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# "You can't always pick your cellmate but if you can....it is a bit better": Staff and Prisoner Perceptions of What Factors Matter in Cell Allocation Decision-Making

Sharing a prison cell can be a difficult experience and yet levels of overcrowding mean that staff must often decide which individuals should be placed in a cell together. Little is known about how staff make such decisions or what factors prisoners believe should be considered to minimize the potential stressors associated with cell-sharing. This study addresses this gap in knowledge by examining what factors staff consider when allocating cells and what factors matter to prisoners. Fifty-two staff and adult male prisoners in Northern Ireland were interviewed about their experiences of cell-sharing and cell allocation decision-making. The findings reveal that current policy does not cover many factors staff consider in practice when allocating cells and identifies additional factors staff and prisoners regard as important. How the disempowerment prisoners feel when they lack an opportunity to contribute to cell allocation decision-making processes can contribute to violence, disorder and distress is also highlighted. These findings point to a need to develop cell allocation decision-making processes to incorporate opportunities for prisoners to have a voice in this process, in accordance with the principles of procedural justice. Additionally, staff training and guidance on weighing up a more varied range of factors than is currently considered in policy is required.

Keywords: cell-sharing, decision-making, overcrowding, procedural justice, imprisonment

## "Man kann sich seinen Zellenkollegen nicht immer aussuchen, aber wenn doch, …. ist es ein bisschen besser": Die Wahrnehmung von Personal und Gefangenen bezüglich relevanter Faktoren bei der Haftraumzuteilung

Die gemeinsame Nutzung eines Haftraums kann eine schwierige Erfahrung sein, und doch muss das Personal bei Überbelegung oft entscheiden, welche Personen gemeinsam untergebracht werden sollen. Die Forschung weiß wenig darüber, wie einerseits das Personal solche Entscheidungen trifft und welche Faktoren andererseits aus Sicht der Gefangenen berücksichtigt werden sollten, um potenzielle Stressfaktoren im Zusammenhang mit der gemeinsamen Haftraumnutzung zu minimieren. Die vorliegende Studie untersucht, welche Faktoren das Personal bei der Zuweisung von Hafträumen berücksichtigt und welche Faktoren den Gefangenen wichtig sind. 52 Mitarbeitende und erwachsene männliche Gefangene in Nordirland wurden zu ihren Erfahrungen mit Haftraumtausch und der Entscheidung über Haftraumzuteilung befragt. Die Ergebnisse zeigen, dass die derzeitige Politik viele Faktoren, die das Personal in der Praxis berücksichtigt, nicht abdeckt. Zudem finden sich zusätzliche Faktoren, die Personal und Gefangenen wichtig sind. Der Text betrachtet auch, wie sich Gefangene fühlen, wenn sie nicht in die Entscheidung einbezogen werden; das kann zu Gewalt, Durcheinander und Stress beitragen. Der Entscheidungsprozess sollte so gestaltet sein, dass Gefangene entsprechend der Grundsätze der Verfahrensgerechtigkeit beteiligt sind. Darüber hinaus sind Schulungen des hinsichtlich einer Abwägung eines vielfältigeren Spektrums von Faktoren erforderlich, als sie derzeit in der Politik berücksichtigt werden.

Schlagwörter: Haftraum; Doppelbelegung; Entscheidungsfindung; Überbelegung; Verfahrensgerechtigkeit; Inhaftierung

#### 1. Introduction

The conditions under which individuals experience imprisonment can vary greatly, both internationally and within Europe (Jewkes & Bennett, 2013). One example of this is the extremely different format which prison accommodation can take (Coyle, Heard & Fair, 2016). In Nordic prisons, individuals tend to be held in single cells, with a relatively large degree of personal space and material comfort (Pratt & Eriksson, 2014; Dullum & Ugelvik, 2012). Such conditions can be juxtaposed with jurisdictions like Croatia, Lithuania and Poland, where large dormitories housing dozens of individuals are commonplace (Drenkhahn, Dudeck & Dünkel, 2014). Italy and France also make use of dormitory cells, but these tend to be shared by much smaller numbers of people (British Embassy, Rome and British Consulate-General, Milan, 2019; Crétenot & Liaras, 2013). Moreover, overcrowding can lead to the use of shared cells in jurisdictions which aim to house people in single cells, such as within the United Kingdom (UK), where the current occupancy level stands at 111 % (Beard, 2019; World Prison Brief, 2020). Prison overcrowding is not unique to the UK, as many countries in Europe have prison occupancy levels that exceed their official capacity, such as Cyprus (141 %), Belgium (121 %) and France (116 %) (World Prison Brief, 2020). Concerns about the use of multi-occupancy and shared cells have been repeatedly expressed by human rights organisations due to the pains of imprisonment that are thought to be associated with cell-sharing, including a lack of dignity, safety and privacy (European Parliament, 2017; Office of the United Nations High Commissioner for Human Rights, 2005; Community Justice Coalition, 2018). The European Prison Rules recommend that single cells are used over shared cells, except in situations where cell-sharing is preferable, but no guidance is given as to when this may be the case (Council of Europe, 2006). Nevertheless, the use of shared cells continues to persist in contradiction to this recommendation. As a result, prison staff are frequently expected to make decisions regarding which cells individuals should be allocated to and with whom they should share their cells. Yet, little is known about how staff make these decisions, other than assessing the potential for violence to occur between cellmates (Howards, 2016). For example, it is unknown what factors influence staff in their cell allocation decision-making and what factors staff and prisoners believe matter for reducing the pains of imprisonment associated with cell-sharing.

This paper seeks to begin to address this gap in knowledge by identifying the factors that prison staff in Northern Ireland (a devolved region of the UK) considered when making cell allocation decisions and investigating prisoners' perceptions regarding what factors matter to reduce the potential difficulties associated with cell-sharing among adult men. Given the significant impact that living conditions can have on the pains of imprisonment, it is necessary that this gap in knowledge is addressed to ensure that prison policies governing cell allocation are based on evidence and reduce the potential for disorder, violence and harm to occur.

#### 1.1. Cell-Sharing

Molleman and van Ginneken (2015, p. 1030) rightly comment that "cell-sharing and crowding cannot be treated interchangeably", as not all experiences of cell-sharing take place in overcrowded prison conditions. However, cell-sharing and overcrowding are often inextricably linked. Within the UK (where over 62 % of prisons are overcrowded), the aim is to house individuals in single cells but levels of overcrowding mean that, in practice, often cell-sharing is

used to cope with population pressures (Sturge, 2019; Prison Reform Trust, 2018). Few studies have been conducted which specifically look at the impact of shared cells in conditions which are not overcrowded (Molleman & van Ginneken, 2015). Instead, much of the research which has expressed concerns about the potential impact of living in shared cells has been conducted in overcrowded conditions (Huey & McNulty, 2005; Baggio et al., 2018). These studies highlight the potential negative impact living in these conditions can have, demonstrating the potential for these conditions to increase violence, distress and ill-health (de Viggiani, 2007; Haney, 2012; Ireland, 2005; Marshall, Simpson & Stevens, 2000). For instance, the risk of violence between cellmates is one of many examples of the negative consequences of cell-sharing (Keith, 2006; de Viggiani, 2007; Grant & Memmott, 2007). While cellmate murders can be regarded as relatively rare events, physical and verbal assaults are far more common (O'Donnell & Edgar, 1999; Ministry of Justice, 2014). Cell-sharing has also been suggested to facilitate sexual assault, with The Howard League for Penal Reform (2014, p. 4) noting that "placing prisoners together in a cell certainly increases the opportunity for sexual abuse to take place, out of sight of prison staff and CCTV cameras". Moreover, the frequency and quality of interactions between staff and those imprisoned has been shown to be negatively impacted by greater levels of cell-sharing (Molleman & van Ginneken, 2015).

Existing research indicates that cell-sharing in overcrowded conditions is a difficult experience for individuals, beyond the risk of violence from a cellmate. High levels of overcrowding can contribute to a tense, aggressive atmosphere, which can translate into high levels of assaults and incidences of bullying, as well as mental health issues amongst the prison population (Leger, 1988; Lawrence & Andrews, 2004; Ireland, 2005; Haney, 2012). Some early research suggests that these living conditions can have a negative impact on an individual's physical health, contributing to higher blood pressure levels and higher rates of complaints of ill health, which may particularly impact the growing ageing population in many prison systems (D'Atri et al., 1981; Paulus, 1988; International Committee of the Red Cross, 2018). Overcrowding has also been linked to suicide and self-harm (Huey & McNulty, 2005; Baggio et al., 2018). Being placed in a cell with an incompatible cellmate has been reported as a further source of stress and a contributing reason for suicide (Rivlin et al., 2013; Sharkey, 2010). Furthermore, Rivlin and colleagues (2013, p. 321) argue that cell-sharing may make it harder to identify which individuals are at risk of suicide as "it may not be reasonable to expect a prisoner to isolate himself [an indication of increased risk] when he shares a cell". Nonetheless, the relationship between cell-sharing and suicide is complex. When explaining why they found no significant relationship between overcrowding and prison suicide, van Ginneken, Sutherland and Molleman (2017, p. 81) suggest that sharing a cell may have a protective effect on prison suicide but that this effect may appear as a null effect when factoring in "overcrowding and the harmful effect of limited meaningful activity".

Some possible positives of cell-sharing are alluded to in previous research, including a reduction in loneliness, boredom and isolation, which are themselves linked to suicidal intent (Brown & Day 2008; Liebling, 1992). It is thought that cell-sharing may protect against suicide due to the guardianship cellmates may provide (i.e. that their mere presence can function as an inhibitor) and/or the emotional support cellmates may offer each other (Dye, 2010; Harreveld et al., 2007). Cellmates may also provide other forms of support. For instance, staff may allocate a cellmate to assist individuals with daily activities if they have a disability or medical need, especially given the complex health needs of the growing number of older prisoners (International Committee of the Red Cross, 2018). However, given the extremely limited

amount of research conducted on cell-sharing and the experiences of cellmates, it is difficult to identify more positives relating to shared cells. Nevertheless, despite this lack of understanding of when it may be preferable or positive for an individual to share a cell, cell-sharing is commonplace in many jurisdictions.

In the UK, the main policy which governs the placement of individuals in shared cells is the Cell-Sharing Risk Assessment (CSRA). Following the murder of Christopher Edwards and Zahid Mubarek by their respective cellmates, staff in UK prisons must carry out a CSRA prior to assigning an individual to a shared cell (Keith, 2006). The objective of the CSRA is to use the evidence available to assess the risk of violence posed by prospective cellmates (Her Majesty's Inspectorate of Prisons (HMIP), 2014). According to UK prison authorities (PSI 20/2015), an individual can be regarded as High Risk if "there is a clear indication (from the evidence) of a high level of risk that they may be severely violent to a cellmate, or that a cellmate may be severely violent to them". High Risk individuals are subject to restrictions in terms of who they can share cells with. For example, racist or homophobic individuals should not share cells with individuals from ethnic minority backgrounds or those who are gay. Some individuals (e.g. individuals who have murdered or attempted to murder another prisoner or committed a serious sexual assault on another adult) may be classified as Mandatory High Risk, meaning that staff should not initially consider them for a shared cell. Yet, they may become eligible for cellsharing if there is evidence that their risk has lessened. Individuals who do not present a risk are regarded as Standard Risk and can share a cell. CSRA policy recognizes that severe cell violence can occur when individuals are vulnerable to attack from a cellmate, though little guidance is given to prison staff on what factors may increase vulnerability to attack. This lack of specific guidance is perhaps unsurprising given the dearth of research on cell-sharing, cell allocation decision-making and what factors should be considered when allocating cells.

### 1.2. The Present Study

This study seeks to begin to address this gap in knowledge by answering the following two questions:

Research Question 1: What factors do Northern Ireland prison staff consider when deciding how to allocate adult men to prison cells?

Research Question 2: What factors do prisoners believe matter when making cell allocation decisions if the pains associated with cell-sharing are to be minimised?

In Northern Ireland (NI), it is mostly adult men who are imprisoned, with only a very small number of women or young people imprisoned. In 2018-2019, the average daily prison population of adult men in NI was 1;286, compared to 65 women and 98 young people (Redmond & Palmer, 2019). Due to the small numbers of women and young people imprisoned, this research focuses solely on the factors influencing the cell allocation decisions of adult male prisoners. In the Northern Ireland Prison Service (NIPS), there is an attempt to house people in single cells but, due to prison overcrowding, people are often housed in shared cells, which were originally designed for one individual. During this research, 36 % of the cells in the largest prison site in NI (Maghaberry Prison) held more people than they were designed for (CJINI,

2015). NIPS aims to run a 'core day regime', meaning that individuals are supposed to be unlocked from their cells for nine and a half hours a day for work and education (European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment, 2018). Generally, individuals who are sharing a cell in UK prisons share with one other person, in a cell equipped with bunkbeds (HMIP, 2017). Today, most cells used for sharing are equipped with a sink and a toilet but there is variation in the amount of privacy cellmates may be afforded when using these facilities (Beard, 2019). Some cells may feature a toilet in a cubicle or with a privacy screen, but provision can vary between establishments (HMIP, 2017). Similarly, the precise dimensions of the cells can vary. Single cells in Northern Ireland measure between 6.8 m² and 7 m² but, as explained above, often these cells accommodate two individuals using bunkbeds, leaving limited space for cellmates to move about the cell simultaneously (Silvestri, 2013).

In NIPS, all adult men are housed in two prisons, Maghaberry Prison and Magilligan Prison. At the time of this research, Maghaberry Prison encountered more difficulties relating to overcrowding than Magilligan Prison. Maghaberry Prison held a mixture of prisoner groups, including fine-defaulters, individuals on remand, high security prisoners, life sentence prisoners, as well as those serving short sentences. As such, it was more susceptible to fluctuations in population, with individuals generally being allocated to shared cells in response to prison overcrowding or to provide support to an individual with a disability or medical need. In contrast, Magilligan Prison was less susceptible to population pressures as it only accepted sentenced, lower security prisoners who were transferred to Magilligan Prison from Maghaberry Prison. This meant that generally the population levels at Magilligan Prison remained stable. Consequently, in Magilligan Prison shared cells were used much less frequently, generally when individuals requested to share, needed assistance/support from a cellmate or during the first few days of their admittance to Magilligan Prison. In the following sections, the methodology used to answer the research questions is described and the findings presented. The findings are then discussed in the context of the policy guidance given to staff and recommendations to improve future practice are offered.

## 2. Methodology

The findings presented in this paper are drawn from a larger study examining cell-sharing among imprisoned adult men in NI (Muirhead, 2019). This larger study used a mixed methods approach to explore cell-sharing, wellbeing and coping through a quantitative (random stratified self-report survey of prisoners) and a qualitative (in-depth, semi-structured interviews with prisoners and staff) component (Muirhead, 2019). This paper focuses on the in-depth semi-structured interviews with staff and prisoners as these interviews provided a rich, detailed account of what factors staff considered when making cell allocation decisions, as well as what factors staff and adult male prisoners believed were important to consider if the pains associated with cell-sharing were to be lessened. The self-report survey focused on measuring the possible relationship between cell-sharing, wellbeing and coping styles rather than factors that influenced cell allocation decision-making. Further information on the self-report survey and the findings emerging from this survey can be found in Muirhead (2019).

### 2.1. Sample

Fifty-two participants were interviewed about their experiences of cell-sharing and cell allocation decision-making in the NIPS.1 Thirty-seven imprisoned adult men were interviewed about their experiences of cell-sharing and what factors they believed mattered when making cell allocation decisions. The imprisoned men were drawn from those who had expressed an interest in participating in an interview during the survey, in which the mean age was 36 years old with an age range of 21 to 77. The interview participants were selected based on the following criteria: their experiences of being detained in both shared and single cells in NIPS; their understanding of English; not experiencing acute incidents of physical or mental ill-health at the time of the research; not deemed to be at risk of causing harm to the researcher; and they were not claiming their offences were politically motivated.<sup>2</sup> They were also purposively chosen to capture a spectrum of experiences of cell-sharing, including both positive and negative experiences. When being interviewed, twenty were detained in single cells and seventeen were detained in shared cells. Twelve were detained in Maghaberry Prison, with the remainder being detained in Magilligan Prison. Fifteen prison staff were also purposively chosen to take part in the interviews based on their experience of and involvement in cell allocation decision making in the NIPS. All members of staff were trained in terms of the content of the CSRA procedure, but the nature and extent of additional training on the application of these risk assessments could vary depending on the rank or role of these individuals (for example, if they were a Senior Officer overseeing a residential unit or involved in a more pastoral role or a security-focused role). Six of these prison staff were women, with the remainder being male. Nine of these staff members worked at Maghaberry Prison at the time of this research, with six working in Magilligan Prison. Participants were also chosen purposively to capture different experience levels of working in prisons, including new officers with less than a year of experience, Senior Officers who had at least four years of experience and other staff members with over fifteen years of experience.

#### 2.2. Procedure

Ethical approval to conduct this research was obtained from Queen's University Belfast and NIPS. Before consenting to take part in the research, participants were fully informed about its nature and what topics would be discussed. The voluntary nature of the research was emphasized to all, to avoid participants feeling coerced to participate and ensure they were aware they could withdraw from the study or refuse to answer any question asked. Interviews were conducted in an interview room on the prison landings and recorded with the permission of participants and NIPS. Before agreeing to take part, participants were informed that information would remain confidential and anonymous, unless they provided information about a serious

<sup>&</sup>lt;sup>1</sup> NI has a relatively small prison population, in terms of prisoners and staff. A limited amount of demographic information has therefore been provided in order to safeguard the anonymity of participants. Some data, such as participants' religion, was purposefully not recorded as such information is still viewed as particularly sensitive.

<sup>&</sup>lt;sup>2</sup> Those who claim their offence was politically motivated demand to be held separately from the rest of the prison population in high security units within Maghaberry prison. See Butler (2020) for a fuller discussion of the issues surrounding the detention of these individuals.

crime, an attempt to escape or information about harm to oneself or another. In these circumstances, participants were aware a relevant authority would need to be notified and anonymity and confidentiality could not be guaranteed. Interviews with prisoner participants lasted on average of 51 minutes, ranging from 26 to 105 minutes. Examples of some of the questions asked include "if you had a choice, what kind of cell would you be in and why?", "what do you think about how staff make decisions about cell placement?" and "how would you describe a good/bad cellmate?". Interviews with staff participants lasted on average 44 minutes, ranging from 23 to 59 minutes. Staff participants were asked questions such as "how are decisions about cell placement made?", "what kind of information is used to make that decision and why?" and "has overcrowding impacted the decisions about cell allocation and if so, how?". No-one other than the research team and transcriber (who had signed a confidentiality agreement) had access to the interview recordings and all data collected was stored securely at Queen's University Belfast.

### 2.3. Data Analysis

Audio recordings of the interviews were transcribed and uploaded to NVivo for analysis. Thematic analysis was undertaken to identify patterns within the data. Braun and Clarke's (2006) six stages of thematic analysis were followed: researcher familiarisation with/immersion in data by repeated reading, coding, searching for themes, reviewing themes, defining and naming themes, and writing up. The researcher remained reflexive throughout the process of thematic analysis, particularly in regard to questioning the assumptions made while coding (Braun, Clarke & Terry, 2015). A data-driven, inductive approach to coding was undertaken, which was best suited to answering the research questions in light of the lack of research on this topic (Nowell et al., 2017). *Figure 1* illustrates examples of different codes relevant to this article that were developed on the basis of staff and prisoner narratives, as well as the themes that were identified by interpreting these narratives.

To check the reliability of the coding, 20 % of transcripts were coded by an independent coder and a Cohen's Kappa of .87 was obtained, demonstrating a high level of agreement.

# 3. Findings

The findings are presented in two sections. The first outlines the factors which staff considered when allocating cells, based on policy and experience. The second section highlights the factors staff and prisoners perceived to be important to consider when making cell allocation decisions if the pains of cell-sharing are to be alleviated.

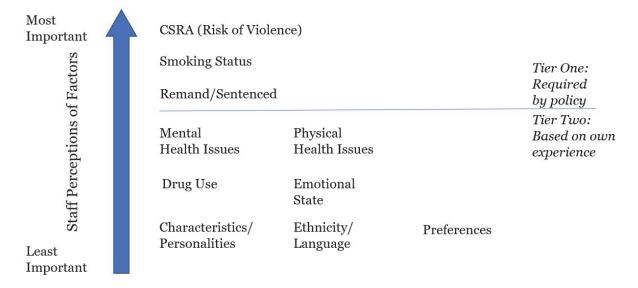
#### 3.1. Cell Allocation: Factors Considered by Staff

Staff considered a range of factors when allocating cells, which can be conceptualised as existing on two tiers. The first tier relates to factors which staff were obliged to consider due to current policy, while the second tier reflects factors which staff considered based on their own experience of making cell allocation decisions (see *Figure 2*).

Figure 1: Sample of code and theme development

Initial Codes	Themes Developed Based On Staff And Prisoner Narratives	Themes Developed Based On Interpretation Of Staff And Prisoner Narratives
Self-selection	Logistical factors considered by staff	Staff-prisoner relationships
Appropriate risk assessment		
Information-sharing		
Short-term cell allocation		
Capacity/overcrowding		
Personality	Individual characteristics considered by staff	Procedural justice
Mental Health		2200044141
Physical Health		
Pre-existing relationships		Autonomy
Ethnicity		
Drug Use		
Hygiene		
Emotional support	Benefits of "successful" cell-sharing arrangements	Risk
Practical support		
Alleviation of boredom		
Development of friendships		Weighting/assessment of different factors
Violence	Negatives associated with "unsuccessful" cell- sharing arrangements	morganism, accomment of animotonic factors
Burden of providing support		
Stress/anxiety		

Figure 2: Perceived importance of factors considered by staff during cell allocations



For staff, the risk of violence posed to cellmates, as assessed by the CSRA policy, was the most pertinent factor considered when allocating cells (see *Figure 2*). An individual's CSRA risk level was determined by Reception staff when they first arrived in prison, but this can be reviewed if anything suggests that a person's risk level has changed. In line with staff's legal duty of care, they used the risk level assigned to individuals to determine their eligibility for cell-sharing:

"It is our job to safeguard everybody, so if we put somebody in a cell with [a high-risk person], we are putting them essentially at risk, or could be." (So<sub>4</sub>)<sup>3</sup>

Staff were mindful that violence towards cellmates could include verbal abuse, physical assaults (ranging from common assault to attempted murder), hostage-taking and bullying. As per CSRA policy and their training on its implementation, staff considered if there was evidence that racist or homophobic beliefs, or mental health issues could put a cellmate at risk of such violence:

"With an increasing foreign national population... [there are] a lot more race based CSRAs." (So4)

"Say somebody was in the army and they are getting flashbacks and things like that, you wouldn't really want to double that person up with somebody else." (So3)

Smoking status was another factor staff prioritised when allocating cells (see *Figure 2*). European Prison Rules stipulate that non-smokers should only share cells with other non-smokers (Council of Europe, 2006). This aims to ensure that a non-smoker is not exposed to second-hand smoke. However, some interviewees spoke of instances where smokers and non-smokers were allocated to a shared cell:

"Because it was so tight you maybe had to put a smoker with a non-smoker just to get another space somewhere else." (So8)

These incidents usually occurred when NIPS was experiencing population pressures and were short-term arrangements. Staff explained that when space was scarce, it was difficult to juggle the competing requirements of High Risk CSRAs and smoking status. Guidance from policy, in terms of what to do when there were two competing requirements and not enough space on a landing, was lacking, resulting in staff experience leading to the prioritisation of the CSRA risk level over smoking status.

European Prison Rules also recommend that individuals who are on remand should not share cells with individuals who are sentenced (Council of Europe, 2006; Criminal Justice Inspectorate Northern Ireland (CJINI), 2015). Whilst this was general practice throughout NIPS, such separation was not always operationally achievable given the small size of the prison population and limited accommodation available at Maghaberry Prison. Staff saw the distinction between remand and sentenced prisoners as somewhat artificial, especially if there were limited numbers of single cells available. They concluded that, in such circumstances, better cell-sharing arrangements were achieved when they matched individuals of similar ages and backgrounds rather than dividing them based on their remand or sentenced status:

"If you are sitting with a 56-year-old man on the landing, who is sentenced, and a 22-year-old man on remand, and you get the opposite over. To us, it makes more sense to double the people who have the similar age, similar background and it makes a better match, regardless of whether they are sentenced or remand" (So2)

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<sup>&</sup>lt;sup>3</sup> Staff interviews are labelled 'S' with a number to indicate different staff interviewees. Prisoner interviewees are labelled 'P' with a number to indicate different prisoner interviewees.

If staff were in the position to maintain the separation between remand and sentenced prisoners and match cellmates in terms of background and individual features, this was the course of action they took. However, when faced with limited numbers of single cells, staff prioritised CSRA classifications and smoking status above separating remand and sentenced prisoners (see Figure 2). Staff also highlighted how they were required by policy to uphold the separation of remand and sentenced prisoners even though experience suggested that matching individuals on their background and individual features may be equally as important. Such experience was based on their own encounters but also informed by the experiences of their colleagues. Despite not being required by policy, staff considered several other factors when allocating cells based on their experiences of cell-sharing. One of the most important of such "tier two" considerations was the mental health of potential cellmates (see Figure 2). Unlike the CSRA policy, staff did not just consider the potential risk of violence posed by mental health conditions, but also considered how sharing a cell may affect the mental wellbeing of potential cellmates and their quality of life. For instance, mental health conditions, such as Obsessive-Compulsive Disorder or those related to previous trauma, could make it difficult for individuals to share a cell, especially if the cellmate was not aware or understanding of their personal history:

"You'll spot the ones with OCD. [...] If you have somebody else coming in who does something outside their routine, it is just not coping for them." (S11)

"You know, the like of somebody who has been maybe abused in the past and he doesn't want to double up. So, you are taking a single cell for him." (So5)

Yet, staff had to be aware of these mental health issues for them to be taken into consideration and often staff felt that evidence was needed to justify the individual's entitlement to a single cell on these grounds:

"I need something from say the psychiatrist, to say there is something there, for me to do that." (S11)

Mental health conditions were viewed as an important factor to consider by staff as they viewed assessing how cell allocation would impact a person's mental health as part of their obligation to safeguard individuals in their custody.

In a similar way, past experience also resulted in the health of potential cellmates being considered by staff as another factor that should be considered as part of their duty of care towards prisoners (see *Figure 2*). Staff explained that the physical health conditions of some prisoners may limit their mobility or require additional support. They reported that individuals with physical mobility issues often needed a bottom bunkbed, while people with epilepsy were often placed in a shared cell so their cellmate could alert staff in the event of a seizure:

"You also have a lot of people coming in with bad backs... so they have to have a bottom bunk" (So5)

"His cellmate put him into the recovery position and had him in the recovery position on the floor, and had already called for help, but in the meantime did everything that he could do to try and keep him safe." (So9)

Staff also considered whether individuals were facing any health risks due to drug detoxification. Staff recognized that if an individual was detoxing from drugs or alcohol, assigning a cellmate could function as a safeguarding mechanism:

"You get people coming off alcohol and drugs [...] and they would be more prone to seizures, more prone to collapse, fainting spells, things like that, and you try and keep them doubled." (So9)

The propensity of potential cellmates to engage in drug-use was another consideration for staff when allocating cells. This was based as much on staff's desire to maintain good order and discipline on the landing as the need to safeguard individuals in their custody:

"Certainly if I was on the landing and I knew two boys were doing drugs, then I would be making a phone call up to security to say, we need to get these guys split, because they are feeding off each other. (So6)

There was also a reluctance to place individuals who did not use drugs or who were attempting to desist from drug use in a shared cell where they would be exposed to a cellmate's drug use.

"I think by being in a cell with that person, they just automatically become involved in it" (So1)

Nonetheless, whilst staff considered drug use when allocating cells, it was not clear what course of action should be taken when this issue competed with other considerations relevant to cell allocation. In particular, a lack of available single cells on a landing could place staff in a position where they had to consider placing two individuals known to be using drugs in a shared cell or to allocate someone who did not use drugs to a cell with a person who did.

Additionally, staff interviewees identified the emotional state of a person as an important factor they considered when allocating individuals to a cell (see *Figure 2*). Staff recognised the value of peer support that a cellmate could provide and appreciated that cellmates could raise the alarm if they were worried about the behaviour of distressed individuals:

"Sometimes the best thing for them is to have them doubled up with somebody, so that they are not on their own and they are not in a cell by themselves, which increases their risk [...] that they could harm themselves. But also it gives them the support of having somebody in the cell with them." (So7)

However, not all staff considered the emotional state of a person when making cell allocation decisions, as reflected by this factor's lower position in *Figure 2*. Staff generally only considered the individual's emotional state when the individuals themselves raised this as an issue or where procedures relating to supporting vulnerable prisoners indicated that an individual should share a cell. In these situations, staff had to carefully consider which potential cellmate may be an appropriate support: for example, the relationship between these individuals or the prospective cellmate's own psychological state. This was not only a factor considered when deciding who to place in the cell but a dynamic process that involved monitoring the supporting cellmate's wellbeing throughout the cell-sharing arrangement:

"We tend to find that before it gets too much for one person, that the staff will intervene at that stage and just maybe give him a bit of a break and move someone else in. Or relocate the other person." (So9)

Other factors considered by staff when making cell allocation decisions included individual characteristics and personalities. Staff assessed the suitability and compatibility of individual

characteristics based on their own beliefs and experiences of what seemed to work well. For instance, staff considered issues like hygiene levels when assigning cells:

"I mean there is someone here who is Standard, but he covered his room in poo and food and other bodily fluids. So, you just wouldn't put anyone in with him. You could, but you just wouldn't." (So1)

Other characteristics such as background, age and personalities were factored into decision-making:

"Sometimes age would come into it. You are not going to put an older prisoner in with a young guy that wants to play music all night. [...] You kind of try and sort of match them up if possible that they are sort of the same...Similar sort of personalities maybe." (S15)

Whilst not covered formally by prison policy, based on their experience, staff considered these factors to be important and used their own past experiences and that of their colleagues as a form of 'trial and error' in identifying which personalities and backgrounds were compatible. Staff also considered the ethnicity, cultural backgrounds and languages of cellmates when assigning cells (see *Figure 2*). While CSRA policy referred to ethnicity, this reference was only in the context of how ethnicity may influence the potential for violence. In contrast, staff tended to take a broader view of ethnicity, cultural background and language, considering how these factors may impact on the relationship between cellmates, leading them to place foreign nationals who spoke the same language in a cell together, to ensure they were not socially isolated:

"We try our best to put two people in with the same sort of language, and then you can see their attitude change, obviously because they can maybe offload things [...] and they can speak away in their own language." (So8)

Nevertheless, whilst staff tried their best to facilitate such cell allocations, this factor was of diminished importance when other competing factors were at issue, such as mental or physical ill health.

Finally, some staff considered the preferences of the individuals involved (see *Figure 2*). These preferences often related to there being pre-existing, positive relationships between potential cellmates which could make cell-sharing itself more tolerable. Despite this, some staff disregarded these preferences given the many competing factors to be considered:

"You really can't accommodate every single person's preferences or personality or whatever. I suppose that's what being in prison is. We provide you with everything that we need to, and I suppose being in with your friend or someone who you really like, isn't our priority." (S01)

The variation in how staff perceived the importance of considering individuals' preferences points towards a key tension in decision-making on cell allocation. Some officers described themselves as quite "hard line" (So3) or rigidly authoritarian when making decisions, being less inclined to grant requests about cell allocation or to place much weight on individual preferences. This attitude had implications for how staff dealt with refusals to share a cell:

"He was put under restraint and then relocated into the cell. He was forced to share that cell" (So<sub>3</sub>)

The adoption of a "hard line" (So3) approach may be partly explained by some staff's belief that "pandering" (So3) to what they viewed as efforts by prisoners to influence cell allocation decisions undermined staff authority. Yet, some staff questioned whether this was an appropriate mindset when the overall goal was the wellbeing of individuals and the good management of a landing:

"Staff will say to me, but you are only letting them get what they want. But what's wrong with letting them get what they want sometimes, if it protects them and protects me in the job that I have to do." (S11)

Such divergent attitudes towards dealing with individuals' requests, preferences and objections have important connotations in terms of the extent to which decisions on cell allocation alleviated the pains of imprisonment associated with cell-sharing and how staff use their authority when allocating cells. In particular, these findings suggest that staff often held very different viewpoints about whether prisoners should be engaged in such decision-making and how cell-sharing decisions should be communicated to prisoners.

These very different attitudes and approaches to cell allocation decision-making may be explained by a lack of training and guidance on how to balance the large range of sometimes competing factors that they considered. As a result, staff were often conscious of the implications of making the wrong decision when allocating cells.

"Well it relates to the fear culture of in here and it relates to the fact that we can be prosecuted for corporate manslaughter if somebody in our care dies and we are found to be at fault and we didn't do what we should have done." (So7)

Often staff were fearful they would be held personally responsible for any negative consequences that could emerge as a result of cell-sharing decisions, with such feelings being particularly heightened during overcrowding:

"You can feel the stress in the air in (the unit) when the numbers go up, without a doubt." (S13)

Policies governing cell allocation were not reflecting how much information staff were considering in practice when making cell allocations. This makes assigning individuals to shared cells difficult for staff in the absence of training and guidance on how to balance the wide range of factors that they believed were important to consider when allocating shared cells.

## 3.2. Prisoner Perceptions of Factors Influencing the Pains of Cell-Sharing

Prisoners' perceptions of factors which were important for staff to consider when allocating people to shared cells largely mirrored the factors which staff were already considering. They expressed their agreement that the factors already appearing in prison policy (i. e. the CSRAs and smoking status) were important as they were concerned for their own safety and health if these factors were not considered:

"There's always that thing in the back of your head that I might not wake up the next day if he was to snap." (P28)

"[Sharing a cell with a smoker] I had said look, if you don't move him, I'll be phoning my solicitor. You are breaching my human rights (P21).

In general alignment with staff opinion on the separation of remand and sentenced individuals, prisoners did not think this distinction mattered as much as some of the other considerations. However, what was regarded as important was the placement of individuals who were at different stages of their sentence or who had very different sentence lengths in a shared cell as this could be difficult to cope with:

"I've had people like that going, oh fuck, I've three weeks left. How am I going to do this? And I'm going what? You fuck... I wish I had three weeks." (P33)

Prisoner interviewees also agreed with the factors that staff considered based on experience rather than policy, such as physical and mental health conditions that might mean a cellmate required support. Prisoners with experience of supporting emotionally distressed cellmates spoke of a sense of responsibility that could feel like a burden at times:

"It bears an awful lot on your shoulders. It can make your time heavier." (Po4)

As previously discussed, staff were aware of the toll supporting a cellmate could take on an individual's wellbeing and actively monitored this.

Prisoners also deemed it entirely appropriate for staff to match up cellmates in terms of their ethnicity, backgrounds and personal characteristics. Indeed, the importance they attached to ensuring compatible personalities suggests that prisoner interviewees may regard this factor as meriting a greater importance than was currently placed on it in staff deliberations:

"Hardest thing about cell-sharing? Just putting two people in a cell that clash. Their personalities clash." (P07)

Opinions on how exactly drug use should factor into cell allocations varied depending on their own drug use. Those who were not using drugs or were attempting to desist from drug use agreed with staff that they did not wish to share a cell with others who were taking drugs as it put their efforts to desist at risk:

"The other person in was sniffing drugs off the table. Do you want some? Do you want some? And I'm going no, no, no. and then after a couple of weeks I just give in again. I was back to square one." (P20)

In contrast, those who were taking drugs were often keen to share a cell with another drug user to take advantage of the shared drug supply.

A key difference between staff and prisoner perceptions on what mattered when making decisions relating to cell-sharing was the weight that was attached to the individual's preferences. Whilst this was lower down the list of priorities considered by staff when making such decisions, it was important for prisoner interviewees to have their preference considered:

"And you can't always pick your cellmate, but if you can... It is a bit better." (P32)

As discussed above, staff held different views on how important it was to consider prisoners' preferences on cell-allocation. Yet, taking account of the preferences of potential cellmates could either exacerbate or mitigate a sense of unfairness among prisoners. Often prisoners' first preference (i. e. a single cell) was not possible but it was still important to them that their preferences in terms of the conditions of cell-sharing were considered (e. g. the identity of their cellmate or how long they would be sharing a cell):

"So I let him choose; which one of these guys do you want to go into the double cell with. He was happy with that. Short term. It was only short term." (S14)

When staff did not consider prisoners' preferences, it had a negative impact on staff-prisoner relationships and detracted from perceptions of fairness of prison decision-making processes. On the other hand, considering prisoners' preferences enhanced individuals' feelings of being treated fairly, which in turn made their acceptance of cell-sharing more likely, especially when they would have preferred to have their own cell.

Furthermore, prisoner interviewees placed great value not only on what factors were considered but on how the cell allocation decision-making process was carried out by staff. They emphasized how important it was that they were part of the decision-making process. They expressed a sense of empowerment when they were able to exercise autonomy and agency by choosing a cellmate:

"There is a big difference between you asking, can I move to a different cell? Because you can say, well I sort of got on with your man there. He's on his own, could I move in with him? Or someone else coming to be with you." (Po6)

Prisoners spoke of how conversations with staff and efforts to understand their perspective were valued, particularly by those who struggled in shared cells.

"There was a very kind prison officer who works in this house now as well, and I spoke to her like, and she could see how much it meant to me, like, to be by myself and she sorted it out for me." (Po5)

These types of conversations fostered a sense of dignity and helped to bolster good staff-prisoner relationships. A lack of involvement in the cell allocation process could lead individuals to feel as though they had not been treated fairly by staff. This exacerbated their unhappiness with the situation that they found themselves in and amplified their feelings of disempowerment and lack of agency. Where individuals felt excluded from this process, their reaction to allocation to a shared cell could lead to violence towards staff and cellmates or harm to themselves:

"I actually witnessed a member of staff get very badly assaulted [...] because they tried to double up a prisoner who didn't want to get doubled up" (Po2)

Reacting in such a manner was a way for individuals to express discontent with their allocation to a shared cell. In such circumstances, this was often seen as the only way to make their opinion clear, particularly if individuals felt disempowered as a result of more "hard line" (So3) staff responses to their disinclination to share a cell. Such an occurrence, however, represents

a breakdown in cell allocation decision-making policy that should be addressed, given the risk of harm and violence that may occur.

### 4. Discussion

Based on these findings, a two-tiered model was proposed to represent staff perceptions of what were the most important factors to be considered when allocating adult male prisoners to cells, distinguishing between factors that were mandated by policy and those informed by experience. Staff were required by prison policy to consider the risk of violence between cellmates, smoking status and remand or sentenced status. These factors tended to be prioritised in staff decision-making by virtue of the attention they received in policy. Yet, based on their experience, staff believed that it was also important to consider a range of other factors if the potential pains of cell-sharing were to be minimised. These factors were not considered in official prison policy governing cell allocation decision-making and included factors such as prisoner mental and physical health, drug use, emotional states, personal characteristics, ethnicity, language and individual preferences. As these factors were not covered by policy, there was often a lack of guidance and training on how to balance these factors and any tensions between them when making decisions, leading staff to use their discretion. This was often informed not only by their own years of experience but also by the experiences of their colleagues. Additionally, staff frequently lacked guidance on how to manage competing policy priorities, resulting in some of the European Prison Rules not always being implemented, as smokers were sometimes required to share with non-smokers, as well as remand and sentenced prisoners, due to population pressures or efforts to ensure that individuals deemed a high risk of violence did not share cells. In answer to the second research question, generally prisoner interviewees agreed with staff in terms of what factors were important to consider when allocating cells. However, their opinions varied on the weight that should be placed on their preferences, with prisoners regarding this as a key consideration if the pains of imprisonment associated with cell-sharing were to be lessened. Furthermore, prisoners regarded the nature of the decisionmaking process itself to have an impact on the pains they experienced, with a lack of autonomy and feelings of disempowerment emerging when they were allocated to a shared cell against their wishes and without their views being considered.

From these findings, several recommendations can be made to improve policy and practice on cell allocation. In the first instance, cell allocation policy requires further development to accurately reflect the factors staff consider when allocating cells. Current policy is predominantly focused on CSRAs, which are concerned with limiting the risk of violence between cellmates (Keith, 2006). A more holistic approach that places individuals' wellbeing and the minimisation of the pains associated with cell-sharing at the forefront of cell allocations would require developing policy and guidance for staff on how to make decisions that take a wider range of factors into account. Moreover, there is a need for staff to receive training on how to balance or prioritize competing factors when there is a lack of single cells available. Policy should be adapted to make clear what factors should be prioritised, not only in terms of the factors already appearing in policy, but those which participants regarded as important, such as mental and physical health, drug use, emotional states, etc. These factors are not currently given much attention in cell-sharing policy. Based on these findings, staff would benefit from guidance from policy and training on assessing and balancing all factors highlighted by this research.

Whilst staff's application of their own experience often reflected a desire to allocate cells in a manner which promotes wellbeing in prison, making such decisions without training or guidance may produce unintended negative outcomes. For instance, staff considered the emotional state of those who may require support from a cellmate. This can be beneficial for individuals who are distressed (Harreveld et al., 2007) but staff take these decisions in the absence of welldeveloped policy and training on managing such a situation appropriately; for example, without the requirement to regularly check in with the supportive cellmate to ensure that their own wellbeing is not adversely affected by the cell-sharing arrangement and to document this accordingly. Moreover, while staff may be right to consider a range of factors when allocating cells, not all staff will have opportunities to learn from 'trial and error' or indeed reach the same conclusions on what has worked well. Without specific training, reliance on their own experiential learning or learning from colleagues may reinforce negative features of prison officer culture in relation to managing cell-sharing, in the form of the "hard line" approach detailed above. This points to the need to move towards making cell allocations decisions based on a systematic, evidence-based understanding of relevant factors rather than anecdotal insight, especially in relation to how staff consider issues relating to drug use and the use of cellmates as support mechanisms. At the same time, it is important that any future development of policy preserves the necessary flexibility and pragmatism needed to reach decisions on cell allocation that will minimise the difficulties of cell-sharing, given that each person who is the subject of these decisions will require a unique consideration of each of these factors.

Further, while these findings point to the need to develop policy governing the content of cell allocation decision-making, it also highlights the need to adopt changes to the process by which such decisions are made. By mitigating feelings of disempowerment and a lack of agency, the opportunity to voice concerns and opinions can increase the extent to which cell allocations are perceived as fair. Hulley, Liebling and Crewe (2012) suggest that the nature of decisionmaking processes can be experienced as more important than the outcome if decisions are made in accordance with the principles of procedural justice. This is of particular importance for cell allocation decisions, as population pressures in prison may necessitate placing individuals in shared cells, despite a preference for single cells. By treating individuals fairly and with respect, even unpopular decisions (e.g. allocation to a shared cell) can deliver a sense of procedural justice and dignity to that individual (Hulley, Liebling & Crewe, 2012). The impact of such treatment cannot be underestimated as individuals who feel that they have been treated fairly in prison have better wellbeing and lower levels of re-offending upon release (Liebling, Durie & Stiles, 2005; Slotboom et al., 2011; Listwan et al., 2013; Beijersbergen et al., 2014; Beijersbergen, Dirkzwager & Nieuwbeerta, 2016; Brunton-Smith & McCarthy, 2016; Wallace et al., 2016). Undertaking cell allocation decisions in accordance with procedural justice principles may not only minimise the lack of autonomy individuals experienced as a particularly acute pain of cell-sharing, but it also has the potential to reduce the risk of violence, distress and disorder occurring as a result of individuals' frustrations at being allocated to a shared cell without feeling as if their views have been considered.

Promoting such practices in cell allocation decision-making may be hindered by staff's concerns that their authority will be undermined. Given population pressures and accommodation availability, prisoner involvement in the decision-making process is unlikely to be more than a nominal feature, yet it plays an important role in ensuring individuals respond in a less negative way when allocated to shared cells. Listening to prisoners' concerns and explaining the reasons for decisions can increase perceptions of the fairness of decision-making processes,

and thus reduce the risk that such decisions will be met with violence or distress. Prisoner involvement is also important if staff are to establish whether cell-sharing is preferable for specific individuals, in accordance with the European Prison Rules (Council of Europe, 2006). Of course, good staff-prisoner relationships are required if individuals are to perceive the opportunity to engage with staff as a meaningful conversation, rather than a superficial exercise. Indeed, good staff-prisoner relationships are also necessary for individuals to feel comfortable divulging sensitive, personal yet relevant information that would make cell-sharing particularly difficult (e. g. history of trauma or mental ill-health), enabling staff to use such information to reach more appropriate decisions. It is also recognised that overcrowded, underresourced and short-staffed prisons limit the ability of staff to engage with prisoners or to build the 'right' relationships that would facilitate such interactions (Liebling, 2000; van Ginneken, Sutherland & Molleman, 2017). In this way, the pressures under which prison officers operate can stand in the way of achieving best practice in cell allocation decision-making and reducing the pains associated with cell-sharing.

Another point raised by this research is how other factors, such as individual preferences, preexisting relationships or the need for emotional, physical or medical support, may be perceived as overriding the imperative to keep remand and sentenced prisoners separate. However, further research is needed to investigate if this is unique to the NIPS or also experienced in other larger prison populations and if there are any conditions under which it may be beneficial for remand and sentenced prisoners to share a cell. This research also draws attention to the practice of allocating cellmates to provide emotional, physical or medical support. This practice raises complex questions which warrant further investigation. For example, what are the implications of this practice for those providing such support and how may it affect their own wellbeing? To date, this issue has not been explored and such questions are all the more pressing given the complex needs of an increasingly ageing prison population (International Committee of the Red Cross, 2018).

Having said this, there are several limitations which limit the generalisability of the findings and the conclusions that can be drawn from the data. Firstly, this study focused on the factors influencing cell-sharing among adult men in Northern Ireland, with individuals who did not speak English, were mentally/physically unwell during the research, political prisoners and those who posed a risk of harm to the researcher being excluded from the sample. Secondly, this study focused on cells that are shared by two individuals. Further research is needed to investigate the factors influencing cell-sharing decisions in prisons housing individuals in larger, dormitory accommodation. It should also be noted that NIPS has a very small prison population; the issues and priorities concerned with cell allocations amongst larger prison populations may be different. In such conditions, the separation of remand and sentenced prisoners may be more important than participants in this study considered it to be. Finally, the cross-sectional nature of this research design means that only a snapshot of the views and experiences of individuals at one point in time were examined. Future research would benefit from taking a longitudinal perspective to examine how cell-sharing decisions may impact on people and how the factors considered may change across time. Such research would help to develop insight and evidence on how to conduct more nuanced, in-depth considerations of what may be the best cell allocation for each individual, to enhance wellbeing as well as to reduce risk. For this to be achieved, staff must consider a broad range of factors that impact on individuals' wellbeing and experiences of cell-sharing, such as personality clashes, drug use, personal hygiene and mental and physical health issues. The current CSRA cannot adequately

achieve this, given that its scope and rationale is limited to the assessment of the risk of potential violence between cellmates, largely based on previous offences and evidence of racism or homophobia. Based on this research, development of policy that supplements the CSRA with guidance for staff on how to weigh up this wider range of factors is required, to yield cell allocations that minimize not only the risks associated with cell-sharing but the pains associated with cell-sharing as well.

Despite these limitations, this study offers valuable insight by enhancing our understanding of how staff undertake cell allocation decisions. It supplements the European Prison Rules' recommendation that individuals only share cells when it is preferable by highlighting what factors determine when cell-sharing is preferable, according to both staff and prisoners (Council of Europe, 2006). Furthermore, it adds to our knowledge by identifying ways in which policy, practice and training on cell allocation decision-making can be improved and the pains associated with cell-sharing lessened. Overall, it is argued that adopting a more holistic approach to cell allocation decision-making that goes beyond considering the risk of violence would be beneficial and help potentially offset some of the more negative effects of cell-sharing.

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