

fortnightly newsletter in eight languages delivered to every cell in the Irish Prison Service. The fast rollout of video-calling in all the jurisdictions also made a difference to foreign nationals, especially at HMP Huntercombe (p. 65). In staff-prisoner relationships, the same types of differential outcomes applied as with Black, Asian and minority ethnic people (above), while the anxiety of many foreign nationals about their immigration status was exacerbated during the pandemic by the increased difficulty of contact with Home Office staff, or with external support agencies.

In the community, the Irish Traveller and Roma groups have been particularly impacted by the pandemic. The Taoiseach's office has said that 'existing vulnerabilities of the Traveller and Roma communities in health and accommodation put them at particular risk of contracting the virus' (p.77f). This applies equally to mental health: 'for members of [these] communities, who are already disproportionately impacted by mental illness and suicide, the impact of isolation may be critical' (p.81). ZMT research supported this, citing reduced access to culturally appropriate support and advocacy services. Chaplaincy support again comes through as a strength.

The inability to see family has hit these prisoners hard. Traveller families often have less access to technology and internet than most settled-majority people, and a requirement for proof of address caused difficulties initially.

Finally, the book considers the fast-changing issues of moving out of lockdown. The authors mention 'video visits' as a real gain, but they assert, controversially, that 'a pre-pandemic regime is not what post-pandemic prisons need'.

The book's conclusions in relation to the minority groups which it studies are modest. The impacts common to all prisoners are increased by existing vulnerabilities

of these sub-populations and by patterns of (mainly indirect) discrimination. There are some redeeming factors, such as video visits, though even they have downsides, for GRT people in particular. The book presents its evidence concisely, and is as valuable for its summaries of the general impacts of Covid-19, and of experiences of discrimination, as for the case which it presents for differential impact of the pandemic on specific minority groups.

### **Prisoners' Families, Emotions and Space**

By Maria Adams

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Reviewer: **Lynn Saunders**  
*OBE is Professor of Law and Social Sciences at the University of Derby*

As the title suggests this book explores the experiences of prisoner's families. It considers the experiences of family members visiting three Scottish prisons, before, and during Covid restrictions. Family members are interviewed and the emotional impact that visiting prisons has, is explored. The book gives a rare voice to family members and their experiences of visiting prisons, how they deal with the process and impact of a period of imprisonment, featuring the themes of space, emotions and identity.

The author had experience of working in prison as a playworker and her analysis is much focused on the implications of the restrictions to visits on the emotional wellbeing of family members, and the limitations of visiting areas in prisons. She also explores how the attitude and approach of prison staff impact on the experience of visiting a family member in prison.

She argues that emotions are a neglected area in the sociology of prisons research. The book offers insight into how the experiences of visitors to prisons influence both the organisation of the institution and its policy.

The book is based on a PhD study and explores a number of themes which are divided into chapters. These include, how prison visiting rooms can sustain relationships, how strict body searches and security checks are an example of social control of prisoner's families, how the extensive periods that family members need to wait at a number of stages in their visits are further exercises in control, how families manage adversity, and how the space allowed for visits to prisons is often a matter of local policy.

The introduction explores the context of the research on which the book is based and outlines the nature and necessity of the visiting restrictions as a result of the Covid pandemic. She also explores the phased resumption of visiting arrangements describing them as 'sterile' (p. 9) and challenging for visitors. Researched in three prisons in Scotland, the book explores the varying architectural designs and how they had an impact on the visitors' experiences. In particular, the theme of 'waiting' (p. 68) is explored and how this is a feature of a number of aspects of the visit. She explores the implications of the length of time it takes for visitors to travel to prisons, and when prisoners are moved with very little notice how unsettling this was for family members. The author suggests that 'waiting' is a form of social control experienced by visitors that leads to shame and fear.

The author suggests that families' survival of the incarceration process involves both resilience and time, and that family members adopt a range of coping strategies. These include 'keeping

busy' and 'activism' which she describes as 'subtle changes that contribute to improving families' confidence and self-esteem'. (p. 91)

Chapter 2 focuses on how gender is an important contribution to understanding the experiences of prisoner's families and how a caring role can provide coping mechanisms for families to deal with a period of imprisonment. The author focuses on the subject matter from a Feminist perspective exploring the relationship between space, place, and the focus of power. She comments on the importance of visits while also acknowledging their limitations as a substitute for the home environment.

The role of visiting rooms in sustaining relationships for prisoners and their families is explored in Chapter 3. The author discusses whether the visits room is a 'place of care or a place of confinement' and explores the role and function of children's visits sessions describing them as 'artificial home life'. (p. 28) She concludes that children's visits cannot replicate the home environment, but that they play an important role in the maintenance of contact between prisoners and their children. Chapter 4 then documents families' experiences of space dominated by social control and how space for families is regulated by prison authorities.

The recurrent theme of 'waiting' both during the prison visiting process and in the wider criminal justice process, is discussed in Chapter 5, and whether this is an exercise in social control. However, the practical management of the visiting processes are not considered in the discussion. The author argues that waiting is a significant part of families' lived experience of visiting prisons. One research participant states that they are 'doing the sentence with them'. (p. 71)

Chapter 6 entitled 'Surviving the Incarceration Process', explores how incarceration affects families and the importance of the role of social support in improving their resilience. The importance of 'space' in determining the experiences of families is examined in Chapter 7. The author concludes that 'space, emotions and identity' and criminology and geography are important lenses through which to analyse the experiences of prisoners and their families.

The book is an interesting exploration of the first-hand experiences of family members in a much under-researched area. The emotional impact of a prison sentence on family members and the effort required to maintain relationships is something that both prison managers, and policy makers should bear in mind when designing visiting areas and services for visitors.

### **What we fear most: Reflections on a life in Forensic Psychiatry**

By Ben Cave

Publisher: Orion Publishing Co

ISBN: 9781841885544 (Hardback)

Price: £18.99

*Reviewer: Ray Taylor LL.M. is a security policy official at His Majesty's Prison and Probation Service.*

What we fear most is an apt title for a work that explores, not just a life in forensic psychiatric medicine, but the social environment that nurtures the conditions such medicine has developed to treat. In his autobiography, Ben Cave explores and reflects on his own background and environment as much as he does that of his patients and the other people around him. Unlike most autobiographies, however, the book does not merely track the humdrum events of the subject's lifetime. This one takes a more detailed and contextual look at the

author's life, reflecting on all he has learnt of his profession. It starts with the author's formative years living within a dysfunctional middle-class family, and how his early experiences helped him to find his calling as a doctor specialising in psychiatry. It continues by providing an insight into some of the conditions he has treated through the experiences he has shared with his patients.

For in Cave's work, the focus of the narrative is on the relationship between patient and psychiatrist and how this has assisted in developing a greater understanding of the conditions the author has treated over the decades. The 'fear' in the title is, if I understand the author correctly, one of the typical aspects of presentation noted in the book. This should be no surprise to anyone who has spent any time working in carceral environments or those who have interacted with people dealing with some form of mental distress or illness, whether diagnosed or not. See a person arrive in prison for the first time and you will often see fear in their eyes, their behaviour, and their interactions with others. For those convicted of a violent offence in which an unbalanced state of mind was a causal factor, the part fear may have played is all too evident in the case studies cited by Cave. These 'cases' are explored through conversations with the patient and the observations of one who is clearly a prominent expert in such presentations.

*What we fear most* is accessible and the narrative engaging. It takes the reader on a journey through the learning of one individual as they progress through knowledge gained from experience. There is undoubtedly an important element of commitment on the part of the young man who progresses through the early stages of his career in medicine. I don't know from experience, but I can't imagine many junior doctors voluntarily