

urging the reader to interrogate seemingly progressive “reformist” approaches and by reinforcing the value of community in the context of the prison estate in Britain, Cattermole develops the abolitionist terrain established by the likes of Angela Davis and Ruth Wilson-Gilmore.

Subsequently, in Part 4 of the book: “Resources” Cattermole shifts his focus to actualising these smaller, yet transformative future steps. Initially he does this by sharing a valuable set of contacts to support currently and formerly incarcerated people who are engaged with the criminal legal system at various stages. These include (to name but a few) the Bent Bars Project, a letter-writing project which provides support to LGBTQ+ incarcerated people; The Empty Cages Collective, a small anarchist group dedicated to ending oppression in all forms who have engaged with the prison system in varying capacities; and Community Action on Prison Expansion (CAPE), a collective of grassroots coalitions opposing prison expansion across England, Wales and Scotland.

The author contributes to a growing and diverse body of scholarship within the criminological and socio-legal research terrain by centring lived-experience accounts of incarceration. Cattermole and the recent additions by scholars such as Baker (2017) and Sanchez (2019) aim to “bring readers into the lived reality of our prison system – its effects, its contradictions, and its failure to rehabilitate offenders or promote public safety”.⁴ By bringing together a range of traditionally marginalised discourses about incarceration, *Prison: A Survival Guide* constitutes a rich and distinct addition to this contemporary research landscape. Cattermole provides a valuable critique of the penal system in Britain that is underpinned by an abolitionist

spirit in tandem with a penal survival praxis, which is primarily designed to support presently and formerly incarcerated people in navigating the penal system. As such, the book constitutes a refreshing, trustworthy and supportive ally for those faced with a prison sentence, or for those with loved ones who are engaged with the penal system.

By setting the record straight on the multitude of reductive and click-bait media narratives of incarceration, Cattermole ensures that the value of the text extends beyond those directly engaged with the criminal legal system. Within his account, he turns his attention to a different, but an interconnected cog in the carceral system – the court system. He persuasively advocates an avenue for further research: *Court: A Survival Guide* (p. 3). Fundamentally, Cattermole’s considered combination of varying forms of knowledge equips the reader with a deeper appreciation of the complexity of incarceration, and as such the text is a vital source for all. Simultaneously, the book prompts readers from all backgrounds to confront the violence of the carceral state and to search for alternatives in an increasingly punitive age punctuated by loss, suffering, and violence.

Felicity Adams is a PhD candidate at Keele University

The Prison Doctor

By Angela Brown

Publisher: HQ (an imprint of Harper Collins) 2019

ISBN:978-0-00-831144-5

Price: £8.99 (Paperback).

For many years, literature on prison health care was relatively sparse and under former Home Office policy, was generally shrouded in secrecy and

discouraged. An exception was the pseudonymous Dr Theodore Dalrymple whose unhelpful, jaundiced view of prisoners frequently appeared in sections of the press. Vivien Stern, in *Bricks of Shame*¹, records a prison doctor being rebuked for writing about prison hygiene in *The Times*. External access to the then *Prison Medical Journal* was denied. When Professor Joe Sim published his *Medical Power in Prisons*² he noted that research in this area had often led to litigation against individuals and he had needed to pass his drafts to lawyers as a safeguard.

Secrecy led to suspicion of poor quality medical provision in prisons and indeed, there was evidence to support this. There were, of course, doctors, nurses and hospital officers (roughly the equivalent to medical orderlies in the military) who were models of professional practice. It was Dr Shan Biswas who, in the 1990s, advocated the founding of a College of Prison Medicine to recognise the unique nature of medical practice within prisons and to share best practice with colleagues. Thankfully matters are different today and the Royal College of General Practitioners Secure Environment Group has taken Biswas’s aspirations perhaps further than he could have hoped. Since the abolition of the inward-looking, self-protecting Prison Medical Service, there has been the opportunity for prison doctors and nurses to contribute to the public debate. Dr Angela Brown’s book is a welcome addition to the field.

Not being an academic text, nor pretending to be, she charts her career from being a GP in a comfortable Buckinghamshire practice through prison doctoring at HMP Huntercombe, Wormwood Scrubs and Bronzefield. She left 20

4. Sanchez, Angel E. 2019. In Spite of Prison: Developments in the Law. Harvard Law Review 132: 1650-1683

1. Stern, V. (1993) *Bricks of shame: Britain's prisons* London: Penguin

2. Sim, J. (1990) *Medical power in prisons: Prison medical service in England 1774-1988* London: McGraw Hill

years of general practice in the face of NHS reforms that she feared would change her personal holistic, almost pastoral, approach to her job, in favour of tick boxes. But why prisons? An article she wrote for *Pulse* magazine, explaining her departure, attracted Prison Service attention and she was invited to apply. HMP Huntercombe presented her with a challenge and she believed that, though a different sort of medical environment, she might just make a difference.

She rapidly discovered that the reasons for seeking medical help were not always straightforward. How could she have suspected, from general practice, that repeated complaints about patients' painful feet were attempts to be 'prescribed' their own shoes? Many appointments were attempts to cajole her into prescribing extra drugs. Angela Burns soon became attuned to these manipulations. After five years and amidst rumours of closure, she left to face a qualitatively different challenge at HMP Wormwood Scrubs. And what a challenge it was. Suicides, attempted suicides, hostage taking, serious life threatening and disfiguring assaults, accompanied by intractable problems of rats and cockroaches. Dr Brown paints a vivid picture of a health care regime just about managing to get by. She emphasises the necessity for and general success of teamwork within the health care function and beyond and the reliance of staff, of all grades, to look to each other for mutual support. They were all part of the same family. Strangely, amidst the mayhem of daily life, she found appearing in Coroners' Courts one of her more stressful duties.

Amanda Brown's sympathy for the plight of many of her patients shines through but her compassion never obscures objectivity or

professionalism. It must have been a shock to be required to work alongside a locum doctor described as a bully who treated prisoners with contempt. He lasted only a few months but there is a clear warning as to the care needed in recruiting people for a job calling for endless patience and sensitivity. There are one or two nods to a dynamic many readers will find familiar: the sometimes prickly relationship between Security and Health Care. How can a hospital escort be provided at the weekend when staffing is cut to the bone? How to explain to the prisoner with the hospital appointment that because his escort arrived late, he can't be seen for another six weeks? She describes sometimes having to fight to get prisoners transferred to hospital at all.

It was at Wormwood Scrubs that Dr Brown started to feel disaffected from her social life in Buckinghamshire where her friends' first world problems seemed so remote from her daily experience. She found her values changing. As elsewhere, she credits her husband for his unfailing support. The impact of prison work upon family members often goes unrecognised and it is pleasing to see her crediting her family here. One senses that after her time at Scrubs, Dr Brown was simply becoming exhausted. She was given the opportunity of transferring to HMP Bronzefield, working a three-day week and her first experience of female prisoner patients. Amanda Brown's account of her work in the two previous establishments is permeated with pen pictures of many of the prisoners and staff she encountered. The Bronzefield section is almost entirely that. Again, for the general reader, this provides a vivid account of some of the tragic backstories and also those not so tragic. Drugs, childhood abuse, domestic abuse,

prostitution on the one hand and the glamorous lifestyle of being married to a Mafioso on the other. Often, as at Scrubs, she finds that it is not just the delivery of health care that is important to the prisoner but little things like not being judged and, whether strictly ethical or not, the occasional hug.

Her book's one shortcoming is nevertheless likely to appeal to the general reader. Much of the action is telescoped. Seven years at the Scrubs is condensed into 138 pages and thus drama appears to characterise of almost every minute. Likewise, she makes frequent reference to various notorious prisoners, perhaps for effect but not because they have been her patients. The book might also have benefited from rather more careful editing. Why an introduction with a graphic account of a woman giving birth to a child alone in a cell at Bronzefield? Dr Brown was called to the emergency and the child survived (unlike a similar case at the prison under investigation as I write³). Questions as to the adequacy of pre-natal medical care might have been addressed. We learn that, at Wormwood Scrubs, Dr Brown is 'no longer intimidated by prison officers, whatever their rank' but on the following page she says that she is. Further, Huntercombe is described as holding 15-18 year olds, 18-21 year olds and also an escapee from a maximum security prison. Unlikely.

The book will give the general reader a rare insight into the perhaps arcane world of prison medicine. When leaving her treatment room, one prisoner announced 'You've got a good heart, Dr Brown.' This is quite clear from her book.

Peter Quinn is a retired Prison Governor and formerly was a Visiting Fellow, at Bristol Law School, University of the West of England, Bristol.

3. See BBC News (04 October 2019) *HMP Bronzefield: Newborn baby dies at women's prison* available at <https://www.bbc.co.uk/news/uk-england-surrey-49935191> accessed on 08 June 2020