Peay, 2002:761). This is confirmed by the 61 suicides in 2009, 58 in 2010 and 57 in 2011 (Ministry of Justice, 2012). These deaths demonstrate that prison is not the legitimate and safe place the state and prison service lead us to believe and contributes to the view that prisons are a ‘secret death penalty’ (Wilson, 2005:1). The state has responded to self-inflicted deaths in prison through the introduction of policies and initiatives which aim to prevent these deaths occurring. These include the Suicide Awareness Support Unit, the Assessment, Care in Custody and Teamwork strategy and first night centres (Scott and Codd, 2010:102). The success of such strategies has been highly debated with many viewing them as unsuccessful (Lloyd, 1990:53). Despite this, some strategies have been highlighted as beneficial but in need of improvement (HM Chief Inspectorate of Prisons for England and Wales, 1999:37). State responses and much research and literature associated with self-inflicted deaths in prison has adopted a positivist and medical approach. This approach individualises the problem of suicide and often remains unchallenged due to the power the state holds in determining what voices and views are heard in society particularly when these voices condemn the actions of the state and the prison service.

The emergence of INQUEST in 1981 signified the materialization of a critical perspective in relation to deaths in custody which challenged the existing dominant positivist approach. INQUEST provides a free advice service to bereaved people who have experienced controversial deaths and their work focuses particularly on deaths in custody. Their casework also informs research, parliamentary, campaigning and policy work (INQUEST, 2011).

The aim of this dissertation is to provide a critical account of the work of INQUEST including their challenges to policies and dominant discourses surrounding self-inflicted deaths in prison. The research also aims to uncover the difficulties and opposition INQUEST have faced. It is also of interest how INQUEST’s interventions have worked across age, gender and racial divisions and what issues have arisen as a result of the deaths of individuals from these groups. Also how INQUEST view the impact of their work and what they believe the future holds for them. In order to understand the main hegemonic interventions, achievements and successes of INQUEST, this research will gather the views of INQUEST’s staff along with two academics who have worked with INQUEST. This will result in alternative truths being generated from the research. Once the research is complete, the dissertation aims to have provided a comprehensive insight into the work of INQUEST including its past, present and future along with highlighting the continuous struggle pressure groups like INQUEST face. The research will also aim to provide realistic and implementable recommendations relating to policy and practice based upon the findings which could be used by INQUEST to inform their future work.

Chapter One of this dissertation is a literature review relating to self-inflicted deaths in prison. This literature review will present the justification and background knowledge of this research by providing a historical overview up to the present day of state responses and policies along with the formation of INQUEST. Chapter Two will specifically focus on INQUEST by discussing their emergence, workload and hegemonic interventions. This is in addition to areas of particular interest to them.
including young people, women and minority ethnic groups. Chapter Three will outline the theoretical and methodological approach to the research. This will justify the chosen theory(s) which will allow appropriate methodology to be utilised for this research. Chapter Four will discuss the methods used for this research. Here both positive and negative aspects of the chosen methods will be discussed along with why these chosen methods were the most appropriate for this research. The chosen methods can then be examined in relation to Chapter Three to ensure appropriate methods have been utilised which fit the theoretical and methodological aspects of the research. Within this methods chapter data analysis will be discussed in relation to this research. Ethical considerations of the research will also be examined. Here all ethical issues involved in the research and ways in which they were overcome will be explored. Due to the sensitivity of the research it was particularly important that ethical considerations were rigorous and thorough. Chapter Five will analyse the results of the research. Here the main themes of the research will be discussed arising from the data collected. Chapter Six will discuss the conclusions and recommendations of the research. This will consist of the main points learnt from the findings of this research and recommendations specifically drawn from these findings.

This dissertation will now move on to its literature review on self-inflicted deaths in prison.

**Chapter One: Self-inflicted Deaths in Prison and State Responses - A Literature Review.**

As the introduction to this dissertation indicated, this chapter will provide an in-depth and systematic review of the existing literature regarding self-inflicted deaths in prison in addition to examining state responses to these deaths.

Deaths in prison custody make for alarming reading. In 2009, 169 people died in prison custody and in 2010 this figure had jumped to 196 (Independent Advisory Panel on Deaths in Custody, 2011). In 2011 there were 57 self-inflicted deaths in prison down only two from the 59 that occurred during 2010 (Ministry of Justice, 2012). It has been widely acknowledged by criminologists and policy makers alike that reducing the number of self-inflicted deaths in prison requires a complex and sensitive response from all those involved (Prison Reform Trust, 1997:5). Despite this, self-inflicted deaths in prison is a highly debated subject with many differing views aiming to understand why in order to attempt to prevent future occurrence. Views of possible causes include overcrowding and an increase in the vulnerability of the prison population (Liebling, 2008:284). Furthermore, it has been argued that suicidal tendencies of some prisoners are not helped by the processing of prisoners ‘like a sausage machine’, out of necessity (Topp, 1991:410).

**Literature Review**

Research and policies related to self-inflicted deaths in prison have focused on a medical and psychiatric model (Medlicott, 2001:13). Relating to this positivist perspective, Roshier discusses the positivistic concepts of determinism, differentiation and pathology. Determinism sees actions as caused by biological, psychological or social factors and not concerned with rational choices.
Differentiation states that there is ‘something different’ in the biological or psychological make-up of those who kill themselves. Pathology states that there is something ‘wrong’ with them (Roshier, 1989:21). These three concepts reflect the views of the state on those who commit or attempt suicide in prison. This works to individualise the problem of suicide and blame those individuals who commit or attempt suicide. The state individualising this issue removes any focus on any apparent social problems which may be existent.

Topp’s study in 1979 calculated trends in the rate of self-inflicted deaths in prisons. This included examining lengths of sentences and the demographic background of prisoners who had committed suicide. Topp found that a large percentage of the sample had a history of psychiatric treatment and depression (Topp, 1979:25). Topp then went on to describe self-inflicted deaths as ‘a general display of attention seeking behaviour’ (Topp, 1979:26). This research influenced prison service policy and practice from the 1970s through to the 1990s which focused on a predominantly medical approach (Crighton, 2000:30). Dooley’s research in 1990 was influenced by Topp’s study. Dooley found that factors related to the prison situation, outside pressures and guilt for the offence were all contributing factors (Dooley, 1990:40). Like Topp, Dooley also identified the significance of mental health highlighting that a third of the suicides analysed had a history of psychiatric illness including depression and personality disorders (Dooley, 1990:42).

Liebling’s 1992 study highlighted the definitional problems that have hindered research into self-inflicted deaths (Mchugh and Towl, 1997, cited in Towl and Crighton, 1998:184). This study stated that the role of psychiatric illness had been over emphasised in research and that self-inflicted deaths were not primarily a psychiatric problem and actually required a multi-disciplinary approach. Liebling also identified the role of sociological, environmental and structural causes which should also be considered (Liebling, 2007:423). Over time the emphasis on the psychological and medical model was beginning to fade. The Tumin report further diminished this emphasis by stating that the majority of self-inflicted deaths in prison were not committed by those deemed as mentally disordered and that suicide was a social problem, not exclusively a medical one (Tumin, 1990:14).

Critical Perspectives

A critical approach was adopted by Coggan and Walker’s who drew attention to the growing issue of deaths in UK prisons in addition to posing additional questions themselves so that adequate and effective explanations and actions could be adopted in the UK (Coggan and Walker, 1982:11). The work of Chadwick and Scraton in 1987 also demonstrated a critical view of the coroner’s courts following self-inflicted deaths in prison. They highlighted the low priority given to appropriate reforms which led to inadequate frameworks for dealing with self-inflicted deaths. The system worked against the interests of prisoners’ families through official secrecy, unfair procedures at inquests and the ‘discriminatory use of permissive powers by coroners’ (Scraton and Chadwick, 1987:167).

Research by Gampell and Harber also adopted a critical approach with a particular focus on prisoners’ families and found that depoliticisation takes place from official sources who work to individualize the problems surrounding prisoners’ families rather than admit there are social problems. Therefore when prisoners and their
families challenge this, they are viewed as a nuisance and a threat to security (Gampell and Harber, 1999:95). The distinct dissatisfaction with procedures for handling self-inflicted deaths in prison and the reluctance of the state to act appropriately led to the formation of INQUEST in 1981 (Scraton and Chadwick, 1987:167). INQUEST, whose emergence and work will be discussed in Chapter Two, were the topic of Ryan’s 1995 book *Lobbying From Below*. Ryan continued with the critical approach adopted by Chadwick and Scraton and defended the need for such a radical group in addition to examining race and gender issues that have arisen from deaths in prison (Ryan, 1995:125). This critical approach has been influential, despite opposition, and was adopted by Medlicott in 2001 whose research discussed the inadequacies of positivist views of the prison health care system where self harming is often categorised as attention-seeking and manipulative (Medlicott, 2001:20). Firstly, Medlicott discussed mental illness and stated that there were significant definitional problems surrounding the psychological, psychiatric and medical disorders that were often associated with suicide. These definitional problems were compounded by the criteria for diagnosing depression which often failed to distinguish between any already existent depression and the depression which developed as a result of imprisonment (Medlicott, 2001:14). Medlicott then goes on to discuss the reception procedures for new prisoners, especially prevalent due to the high numbers of prisoners who commit suicide early into their sentence. She states that despite the importance that is placed upon risk assessment strategies in theory, in practice identifying prisoners’ risk of suicide at reception is not successful and often rushed (Medlicott, 2001:17). It is important to establish as soon as possible whether a prisoner has a psychiatric history as it is crucial to risk assessment. However, what is deemed ‘previous psychiatric history’ is a problematic concept and often open to interpretation and definitional problems (Medlicott, 2001:15). Due to these issues and the emphasis on suicide being a predominantly individual problem, Medlicott stated that suicide should be considered a social problem where those who commit suicide respond to ‘a set of fluctuating capacities which wax and wane in relation to time, place and social relations’ (Medlicott, 2001:13).

However, regardless of prisoners past psychiatric history and their characteristics, prisoners upon arrival at a prison are extremely vulnerable due to undergoing a process of ‘mortification of the self’. This means that inmates are subjected to degrading treatment which removes any trace of their identity including the removal of their personal clothing and possessions and being given an I.D number. These work to separate them from their former life (Goffman, 1961:16).

**State Responses and Policies**

The 1970s and 1980s saw a growing political, public and media interest into the increasing problem of self-inflicted deaths in prisons (McHugh and Snow, 2000:7). A Home Office report from 1984 highlighted the importance of the role of medical officers in identifying suicidal prisoners as well as the importance of improving medical regimes including the identification and management of those prisoners who are at high risk of suicide. In addition, the report detailed the importance of staff training in relation to suicide prevention along with the improvements needed in the investigation of suicides (Home Office, 1984:64). This report influenced the introduction of the Working Group on Suicide Prevention which reported in 1986. This resulted in the issuing of a circular instruction detailing medical assessment,
support for prisoners, management of suicide prevention and the forming of suicide prevention management groups in all prisons. These recommendations highlighted the need to identify the ‘onset and development’ of suicide rather than identifying a ‘type’ of prisoner who may commit suicide (McHugh and Snow, 2000:9). This took responsibility away from medical officers and focused more on a multi-disciplinary approach.

Nineteen Ninety saw the first full thematic review by Her Majesty’s Chief Inspectorate of Prisons (The Tumin Report) which made 123 recommendations. The report highlighted the importance of not focusing on self-inflicted deaths as a medical problem along with stating that current prison service policy did not understand the significance of the environment in which prisoners and staff function. The report also demonstrated a current lack of focus on ways in which prisoners could overcome anxiety and stress (HM Chief Inspectorate of Prisons, 1990:7).

The aftermath of the Tumin report resulted in a complete re-examination of existing strategies of suicide prevention. The Suicide Awareness Support Unit was established with the aim of supporting prisoners and ensuring good practice within the prison service. In 1994 the Caring for the Suicidal in Custody strategy was implemented. This strategy gave all staff the responsibility to identify and support suicidal prisoners through primary and special care and ensuring a safe and positive environment for all. Special care relates to those prisoners who are suicidal and works specifically to provide care and support for them. This strategy introduced the F2052SH form (self-harm at risk). This form could be ‘activated’ by any member of staff who had concerns regarding a prisoner. It also encouraged better communication between staff. This form was part of the modular guidance pack on Caring for the Suicidal in Custody. However implementation of these forms has been described as ‘patchy’ (Medlicott, 2001:19). Also included in this guidance pack was prison service policy on suicides, the role of Suicide Awareness Teams which will be discussed below and the role of the Samaritans and listener schemes. Listeners are prisoners trained and supported by the Samaritans and can work to prevent self harm and suicide (Hancock and Graham, 2008:155). Listener schemes have been recognised as hard to implement in local and remand prisons due to the high turnover of prisoners (Prison Reform Trust, 1997:7). This strategy focused on awareness rather than prevention and the prison ‘Suicide Prevention Management Group’ was renamed ‘Suicide Awareness Teams’ to reflect this (McHugh and Snow, 2000:16).

The report Suicide is Everyone’s Concern, published in 1999, involved a thorough review of prison suicide prevention procedures. This report made a number of recommendations including improving suicide strategy in local prisons and for women along with the need to improve Suicide Awareness Teams (HM Chief Inspectorate of Prisons for England and Wales, 1999:37). In 2001, the prison service’s Safer Custody Group proposed a proactive approach encouraging staff-prisoner relationships along with improved identification and care of suicidal prisoners (Safer Custody Group, 2001:3). This formed part of the Safer Custody Programme which worked to raise the standards of prison care. This was followed in 2002 by a new prison service order called Suicide and Self-harm Prevention which adopted a holistic approach in reducing self-inflicted deaths in prisons. In 2004, the Assessment, Care in Custody and Teamwork Strategy (ACCT) was introduced. The aim of this strategy was to work together to ensure a safe environment where those in need of assistance could gain access to it (HM Prison Service Safer Custody
Group, 2004:1). ACCT has three levels and allows any member of staff to activate an ACCT plan. This is part of the overall plan to identify the warning signs of suicide from the first instance. The ACCT introduced safer cells which in theory minimised the chances of prisoners committing suicide and ensured they were safe within their cells (HM Prison Service, 2007:13). However the idea of ‘safe custody’ was criticised by Goldson and Coles who stated that it was an ‘oxymoron’ as there is little evidence to demonstrate that policies and procedures in place designed to produce a safe environment have succeeded (Goldson and Coles, 2005:xviii). ACCT has also been criticised for its poor training and discrepancies between what it aimed to achieve and what it actually did (Rickford and Edgar, 2005:72). In addition, ACCT received further criticism for its focus on identifying ‘risk’ when in reality only around one quarter of those who do commit suicide were deemed ‘at risk’ (Liebling, 2007:426). Therefore all prisoners should be considered to be at risk. More recently a study published in 2011 suggested that on entering prison all prisoners should be deemed ‘patients’ and become the responsibility of the prison healthcare system (NCISH, 2011:91).

The extent to which these differing suicide prevention measures have been effective has been criticised by Wilson who found that these strategies did acknowledge the problem self-inflicted deaths in prison but were actually making little impact (Wilson, 2005:26). Others have identified problems with these preventative measures especially as suicide rates were still high (Colbourne, 1999:50). Morgan stated that a high proportion of prison suicides were not predictable therefore the solution was to enhance the quality of life for all prisoners (Morgan, 1997:1183). This theory is supported by Smith who argued that ‘many of those who succeed in killing themselves have never been thought to be suicidal’ (Smith, 1984:210). This point links to the research previously mentioned by Liebling explaining why ACCT can be criticised for its focus on ‘risk’.

First night centres have been praised as they aim to reduce stress and anxiety (Hancock and Graham, 2008:93). These centres work to prevent suicide especially as prisoners are most likely to commit suicide soon into their sentence (Smith, 1984:208). However there are often insufficient places in these first night centres (Howard League, 2005:8).

Liebling’s 1992 study *Suicides in Prison* highlighted several limitations of prison suicide preventative measures including a lack of communication prohibiting the effective implementation of prevention measures. Furthermore the emphasis placed on risk assessment resulted in prison staff feeling helpless and unqualified (Liebling, 1992:240). Liebling also conducted a ‘ten years on’ study on prison suicide and found that improvements had been made such as the expansion of Suicide Awareness Support Units and their reincarceration as the Safer Custody Group (Liebling, 2006, 236). However, there were still too many negative issues such as a lack of knowledge regarding psychological survival in prison. Research by Kelly and Kennedy also highlighted the importance of improving mental health services (Kelly and Kennedy, 2005:354).

This literature review has highlighted that self-inflicted deaths in prison is a highly debated subject. Preventative measures have been amended and replaced frequently which demonstrates that there is still a significant amount to be done until preventative measures are deemed to be effective on a wider scale. The conflicts of
opinion regarding self-inflicted deaths in prison means that there are still significant gaps in knowledge surrounding this topic.

This chapter has detailed the background and timeline of self-inflicted deaths in prison and their prevention in England and Wales. The next chapter will discuss the emergence and interventions of INQUEST and the role of the organisation in the debates surrounding self-inflicted deaths in prison.

**Chapter 2: Challenging State Power: The Work of INQUEST**

Chapter One briefly introduced the charity INQUEST. This chapter will discuss in greater depth the emergence of INQUEST, its role and interventions along with the relationship between INQUEST and the state.

**The Origins of INQUEST**

INQUEST was founded in 1981 during a period in time where there was a growing distrust towards official agencies including the police. Much of this distrust stemmed from events such as the death of Jimmy Kelly in 1979, the unlawful killing of Barry Prosser in Winson Green prison and the death of Blair Peach at the hands of police officers (Coggan and Walker, 1982:11). The dissatisfaction with procedures for dealing with deaths in custody and the failure of the state’s response to these deaths led to the formation of INQUEST with Barry Prosser’s wife a founding member (Scraton and Chadwick, 1986:169). When INQUEST was founded there were other groups interested in deaths in custody including the Preservation of the Rights of Prisoners and Radical Alternatives to Prison however INQUEST focused more on suicide- a reflection of the growing number of self-inflicted deaths in prison that were occurring (Ryan, 1996:63). INQUEST’s emergence demonstrated the prominence of the broader critical criminological perspective which emerged at this time which challenged the ‘negative ideological construction of those who have died in the custody of the state’ (Sim, 2009:7) and adopted a ‘politics of support’ for prisoners and their families (Sim, Scraton and Gordon, 1987:6).

**The Work of INQUEST**

INQUEST offers specialist advice not only to bereaved people but to support agencies, the media and the general public. This is in addition to campaigning for the better treatment of prisoners (INQUEST, 2010). As INQUEST work so closely with families they are often the first to uncover trends, develop policy proposals and lobby for changes in the inquest and investigation process including the work of coroners. Initially, INQUEST were often ‘vilified’ for raising concerns regarding the treatment of families however many of these concerns are now regarded as legitimate (Shaw and Coles, 2007:6).

INQUEST and other grass root organisations are ‘driven from below’ (Ryan, 1996:25) and therefore challenge state policies surrounding self-inflicted deaths. These groups enabled a ‘criminology from below’ to emerge (Sim, 2006:3) which demonstrates an ‘insurrection of subjugated knowledge’ (Foucault, 2003:7). This means that the subjugated knowledge of prisoners’ families were granted a voice in a
society where their views often go unheard. INQUEST have adopted a critical standpoint and challenged dominant discourses surrounding prison suicides and attempted suicides. They have done this by opposing the positivistic approach surrounding self-inflicted deaths along with challenging policies and inquest procedures which were discussed in Chapter One. Furthermore, INQUEST work to influence changes which have transformative capabilities such as attempting to diminish the stigma associated with prisoners’ families (Goffman, 1963:30).

INQUEST has a unique body of knowledge from which to comment on deaths in custody and the issues these deaths raise (Shaw and Coles, 2007:122). Therefore, those involved in the organisation were in an ideal position to provide this research with a unique and valuable insight into pressure groups related to prison suicide as Chapter Five will demonstrate.

One of INQUEST’s main achievements was in 2007 when they showed their support for an amendment to the Corporate Manslaughter and Corporate Homicide Bill to ensure that deaths in custody were included within the bill (JUSTICE, Prison Reform Trust, Liberty, INQUEST, 2007:3). Furthermore, a major achievement by INQUEST involved the campaigning they did after the deaths of Adam Rickwood and Gareth Myatt which generated public and parliamentary concern over children’s deaths in custody which will be discussed later in this chapter (INQUEST, 2011). Another significant achievement of INQUEST was the publication of Unlocking the Truth which for the first time granted a voice to the experiences of families affected by a death in custody by speaking directly to them regarding their experiences. This research aimed to inform government, policy makers and both official and voluntary organisations that have the capability to improve and develop practice for all those who work with bereaved families (Shaw and Coles, 2007:2). The key proposals from Unlocking the Truth included the improvement of processes following the conclusion of investigations and inquests along with establishing a standing commission on custodial deaths. Despite Unlocking the Truth contributing significantly to knowledge regarding prisoners’ families there is still significant gaps in knowledge regarding self-inflicted deaths in prisons with specific focus on prisoners’ families.

INQUEST have raised concerns regarding the deaths in custody of women, black people and youths which has significantly widened their agenda. Here we will examine each of these.

**Women**

The 1980s saw women’s imprisonment emerge as a significant issue (Scranton and Chadwick, 1986: 131). The female prison population almost doubled between 1997 and 2006 and there has been a significant increase in the number of self-inflicted deaths in women’s prisons (Berman, 2012:6). However, traditionally, little is known about the deaths of women in prison including the circumstances surrounding their deaths. Therefore it is apparent that even in death, women are invisible (INQUEST Annual Report 1982-3 cited in Ryan, 1996:132). INQUEST is closely involved with several groups, particularly Women in Prison, who work to protect the rights of women in custody. INQUEST has also taken an active interest in the deaths of women in prison by critically examining and questioning the issues raised by their deaths. The case of Sarah Brewer who died in Pucklechurch remand centre
highlights the problems surrounding women’s deaths in custody. Sarah felt unwell but was twice refused access to a doctor and later died. At Sarah’s inquest, key witnesses were not called and disparities in evidence were ignored by the coroner (Ryan, 1996:132). INQUEST complained regarding the inadequacies of this case and worked with Women in Prison to secure a judicial review. Another death was that of Christine Scott in 1982 in Holloway’s C1 psychiatric wing. She was unable to cope in Holloway and caused herself such self-injury she died of a subdural haemorrhage. The quality of supervision and health care at Holloway’s C1 ward was brought into serious question. Women in Prison led a campaign supported by INQUEST which campaigned for the improvement or closure of the C1 ward.

Sandler and Cole identify a number of common characteristics of women who die in prison. These include being white, young, have a history of drug misuse, are on remand or at the early stages of custody and often have already been deemed at risk of suicide (Sandler and Coles, 2008:16). There is also significant staff shortages, a lack of appropriate training and knowledge of staff and poor implementation of policies and procedures in women’s prisons (Sandler and Coles, 2008:79). In addition to the problem of racist bullying existent women’s prisons (Sandler and Coles, 2008:69). Sandler and Cole state that continuing to imprison women when there is such levels of knowledge regarding the common characteristics of women who commit suicide and the problems women’s prisons face is ‘a failure to protect them from a life-threatening situation’ (Sandler and Coles, 2008:25).

Overall women are treated differently within the criminal justice. Examples of this include inadequate inquests, poor support, supervision and poor medical care. INQUEST campaign against these inadequacies and their involvement has contributed to changes surrounding repressive regimes and neglect of women’s health care.

**Race**

The Prins report highlighted the institutionalised racism in the prison health care system. Black people are more likely to be diagnosed with schizophrenia, more likely to be detained in psychiatric hospitals and received higher doses of medication. This is in addition to being less likely to receive counselling (Ryan, 1996:127).

INQUEST is particularly concerned with the large amount of black deaths involved in controversial or suspicious circumstances. INQUEST along with MIND and the Preservation of the Rights of Prisoners highlighted several inquests that led to official investigations and reports. Firstly, the Jamie Stewart Campaign. This campaign wanted answers surrounding the arrest and subsequent death of this young black man. The police attempted to justify the stop, search and arrest of Jamie by stating that he had cocaine in his stomach. Another case which INQUEST had knowledge of was the death of Alton Manning at HMP Blakenhurst in 1995. Alton died after being thrown to the floor, held by his head and legs and carried down the corridor in a neck hold. An inquest jury found that Alton had been unlawfully killed yet no charges were ever brought against the officers (INQUEST, 1995 in Scott and Codd, 2010:71).

**Young People**
There are over twelve thousand people under the age of 21 in prison in England and Wales (Prison Reform Trust, 2011:37). This reflects the extensive use of penal custody for young people in England and Wales (Goldson and Coles, 2005:xi). There is a high rate of self harm and suicide amongst young prisoners in the United Kingdom. Between 1988 and 1998, 99 young people under the age of 21 killed themselves in English and Welsh prisons (Russell, 1999:38). These high rates of suicide raise serious questions regarding the care of young people in custody (Goldson and Muncie, 2008:42). This is to the extent that Goldson and Coles state that the treatment of young people in custody often equates to ‘institutional child abuse’ (Goldson and Coles, 2005:52).

INQUEST’s attention was initially drawn to the problems of young people’s deaths in custody through Phil Scraton who highlighted the issues at Scotland’s Glenochil prison. Between 1980-1985 there were seven deaths at Glenochil. Scraton and Chadwick challenged the working party established by the state which believed that these five deaths were unconnected (Ryan, 1996:79). The suicide of Philip Knight in 1990 at Swansea Prison led to INQUEST publicly stating that the prison authorities were responsible for Philip’s death (Ryan, 1996:82). Furthermore, the death of 16 year-old Joseph Scholes who hanged himself nine days into a two year prison sentence in 2004. INQUEST supported Joseph’s mother in securing support from child welfare and penal reform groups in demanding answers regarding her son’s death in addition to campaigning for an independent public inquiry as his death had raised serious questions regarding the care of young people in custody (INQUEST, 2003:2).

Adam Rickwood who hanged himself in 2004 was being held 150 miles from his home and frequently expressed his upset at being so far away from his family. Hours before Adam’s death he was restrained using the now outlawed ‘nose distraction’ technique. The force used to restrain Adam was later ruled as unlawful. INQUEST has worked with the family of Adam Rickwood since his death and campaigned for a public inquiry into the treatment of children within the juvenile justice system (INQUEST, 2007:4)

From examining these cases it is apparent that INQUEST have persistently raised concerns regarding the deaths of young people in custody and the experiences of their families during the investigation and inquest. But despite this young people’s deaths in custody has been a neglected topic (Goldson and Coles, 2005:3).

**The Impact of INQUEST**

INQUEST are unique in the fact that they have not been co-opted by the state unlike many other organisations who often end up doing so which results in them effectively becoming a state organisation and using their terminology within their work. INQUEST have steered away from this and remained an independent organisation. However this position has not rendered INQUEST powerless (Ryan, 1996:170). Over recent years INQUEST have become so prominent and respected that they have had the power to choose to work with politicians if they wish to do so. This was demonstrated in 2011 when INQUEST worked to challenge the government’s plans to dismantle the Chief Coroner’s Office (INQUEST, 2011:3). This decision to stand alone has seen the state attempt to ‘define out’ INQUEST. By
failing to co-opt with the state INQUEST appear unwilling to conform and for that reason the state have attempted to isolate them from their potential audience with the aim of leading people to believe that the actions of INQUEST are not in the public interest and that INQUEST are ‘beyond the pale’ (Mathiesen, 1980:289). However, as will be discussed in Chapter Three, the numerous positive contributions INQUEST have made to the understanding of deaths in custody has meant that they have not been entirely defined out due to the positive impact of their work.

It is undeniable that INQUEST has been vital in changing attitudes towards those who die in custody. This is demonstrated by Ryan who states that before the emergence of INQUEST there was little concern for the treatment of those held in state custody (Ryan, 1996:160). However, as positive as this may seem, only three years after their emergence INQUEST stated that the pressures on the prison system would need to be lessened before suicide prevention measures could work effectively (Ryan, 1996:64). However, thirty years on, it is debatable whether INQUEST’s views on this point have been effectively acknowledged.

It is apparent that INQUEST’s work has been invaluable to prisoners’ families and they have been a great source of support to them. This is especially prevalent as prisoners’ families are traditionally viewed as the ‘forgotten victims’ of imprisonment (Matthews, 1989, in Light and Campbell, 2006:298). There has been increased recognition of the need to support prisoners’ families (Codd, 2007:255). Despite this they often experience a lack of basic information and support from official sources (Gampell and Harber, 1999:2). It is for that reason that the majority of support and assistance for prisoners’ families has come from not-for-profit organisations such as INQUEST (Mills and Codd, 2007:687).

INQUEST, assisted by The Royal British Legion, Cruse, Disaster Action, Victim Support and The Samaritans, stopped the government from abolishing the office of the Chief Coroner. As noted earlier this can be seen as one of INQUEST’s most recent achievements along with INQUEST’S work on the amendment to the Corporate Manslaughter and Corporate Homicide Bill to ensure that deaths in custody were included within the bill. Despite facing opposition, INQUEST has become a prominent and respected group which means they are in an ideal position for gathering an in-depth understanding of prisoners and the circumstances surrounding them.

This chapter has discussed the emergence and background of INQUEST. This is in addition to examining their caseload including their work with women, black people and youths. The overall impact of INQUEST concluded this chapter which allowed the examination of how INQUEST has grown as an organisation up to the present day. The next chapter will detail the theoretical and methodological approach to this research.
Chapter Three: INQUEST and Challenges to State Power: Theoretical and Methodological Issues

The previous chapters of this dissertation have discussed the background, significance and statistics of self-inflicted deaths in prison in addition to detailing the emergence and work of INQUEST. This chapter will move on to discuss the theoretical and methodological approach of this dissertation. This will include drawing specifically on a number of theoretical concepts to analyse INQUEST’s relationship with the state. Furthermore, the chapter will also discuss how the methodological approach of this research compares and contrasts with other research concerning self-inflicted deaths in prison.

Neo-Marxism and INQUEST

Marxist theory states that power is concentrated in the state and this power is under the control of the capitalist class (Simon, 1982:72). This leads to state institutions working towards the maintenance and reproduction of unequal social systems. Neo-Marxism emphasises the contradictory and contested nature of the state’s power in addition to viewing the state as a site of struggle (Coleman, Sim, Tombs and Whyte, 2009:15). Neo-Marxist thought is greatly influenced by Gramsci who questioned the traditional Marxist view of the state and believed that the state could be challenged by turning ‘common sense’ into ‘good sense’ (Gramsci, 1988:142) through ‘patient and obstinate perseverance’ (Gramsci, 1980:336). This can be shown by the work of INQUEST who have contested the states ‘common sense’ regarding deaths in custody and tirelessly working to assist families whilst completing research, parliamentary, campaigning and policy work. This neo-Marxist perspective also helps to understand the role of INQUEST in challenging state injustice and it’s undermining of official policy responses regarding self-inflicted deaths in prison.

This contestation of state power by counter hegemonic organisations such as INQUEST has worked to secure changes in policy and laws surrounding self-inflicted deaths in prison. Despite the difficulties they face, INQUEST have made a significant impact including turning numerous individual cases regarding self-inflicted deaths in prison into broader issues which has influenced how suicide prevention is now practised in prisons (Ryan, 1996:170). Dominant state ‘truths’ work to silence the voices of radical groups such as INQUEST (Ryan and Sim, 2007:708). However, INQUEST’s disputing of state power has also contested the state’s claims to ‘truth’ regarding deaths in custody which in turn has allowed alternative truths to emerge (Coleman, Sim, Tombs and Whyte, 2009:15).

INQUEST’s hegemonic interventions, mentioned in the literature review, are ‘driven from below’ (Ryan, 1996:25) and have questioned state responses and definitions and therefore forced the state to respond more effectively to self-inflicted deaths in prisons. This challenge to the state has derived from a ‘criminology from below’ (Sim, 2006:3) and has resulted in an ‘insurrection of subjugated knowledge’ (Foucault, 2003:7). Subjugated knowledge is knowledge which has been disqualified as ‘hierarchically inferior’ (Foucault, 2003:7). This means that through INQUEST, the subjugated knowledge of prisoners and their families, along with pressure groups, are granted a voice in society where the state does not hold absolute power (Sim, Scraton and Gordon, 1987:4).
This ‘insurrection of subjugated knowledge’ demonstrates how INQUEST have challenged state practices and provided support for the powerless through viewing the state as a site of struggle, contestation and conflict. This has allowed marginalised views to be heard (Alasuutari, 1998:15). Therefore, despite the constraints that the state have attempted to place on INQUEST they have successfully negotiated state power and made a substantial impact with their critical viewpoint.

Another significant way in which INQUEST has challenged state defined truths on deaths in custody is through their own publication *Unlocking the Truth*. As this book was written by the two co-directors of INQUEST it evidently assumed a critical approach to the work of inquests and investigation procedures following a death in custody. It also gathered the views of families directly affected by deaths in custody. This allowed the subjugated voices of prisoners’ families to be heard (Shaw and Coles, 2007:2) which in turn created alternative truths surrounding the deaths of those in prison custody.

**State Hegemony and INQUEST**

Gramsci identified the ‘integral state’ as consisting of the coercive power of the state and the hegemonic leadership of civil society (Bocock, 1986:28). The state maintaining hegemony involves a ‘constant struggle against a multitude of resistances that are in constant need of reassertion as hegemonic ‘victories’ are never final due to subordinate groups resisting total domination by the state’ (Fiske, 1987:41). The denial of this hegemony is often felt through confrontation by ‘major and minor individual and collective acts of subversion, refusals and confrontations’ (Sim, 2009:157). Therefore, with direct relation to this research, as much as the state seeks hegemonic domination, this domination is never completely achieved (Ryan and Sim, 2007:708). An example of INQUEST contesting the state’s hegemony on the subject of self-inflicted deaths is the way in which they challenge the negative ideological construction of those who have died in state custody and helped to bring about policy changes in this area (Sim, 2009:7). Furthermore, INQUEST have formed alliances with other counter hegemonic organisations such as Women in Prison to challenge the state’s hegemony. This alliance of social movements has worked to dismantle the system of ‘fortresses and earthworks’ which support the hegemony of the state (Simon, 1982:74). However, attempting to gain hegemony involves creating an ‘entirely new universe of ideas and values’ which means that for counter hegemonic groups such as INQUEST, gaining hegemony is a struggle in the face of state power (Boggs, 1976:43).

Despite the resistance they face, the state attempts to gain domination and hegemony through ‘defining in’ and ‘defining out’. The state ‘defines in’ and co-opts organisations who agree with its policies and ‘define out’ those who contest or disagree with the state’s actions, policies and practices. Those who disagree with the state are viewed as ‘irresponsible, non-conformists’ (Ryan and Sim, 2007:708). The more the state is able to ‘define in’ the more reasonable they appear if they ‘define out’ anybody unwilling to conform (Mathiesen, 1980:286). Ryan draws links with Grant’s classification of insider and outsider groups and identifies INQUEST as being in the ‘ideological outsider’ group whose ideas are in contrast with the current political system (Ryan, 1996:170). INQUEST are unique in the fact that they have
successfully avoided state co-optation (Sim, 2004:48). This has led to INQUEST being partially defined out due to their unwillingness to conform to state ideologies and dominant truths surrounding self-inflicted deaths in prison (Mathiesen, 1980:288). However, INQUEST have not been completely ‘defined out’ by the state due to the prominent and positive impact and interventions they have made, much of which was detailed in Chapter Two and includes their work with bereaved families, extensive research and campaigning and their wide-ranging work across a number of lobbies including deaths in youth custody, psychiatric hospitals and at work (Ryan, 1996:51).

**Abolitionism and INQUEST**

An abolitionist perspective can also be viewed as an attempt to replace ‘common sense’ with ‘good sense’ (Sim, 2009:12). Abolitionism views prisons as reinforcing the dominant ideological constructions of crime and reproducing social divisions whilst distracting attention away from the crimes of the powerful (Sim, 2009:2). With specific reference to the care of prisoners, abolitionists argue that the criminal justice system does little to protect individuals in its care (Sim, 2009:3). Therefore it is apparent that INQUEST have also adopted this viewpoint as they believe that the care of those who are imprisoned is often substandard as they are frequently viewed as ‘less eligible subjects’ (Sim, 2009:61).

Abolitionists build their work on ‘negative reforms’ and INQUEST can be seen as pursuing these negative reforms as they have the ability to challenge the state (Sim, 2009:3) and undermine the power and legitimacy of the prison system (Mathiesen, 2004:20). This is opposed to ‘positive’ reforms which further legitimize the power that the state possesses (Cavadino, Crow and Dignan, 2002:209). This further compounds the state’s view that INQUEST is a threat to their dominant knowledge regarding self-inflicted deaths in prison.

INQUEST have illustrated how abolitionist perspectives can influence and inform radical practice (Ryan and Sim, 2007:709). Furthermore, INQUEST has provided an ‘abolitionist alternative’ for analysing and responding to deaths in custody (Davis, 2003:105). The impact of this abolitionist perspective has also impacted hegemonically on other penal reform groups and influenced their penal policy with regards to adopting a more critical approach (Sim, 2009:12).

**Methodological Approach**

Methodologically, as this research has already established, a positivistic approach has dominated knowledge regarding self-inflicted deaths in prison (Medlicott, 2001:33). As Chapter One illustrated, this approach significantly influenced prison service policy and practice from the 1970s through to the 1990s (Crighton, 2000:30). The state’s use of this positivistic discourse led to social injustice and inequality (Friedrichs, 2009:210). The state also utilised its power to define suicidal prisoners as ‘mad’ and personally culpable for their own death (Topp, 1979:26).

A critical perspective which has emerged surrounding self-inflicted deaths in prison critiques these dominant medical and psychological perspectives. As discussed in Chapter One, this critical approach was adopted by Coggan and Walker in their 1982 work which provided an in-depth account of deaths in British prisons. Their work also questioned the dominant discourses surrounding deaths in custody in addition to
providing answers to existing questions and posing additional questions themselves so that adequate and effective explanations and actions could be implemented (Coggan and Walker, 1982:11). Chadwick and Scraton also adopted this critical approach to express their concerns with inadequacies in the coroner’s court for handling deaths in custody. Their work critically highlighted the reluctance of the state to ‘make their regimes and practices properly accountable’ (Chadwick and Scraton, 1987:179). Furthermore, a critical approach argues that the marginalization and criminalization of those who attempt and commit suicide works to protect and reinforce the political and social interests of the state and prison service (Chadwick and Scraton, 2009:99). This marginalization can be seen as linking with diminished civil rights of vulnerable prisoners (Chadwick and Scraton, 1987:233). A critical approach demonstrates an acknowledgement of social harm which would be unlikely to occur without a critical standpoint. The work of Medlicott in 2001 also assumed a critical approach to the individualized view of deaths in custody and further moves away from the dominant positivistic approach of research regarding self-inflicted deaths in prison.

This dissertation therefore is based on a similar critical theoretical and methodological approach. This allowed the research to consider determining contexts, harm and human rights as well as examining beyond the surface of existing oppressive structures which conceal the processes which oppress and control marginalised groups such as prisoners and their families (Harvey, 1990:4). This allowed the wider picture regarding self-inflicted deaths in prison to be examined rather than focusing on causation (Chadwick and Scraton, 2009:97). Critical theory opposes the idea that the world cannot be changed (May, 1999:36). Therefore, when applied to this research, this encourages the possibility of change regarding the often unchallenged subject of self-inflicted deaths in prison. A critical approach therefore allows the research to look conceptually and provide more than an overview of the comprehensive topic of self-inflicted deaths and pressure group interventions.

With regards to the chosen methods of this research, discussed in Chapter Four, a critical approach allowed the questionnaires to examine and grant a voice to the subjugated knowledge of INQUEST which challenged the state’s socially constructed truths surrounding self-inflicted deaths in prisons. This resulted in alternative discourses and truths surrounding this topic to be generated (Berrington, Jemphrey and Scraton, 2003:131). The generation of these alternative discourses are what critical research is concerned with (Jupp and Norris, 1993:46) and generating alternative truths was an aim of this research in addition to adding to existing literature regarding self-inflicted deaths in prison.

This chapter has examined INQUEST’s relationship with the state focusing particularly on the theoretical perspectives of Neo-Marxism and Abolitionism. Also detailed has been the emergence of a critical perspective on self-inflicted deaths in prisons. The next chapter will discuss the methods for this study and how they fit with the theoretical and methodological perspectives that were utilised.

Chapter Four: Methods

Chapter Two of this dissertation established the significant role of INQUEST following a self-inflicted death in prison and for that reason the organisation was in
an ideal position to fulfil the research’s aim of providing an in-depth and valuable insight into self-inflicted deaths in prison in addition to highlighting the difficulties pressure groups face. This chapter will discuss the chosen methods of this research including its aims and objectives, sampling techniques, chosen methods of data collection and data analysis. Furthermore, the epistemological and ontological position of the research will be discussed, in addition to any ethical issues which may have arisen and the ways in which these ethical issues were overcome.

The Aims of the Research

The aims of this research, as discussed in the introduction, were important to outline from the outset as clear aims helped to provide the research with direction for the way in which it would progress and what it attempted to achieve (Blaikie, 2010:17). This research originally aimed to speak to prisoners’ families affected by self-inflicted deaths in prison. However, I had difficulties in gaining access to prisoners’ families. Therefore a non probability, purposive sample consisting of INQUEST staff was utilised as they work so closely with prisoners’ families. This means that although the participants utilised differed from those originally planned I was still able to gather the views of families affected by self-inflicted deaths in prison through INQUEST. Questionnaires were originally sent to sixteen prospective participants. However, not all prospective participants returned these questionnaires. Therefore the final sample of the research included one INQUEST caseworker, three INQUEST trustees, one of INQUEST’s co-directors and two academics who have previously worked with INQUEST. These participants were selected deliberately with the research purpose in mind (Jupp, 1989:37) and were each contacted via an email requesting their participation. This meant that some members of the population had a higher chance of being selected than others. As a result of the sample being purposive it could not be assumed that the results were representative and thus could not be generalised to populations other than INQUEST (Crow and Semmens, 2008:49). Despite this, there were advantages of utilising a purposive sample for this research. Firstly, participants who were believed to be the most appropriate for this research topic could be selected (Oliver, 2006:245). This meant that there was a high chance of gathering data that would be useful to the dissertation (Gray, Williamson, Karp and Dalphin, 2007:105). Utilising a wide spectrum of those associated with INQUEST enabled an extensive amount of data to be gathered which improved the validity and reliability of the research (Jupp, Davies and Francis, 2002:10). If the study was to be repeated an increased sample size would improve the reliability, validity and power of the research (Bickman, Rog and Hedrick, 1993:20). Furthermore, future participants could possibly consist of past INQUEST workers along with any new employees who have started work at INQUEST since the original research was completed. In addition, if this research were to be expanded a snowball sample could be utilised which would involve gathering additional participants from information provided by the original participants. Snowball sampling would be especially appropriate as contact with one prisoners’ family could directly lead to contact with other families. In addition, longitudinal analysis could be utilised which could analyse what changes and improvements have occurred. Finally, if this research was to be expanded in the future it would be extremely interesting if the views of families who have suffered a bereavement as a result of a self-inflicted death in prison could be gathered. However from the experiences of this research, this may prove difficult.
Approaching the Research

An inductive approach to this research was adopted as I did not have a ‘set’ existing theory to test (Babbie, 2010:58). This allowed theory to be generated from the research (Bachman and Schutt, 2011:38). Despite not having a set theory to test I had developed views on the problem of self-inflicted deaths in prison and the work of INQUEST, but this research did not aim to prove or disprove whether these views were correct. Power states that to critically analyze, a positivist epistemology and ontology should not be utilised (Power, 2003:147). Therefore, the ontological position of this research was constructivism— the research was not restricted to hard facts and ‘one truth’ surrounding self-inflicted deaths in prison and the hegemonic interventions of INQUEST (Thyer, 2010:580). This is especially appropriate as there could not be one truth in a topic as diverse as self-inflicted deaths in prison. The epistemological position of the research was interpretivism. This was highly appropriate for this topic as interpretivism emphasises that knowledge is subjective and that different individuals have different views (Blaikie, 2010:145) something that this research aimed to demonstrate. It also emphasises that research is value laden (Crotty, 2003:10). Interpretivism aims to reveal interpretations and meanings (Walliman, 2006:15). This was particularly important in this research in order to fully understand the interpretations and meanings that INQUEST attaches to their work regarding the topic of self-inflicted deaths in prisons.

Data Gathering and Analysis

This research involved gathering qualitative primary data. Due to the controversial and sensitive nature of this research I wanted respondents to have free range when providing data and not feel restricted (Yates, 2004:33). Qualitative research allows this as it gathers soft data and is not restricted to hard data such as statistics (Aita and McIlvian, 1999:261). However, because of this, data analysis was time consuming (Mason, 2002:89) which will be discussed below.

Primary research was preferred rather than secondary research despite it being very time-consuming (Kumar, 2002:82). This was because I wanted up-to-date data to be gathered and to have control over what data was collected. Primary data was gathered through open-ended questionnaires and telephone interviews. Firstly, questionnaires allowed the respondents to answer the questions without restriction but were slightly different for each participant group. For example the trustee’s questionnaires (see Appendix A) contained slightly different questions than the questionnaires that the academics received (see Appendix B) and to the questionnaires the caseworkers received (Appendix C). This was to ensure that each participant received a questionnaire that was tailored towards their experiences with INQUEST. Questionnaires were emailed to all participants along with participant information sheets (see Appendix D) who were asked to sign and return them at their leisure due to their busy schedules in order for their participation to be confirmed. Questionnaires were ideal for this research due to the low costs involved particularly as the research was funded by myself (O’Leary and Miller, 2003:253). Furthermore, by sending the questionnaires by email I avoided ‘researcher effects’ where my presence could have influenced the data provided by the participant. This avoidance improved the reliability of the results of the research (Barnsley, 1972:199). However there are some criticisms with utilising questionnaires. These include having a vast amount of data to examine and analyse due to the open ended questions (Denscombe,
2007:166) in addition to low return rates always being a possibility (Mitchell and Jolley, 2010:263).

Secondly, for one of the participants it was agreed, for their convenience, that telephone interviews would be conducted (see Appendix E) Telephone interviews allowed me to probe the answers given in response to questions asked which I was unable to do with questionnaires (Bailey, 1994:197).

A method of data collection which was considered was face-to-face semi-structured interviews. This method was decided against as INQUEST workers have such a high caseload in addition to INQUEST’s trustees being based in different parts of the country which meant it would have been difficult to organise interviews with all participants. Despite this, on reflection, semi-structured interviews could have been utilised in addition to questionnaires and telephone interviews in order to provide a triangulation approach which would have gathered a wider range of data (Arksey and Knight, 1999:21). This would have also improved the credibility, validity and reliability of the research (Cohen, Manion and Morrison, 2007:141). This point could be taken on board and utilised for future research.

Data analysis involved reading the data repeatedly which enabled me to become alert to emerging themes (King and Wincup, 2008:35). I then manually coded the data using inductive and deductive coding. I then compared each piece of data to identify commonalities. Throughout my research, but especially during data analysis, I endeavoured to be reflexive. This enabled the research to be valid and robust. I continuously reflected upon how any possible biases and personal factors may have affected the data generated (Creswell, 2009:233).

**Ethical Issues**

There were many ethical issues which could have arisen due to the sensitive topic of this research (Kalmbach and Lyons, 2003:1). The physical, social and psychological well-being of participants must not have been adversely affected by the research (British Society of Criminology, 2006:2). I followed the ethical guidance from Liverpool John Moores University and the British Society of Criminology.

Firstly, the ethical issue of informed consent. This research was overt therefore I was able to fully explain to participants what the research was regarding enabling them to make an informed decision on whether to participate (British Sociological Association, 2002:3). Despite it being incredibly hard to include *everything* (Homan, 1991:73) participant information sheets and informed consent forms explained in understandable terms the title and objectives of the research, why they had been chosen as participants and what was asked of them. Furthermore, that participation was voluntary, they were free to refuse to answer, withdraw their participation and their data at any point (Ruane, 2005:19). Also detailed was who was funding the research, data storage and the dissemination of the research in addition to explaining that they could be sent a copy of the completed dissertation if they wished. The provisions in place to protect confidentiality and anonymity were also explained (Sieber, 1998:139). Prospective participants had to sign the form to acknowledge they had read, understood and were willing to participate.

To ensure confidentiality and anonymity, identities were removed from the data and replaced with pseudonyms such as ‘Participant A’ and ‘Participant B’. All data was
encrypted, password protected and stored in line with the Data Protection Act (Hughes, 1998:103). Participant’s contact details and gathered data were stored separately, only available to my supervisor and I, along with an external examiner and used for this research purpose solely (Johnson and Bullock, 2009:216). It was my stance that I would break confidentiality if I believed somebody to be at serious risk of harm to themselves or others. I made this clear within the informed consent form.

This research did not aim to invade participant’s privacy or cause harm. However to ensure this did not happen, deception was not used which could have undeniably caused harm to participants and invaded their privacy (Ellis, Hartley and Walsh, 2010:362). Participants were fully informed and their confidentiality and anonymity was guaranteed to avoid invasion of privacy and harm (Bryman, 2008:124). Participants could refuse to take part at any point to protect their privacy. If at any point I believed a participant or myself to have been at risk of harm I would have ceased the research immediately.

Israel and Hay discuss the importance of debriefing participants after data collection in order to ensure they have fully understood the research thus preventing any harm occurring (Israel and Hay, 2006:97). In-depth debriefing would have been necessary if this research had consisted of vulnerable participants such as prisoners’ families or utilised interviews. However in this case this level of debriefing was not needed. Instead participants were given contacts details for myself so that they could contact me at a later date if they wished to do so.

The methods utilised for this research allowed the voices and experiences of those involved with INQUEST to be heard along with the meanings they attach to their work which highlights that the methods fit well with the methodological framework of this research which Chapter Three discussed. This dissertation will now move on to discuss its findings.

Chapter Five: Findings

Chapters Three and Four of this dissertation have examined the theoretical and methodological approach of this research along with the methods that were utilised. These previous chapters, together with the data gathered from the questionnaires and telephone interviews, have allowed a number of themes regarding self-inflicted deaths in prison to emerge. This chapter will now discuss the themes that became apparent during data collection whilst linking them directly to the previous chapters of this dissertation.

State Discourses and Self-Inflicted Deaths in Prison

Chapter One of this dissertation identified many possible causes of self-inflicted deaths in prison including an increasing prison population along with an acceleration in vulnerable people within this prison population. This is in addition to problems with prison management and the issue of overcrowding (Liebling, 2008:284). Several participants also identified these points as contributing factors in prisoners
taking their own lives. Other factors that participants identified included hopelessness, seemingly endless sentences, depression and mental health issues. However, there were differing views from participants regarding whether the factors in prisoners taking their own lives were similar for specific groups including young people, females and minority ethnic groups. One participant identified the differing problems that individual groups have such as the prevalence of restraint amongst deaths of young black men and self-harming in women (Participant C). This reflects the points made in Chapter Two regarding how women are treated differently within the criminal justice system and their invisibility within it (INQUEST Annual Report 1982-3 cited in Ryan, 1996:132). This is in addition to the institutionalised racism which affects black people in custody (Ryan, 1996:127) and the institutional child abuse which concerns imprisoned young people (Goldson and Coles, 2005:52). Furthermore, Participant G discussed their belief that the state does not recognise individual differences in reforms and policies. They explained that they thought there was a ‘generic application’ of policies relating to suicide prevention which fails to take into account the needs of different groups such as women who are being held in prisons which have predominantly been designed for men.

INQUEST has had a significant impact on how self-inflicted deaths have been understood. Participants generally believed there had been an increased awareness and debate surrounding self-inflicted deaths in prison. As one participant stated:

‘The issue gets more sympathetic attention than it used to’ (Participant D)

However, in contrast to this, another participant believed that the system still considers those who commit suicide in prison as:

‘A public embarrassment, society and press disregard them’ (Participant B)

This shows that despite INQUEST making a considerable impact in increasing awareness and understanding surrounding self inflicted deaths in prison, there is still some way to go in order for the press, and society in general, to understand and not disregard those who kill themselves. However, as this dissertation has already established, the state attempts to construct dominant discourses surrounding self-inflicted deaths. For that reason, it is likely that the state will continue their negative portrayal of those who commit suicide. This works to further reinforce the negative ideological construction surrounding those who die as a result of self inflicted deaths in prison which in turn individualises the problem and draws attention away from structural and institutional inadequacies.

**Hegemonic Impact of INQUEST: Prisoners’ Families**

One of INQUEST’s main interventions, which was repeatedly referred to during data collection, was the significance of INQUEST’s work with bereaved families. This is especially prevalent due to the disadvantaged and marginalised status of prisoners’ families discussed in Chapter Two. Other comments concerning INQUEST’s achievements regarding families include how they have ‘focused on supporting families and giving these families a voice’ (Participant B) in addition to ‘empowering and helping’ them (Participant C). Furthermore, INQUEST has created ‘a forum for families and relatives to speak out, supporting those who have no idea
where to turn’ (Participant A). Again, these comments reflect the huge impact INQUEST has had in creating alternative truths surrounding self-inflicted deaths in prison and empowering those whose views are regularly suppressed.

Participant B highlighted that INQUEST has provided an ‘opportunity and support to seek a positive change’. This is another example of INQUEST attempting to generate alternative truths surrounding self-inflicted deaths in prison, influencing policy changes and endeavouring to change common sense into good sense surrounding self-inflicted deaths in prisons. Participant E also described the huge ‘intellectual, legal, moral and personal support for families’ that INQUEST provides in addition to helping them campaign for justice. This again demonstrates the ways in which INQUEST work to empower and support bereaved families.

Chapter Two also discussed the multitude of services INQUEST provides and this was acknowledged in many of the answers provided regarding the nature of INQUEST’s work. This empowerment of prisoners’ families via INQUEST has resulted in turning common sense into good sense regarding self-inflicted deaths in custody. This has been achieved through INQUEST’s tireless campaigning and dedication to challenging dominant truths regarding self-inflicted deaths in prison whilst created new truths. This has allowed the subjugated knowledge of prisoners’ families, discussed in Chapter Two, to be heard.

**The Hegemonic Impact of INQUEST: Policy and Practice**

Participant G stated that current policy and practice regarding self-inflicted deaths in prison ignores the psychological and physical harm that prisons cause. This dissatisfaction with suicide prevention policies was reflected by other participants. All participants identified several policy and practice developments that INQUEST has had influence on through their persistent campaigning which has worked to ‘humanise and improve family experiences’ (Participant B). Comments praising the policy and practice interventions influenced by INQUEST included increased accountability and better practice in coroners’ courts, changes to inquest procedures and ensuring all deaths in custody are the subject of an inquest. However, one participant stated that during previous work with INQUEST they felt that they were involved with a number of well-meaning initiatives that were not implemented effectively (Participant D). These extensive policy and practice campaigns and interventions by INQUEST has illustrated a neo-Marxist perspective, discussed in Chapter Three, which highlights the contradictory nature of the state’s power. Therefore, INQUEST’s interventions recognise this contradictory nature of the state’s power and demonstrate a challenge to state hegemony.

As discussed in Chapter Two, the reinstating of the Chief Coroner and getting the coroners’ bill through parliament has been some of INQUEST’s most recent and significant achievements and demonstrates how INQUEST has successfully challenged the state. This was referred to by several participants. As one participant said:

**The reform of the coroners’ system is a major achievement- a lot of what we were calling for thirty years ago is now law** (Participant D)
As examined in Chapter One, the work of Chadwick and Scraton in 1987 held a critical view of the coroner’s courts, a view which was also adopted by INQUEST. This comment by Participant D demonstrates how INQUEST has worked tirelessly over the space of decades to achieve changes in the coroner’s system.

Participants suggested the following policy and practice interventions would improve the experiences of families. Firstly, there needed to be better communication of facts to families as ‘families need to know facts, not to be patronised’ (Participant C). Also, there needed to be automatic non-contributory Legal Aid for families to be represented at an inquest ‘without the need for every conceivable family member to have to go through the hoops of dreadful financial forms’ (Participant A). Furthermore, another participant stated that there should be better regulation of coroners through the Chief Coroner as ‘some coroners could not be more sensitive towards family issues but others appear to find families a complete nuisance with their verdicts a foregone conclusion’ (Participant A).

**INQUEST, Reform and the State**

‘INQUEST is not just about prison reform, it is also about police, psychiatric hospitals and the inquest system in general. INQUEST has allied with Radical Alternatives to Prison, Women in Prison, the Black Female Prisoners Scheme and Women in Special Hospitals rather than the larger groups. They also had good relations with the Prison Reform Trust but relations with the Howard League were sometimes prickly’ (Participant D).

From this statement, it is clear to see how INQUEST differs from more liberal prison reform groups. They steer away from the ‘muted state critique’ (Participant E) of organisations such as NACRO and the Prison Reform Trust. The prominence INQUEST hold is evident as they have been able to gain and sustain positive relationships with a vast array of organisations. In terms of the state Participant D noted that:

‘INQUEST had different relationships with different bits of the state. For example we got on much better with the Inspectorate of Prisons than the Police Complaints Authority. A lot of us had a negative attitude towards the state but if police or Prisons inspectorate were ready to consider changes then we were willing to talk to them’ (Participant D)

Responses from participants here demonstrated the often strained relationship INQUEST has with the state. However, with specific regards to the state’s response to self-inflicted deaths in prison, Participant D stated that there had been a positive change between the first and second reports that the Inspectorate had produced on self-inflicted deaths in prisons. This resulted in a change from viewing self-inflicted deaths as a ‘technical issue about precautions to one that raises wider issues about how prisoners are treated’ (Participant D). Despite this, it is apparent that the state has been reluctant to learn from previous self-inflicted deaths in prison. As one participant stated when asked whether they believed the state had learnt from previous self-inflicted deaths:
‘Lessons seem to be learnt at the time but the same mistakes are then made again such as leaving vulnerable prisoners alone in shared cells without additional supervision when a cellmate is absent’ (Participant A)

This view was echoed by Participant C who also believed that lessons were not learnt by the state and ‘although public awareness is greater, political parties are ‘tough’ and fill up prisons US style’ (Participant C). This reluctance of the state to learn from previous self-inflicted deaths in prison was explained by one participant who stated that the ‘Status quo is the easiest position to maintain. Minor changes take place but sustained, systematic change is much more difficult’ (Participant B). This point was reiterated by Participant G who believed that small changes were possible but more radical changes were often not. This was described as ‘frustrating’ and ‘demoralising’ by Participant G. Participant G went on to discuss their ‘sadness’ and ‘anger’ that despite INQUEST’s tireless work, prison is still utilised too frequently and often these self-inflicted deaths could and should have been prevented due to the extensive knowledge that has been developed regarding the care of prisoners.

Participant E also drew attention to the problem of self-inflicted deaths being individualised, it is actually imprisonment that ‘promotes suicide and despair among normally quite stable people and prison authorities have a duty of care to manage this problem’ (Participant E). Therefore, Participant E pointed out:

‘All ranks now know that they will be held accountable for suicides, there is no brushing this issue under the carpet, thanks to INQUEST (Participant E)

Issues and Future Prospects

‘INQUEST gave huge intellectual, legal, moral and personal support to many families, helping these often very ordinary people articulate their grievances and to campaign with them for what they properly called ‘justice’ (Participant E)

Due to the nature of their work, it was to be expected that INQUEST would face problems which may hinder their work from progressing. Many of the problems detailed can be linked to the fact that INQUEST is a counter hegemonic organisation who have refused to be co-opted by the state, as discussed in Chapter Two. Therefore their work can often be viewed as challenging and working against the state. Participant G discussed that there is hostility towards INQUEST as an organisation stemming from a ‘misunderstanding of the role of INQUEST’.

One of the most persistently referenced problems that INQUEST experienced was that of funding difficulties. When asked what problems INQUEST faces, Participant B stated ‘financial stability to continue their work, especially in the current climate’ (Participant B). Participant F discussed how INQUEST does not receive any funding from the state or from the Legal Services Commission but has received a Big Lottery
Fund grant so in the short-term future INQUEST has adequate funding. However, as Participant A detailed - ‘Long-term stable funding would involve increased staff with a secure structure’ (Participant A).

Another problem which was identified was ‘the need to respond to urgent and immediate situations without warning that they are about to occur’ (Participant A). This problem cannot be avoided due to the nature of INQUEST’s work- it is impossible to predict INQUEST’s caseload even for a short time ahead. However if INQUEST had access to extra funding and resources, as highlighted by a number of participants, then they would be better equipped to deal with the urgent and immediate situations that they face.

‘INQUEST is and will continue to be of major importance to those who value human rights’ (Participant E)

All of the participants discussed the importance of INQUEST continuing and expanding their work due to the significant number of those who are still dying in prison as a result of suicide and the increasing caseload of INQUEST. Participant G stated that in an ideal world ‘INQUEST would not exist’. However, due to the recession, extensive cuts and the increasing prison population, it is likely that INQUEST’s work will be as prominent as ever in the future. Participant B pointed out that INQUEST will need to continue ‘until the new coroners’ system is working well, with reduced or zero deaths in custody’ (Participant B). Furthermore, Participant C remarked that they see the future for INQUEST as continuing to attract ‘dedicated individuals’ to work for them and to ‘continue their work in the face of the current government and economic climate’ (Participant C).

Finally, Participant G discussed the fact that due to INQUEST’s unique knowledge and understanding of prisoners’ families, INQUEST was looking to examine international perspectives regarding self-inflicted deaths in prison in order to be of assistance on an international level regarding self-inflicted deaths in prison. This is an example of how INQUEST’s work is expanding and attempting to influence positive change on an international level.

This chapter has examined the findings of this dissertation, identifying the themes which have emerged whilst linking these themes with previous chapters. The next chapter will conclude the dissertation. This chapter will also include the recommendations from the dissertation, based upon the findings of the research.

Chapter Six: Conclusions and Recommendations

The aim of this dissertation was to provide a critical account of the work of INQUEST including their challenges to dominant discourses surrounding self-inflicted deaths in prison in addition to their work with prisoners’ families. The research also aimed to uncover the opposition INQUEST has experienced in addition to developing an understanding of how INQUEST’s interventions have worked across age, gender and race divides. Also of interest was developing an
understanding of how INQUEST view the impact of their work and what they believe the future holds for them.

The seven participants utilised in this dissertation were able to provide data which helped to fulfil the dissertation’s aims. As discussed in Chapter Five, several main themes were established from the research. Firstly, the significant impact of INQUEST’s work with bereaved families. INQUEST have worked to empower and assist families. INQUEST’s workload is often taken up by assisting bereaved families however they have also actively pursued policy and practice changes, most significantly the challenging and reinstatement of the Chief Coroner and increased accountability and better practice in coroner’s courts.

Another theme which became apparent was the significant impact INQUEST has had in challenging the state regarding self-inflicted deaths in prison. This has not only involved challenging the care and treatment of both prisoners and their families but also the dominant discourses and language which is used to socially construct those who commit suicide. An example of this was INQUEST’s use of the term ‘self-inflicted death’ to describe those who commit suicide in prison. By INQUEST using this term they challenged the view of ‘suicide’ and that all those who committed suicide actually intended to do so. It is INQUEST’s belief that often those who commit suicide were actually crying out for help and did not actually intend to take their own lives (Participant G).

Self-inflicted deaths in prison is an issue which is unlikely to cease in the future. The Howard League states that the government need to reduce the numbers entering prison in the first place if deaths are to decrease (Howard League, 2005:9). Participant G also highlighted how prison was being utilised too frequently. Suggestions for future studies include researching the effects of prison regimes (Mchugh, Towl and Snow, 2000:161). In addition, a focus on individual experiences of prisoners as most theories of prison suicide are vague and fail to take into account the ‘differential nature’ of the prisoners experience (Liebling, Durie, Stiles and Tait, 2005:209). Again, this point was demonstrated by Participant G who discussed how prison service policy does not take into account the individual circumstances of prisoners. Furthermore, this dissertation has established INQUEST’s views on the importance of acknowledging the individual factors which affect different groups within prison- primarily minority ethnic groups, young offenders and women. This view has been reinforced by the work of Coles, who stated that the rates of self-harm amongst women in prison rose by almost 50% between 2003 and 2007 (Coles, 2012:2). Therefore it is important that future research and policy takes into account the individual problems which different imprisoned groups face such as this prevalence of self-harm amongst women.

With regards to recommendations, it became apparent during data collection that there are no particular areas of INQUEST’s work which could be highlighted as ineffective or in need of dramatic improvement. Therefore, the recommendations of this dissertation are primarily related to the continuation and expansion of INQUEST’s current work. Firstly, INQUEST’s work with bereaved families. As has been repeatedly referenced throughout this dissertation, INQUEST’s work has proved invaluable to families through their continuous support and assistance. Self-inflicted deaths and self-harm figures show little sign of decline (Coles, 2012:2) therefore it is imperative that INQUEST continue this work whilst continuously
gathering further knowledge of what works regarding the assistance of bereaved families.

As discussed earlier, difficulties in securing funding has been and remains a major issue for INQUEST. This is particularly prevalent as recent research suggests that only 6% of planned cuts in public service spending have already occurred (Bourne, 2012). Therefore, with regards to the future, INQUEST should ensure they continue to receive adequate funding by continuing the high profile nature of their work and ensuring as many people as possible are made aware of INQUEST’s work which increases the likelihood of attracting funding. Furthermore, maintaining relationships with those who currently offer INQUEST funding such as The Big Lottery Fund could work to ensure future funding. This links to the third recommendation of this dissertation which is expanding INQUEST’s workforce to accommodate the ever-growing workload the organisation faces. Ensuring adequate funding for INQUEST would allow extra staff to be employed which would not only allow INQUEST to deal more effectively with their current workload, it would also allow them to further expand their workload which as Participant G stated is likely to increase in the current climate.

The fourth recommendation of this dissertation is related to Participant G’s comment regarding misconceptions regarding the nature of INQUEST’s work. Despite the lack of resources and extensive workload INQUEST face, it would be beneficial for them to attempt to change public opinion on the nature of their work. Currently, some INQUEST staff utilise social networking sites to inform members of the general public of INQUEST’s current workload. Therefore, increased use of social networking sites from INQUEST could be utilised to inform the public of INQUEST’s workload. This could result in increased support, and lack of awareness of INQUEST’s work.

In conclusion, prisoner’s well-being is crucial to the legitimacy of prisons (Bottoms, 1999:254). However, the state will always be coercive and the crimes of the state remain a significant blind spot (Scheptycki, 2009:245). The state have constructed particular truths which divert attention away from the often sub-standard care of prisoners and worked to individualise the problem of self-inflicted deaths in prison. INQUEST have challenged this individualisation and focused on supporting bereaved families and influencing policy and practice regarding self-inflicted deaths. This has allowed a social harm approach to be examined which was born out of a frustration with failures to challenge the state (Sanders, 1999:5). Therefore, while INQUEST has not achieved hegemony regarding self-inflicted deaths in prison it has successfully raised awareness and made a real difference regarding a broader understanding of self-inflicted deaths in prison. As Participant E stated: ‘INQUEST was set up to do things- First, to monitor deaths in state custody as there were no official figures at the time. Second, to support families and help them engage in inquest procedures and to assist and advice on campaigns. Overall, monitoring, advising and support’. This dissertation has demonstrated that this has most definitely occurred. The work and success of INQUEST has displayed how this radical group has now become a respected and prominent group and as Participant C said it is ‘amazing that this organisation has managed to do so much’.

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Appendices

Appendix A- Trustee Questionnaire

**Questions:** Please fill in your answers under each question. If there are any questions you do not wish to answer please leave blank.

**Work of Inquest**

1. Why did you get involved with INQUEST?

2. Can you tell me about your role within INQUEST?

3. What would you say are the main factors in prisoners taking their own lives?

4. Are these factors different for young people, male and females and minority ethnic groups?

5. What would you say were the differences, if any, between INQUEST and more liberal prison reform groups?

6. What impact do you believe INQUEST has had on:

   (a) The experiences of prisoners’ families?
(b) Policy and practice?

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(c) How prison suicides have been understood?

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7. What would you regard as INQUEST’s major interventions and achievements?

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8. Do you think that the state is learning from previous suicides in prison? If not, why not?

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9. What policies and practices do you believe would improve the experience of families following a relative’s suicide in prison?

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10. What are the most common problems that INQUEST faces?
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11. How do you see the future for INQUEST?
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12. Is there anything else you would like to add?
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Thank you very much for taking the time to fill out this questionnaire. If you have any questions please contact me at c.speed@2009.ljmu.ac.uk.
Appendix B-
Academic’s Questionnaire

Questions: Please fill in your answers under each question. If there are any questions you do not wish to answer please leave blank.

1. Why was INQUEST set up?

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2. What were the political and theoretical influences on INQUEST?

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3. Why did you get involved with INQUEST?

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4. Can you tell me about your role with INQUEST?

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5. What would you say were the differences, if any, between INQUEST and more liberal prison reform groups?
6. How did INQUEST see its relationship with the state?

7. How did INQUEST understand the issue of reforms in relation to suicides in prison?

8. What impact do you believe INQUEST has had on:
   (a) The experiences of prisoners’ families
   (b) Policy and practice
   (c) How prison suicides have been understood

9. What do you regard as INQUEST’s main interventions?
10. During your involvement with INQUEST how did the state respond to prison suicides?

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11. Do you believe that the state is learning from previous suicides in prison?

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12. Is there anything else you would like to add?

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Thank you very much for taking the time to fill out this questionnaire. If you have any questions please contact me at c.speed@2009.ljmu.ac.uk.
Appendix C-
Caseworker Questionnaire

Questions: Please fill in your answers under each question. If there are any questions you do not wish to answer please leave blank.

1. Can you tell me about your role within INQUEST?
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2. What would you regard as INQUEST’s major interventions and achievements?
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3. What would you say are the main factors in prisoners taking their own lives?
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4. Are these factors different for young people, males and females and minority ethnic groups?
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5. What impact do you believe INQUEST has had on:

(a) The experiences of prisoners’ families?
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_________________________________________________________________
(b) Policy and practice?

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(c) How prison suicides have been understood?

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(6) What are the most common problems that INQUEST faces?

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(7) How do you see INQUEST’s relationship with the Home Office/ Ministry of Justice?

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(8) Do you think that the state is learning from previous suicides in prison? If not, why not?

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(9) What do you think of the suicide prevention policies that have been introduced over the years?

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________________________________________________________________________
(10) What do you think of current suicide prevention policies?

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(10) What policies and practices do you believe would improve the experiences of families following a relative’s suicide in prison?

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(11) Do you think that Unlocking the Truth’s recommendations were followed? If not, why do you think this was?

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(12) How do you see the future for INQUEST?

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(13) Is there anything else you would like to add?

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Thank you very much for taking the time to fill out this questionnaire. If you have any questions please contact me at c.speed@2009.ljmu.ac.uk.
Appendix D-
Participant Information Sheet with Informed Consent

Participant Information Sheet - Please read this form before signing below.

Thank you for agreeing to participate in this research. My name is Carly Speed and I am a third year undergraduate student at Liverpool John Moore’s University studying Criminology. The title of this research is ‘Prison suicide preventative measures: an exploration of relative’s views and hegemonic challenges to state power’. The research aims to give families affected by prison suicide a voice and aims to uncover opinions, views and recommendations.

Firstly, you are reading this as you have been selected as a prospective participant in this research. This is because you have experience or knowledge of suicides in prison and the work of INQUEST. Participation is completely voluntary and you are free to withdraw your participation and data from the study at any point without any negative consequences. In addition, if you wish to not answer a particular question for any reason but do wish to participate overall this is perfectly acceptable.

I am following the ethical guidance of Liverpool John Moore’s University, the British Society of Criminology and the British Sociological Association. This will ensure I act ethically and ensure your physical, social and psychological well-being is not adversely affected by the research.

To ensure your confidentiality and anonymity identities will be removed from the data and replaced with pseudonyms. All data will be encrypted, password protected and stored in line with the Data Protection Act. Contact details and gathered data will be stored separately and all data will only be available to my supervisor and I and used for this research purpose only. What is important to acknowledge here is that it is my stance that I will break confidentiality if I believe somebody to be at serious risk of harm, whether that be to themselves or others.

The research will be funded by myself and with regards to dissemination of this research, it is likely to only be viewed by my supervisor and I. However all participants are welcome to be sent a copy.

To avoid invasion of privacy as much information as possible is provided here so you can deem whether or not this research will invade your privacy before you agree to participate. Please be assured that every measure has been taken to avoid any invasion of privacy. However I realise due to the sensitive nature of this research that this could occur. It is important to reiterate here that you can refuse to participate at any point to protect your privacy. The assurance that your confidentiality and anonymity will be protected will also help to protect invasion of privacy.

I aim to minimize any potential harm by fully informing you here of the nature of the research. Maintaining confidentiality and anonymity, debriefing and continuously monitoring all participants will ensure that potential harm is minimized. The research will cease immediately if a participant or I is at risk of harm.
At the end of the research all participants will be debriefed and given the opportunity to raise any issues. The contact details of any help/support organisations will be given if it is deemed appropriate.

Please note: You do not have to answer any of the questions if you do not wish to do so.

I have read and understood the participant information sheet and agree to participate in this research.

Signature: __________________________
Date: ______________________________
Appendix E-
Telephone Interview

Telephone Interview

1. What would you say were the differences, if any, between INQUEST and more liberal prison reform groups?
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2. What do you think of the reforms and policies that have been introduced in relation to self-inflicted deaths in prison?
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3. What would you regard as INQUEST’s major interventions and achievements?
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4. Do you think that the state is learning from previous self-inflicted deaths in prison? If not, why not?
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5. What policies and practices do you believe would improve the experience of families following a relative’s self-inflicted death in prison?
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_________________________________________________________________

6. What are the most common problems that INQUEST faces?
7. How do you see the future for INQUEST?
Acknowledgements

I would like to thank all the participants of this research for taking the time to contribute and make this dissertation possible. I would also like to thank my supervisor Professor Joe Sim for his patience, assistance and support throughout my whole time at university but especially throughout my final year. Finally I would like to thank my mother for her continuous support, motivation and encouragement.