CLASSIC TEXT REVISITED: Medical Power in Prisons

David Scott reviews *Medical Power in Prisons* and explains why its insights are as relevant today as they were when it was first published in 1990.

Joe Sim's Medical Power in Prisons: The Prison Medical Service in England 1774–1989 (1990, Milton Keynes: Open University Press), the first sociological study of its kind, is widely recognised as one of the most important histories of the prison ever written. Starting with an account of the passing of the 1774 Health of Prisons Act the book charts the growth and development of the Prison Medical Service (PMS) from its origins until the late 1980s. The key theme in this book, whether prisons are healthy places that can lead to sustained human growth or are inherently negative places rooted in alienation, regulation, and control, remains central to contemporary debates. Medical Power in Prisons also contributed to a growing body of evidence in the 1980s that the PMS was a blot on the penal landscape. Indeed, the PMS was gradually dismantled after the book's publication following a protracted though eventually successful struggle to end the isolation of prison medicine through the introduction of the NHS into the prison place.

Medical Power in Prisons is a remarkable scholarly achievement for a number of reasons, including (1) its enduring critical theoretical insights; (2) its questioning of medical benevolence, expertise, and scientific legitimation; and (3) its historical context to contemporary controversial issues in prisons.

Medical Power in Prison adopted the method of the 'history from below' drawing upon the insights of Michel Foucault and humanist Marxism. Though Sim utilised Foucault to analyse penal power, normalisation, and the centrality of prisoner resistance, his analysis was fused with Marxist concerns around class struggle, hegemony, less eligibility, and the central role of the capitalist state in shaping penal order, allowing him to explain the continued reliance upon physical violence in regimes focused upon 'transforming the soul'. In short, Sim moved away from a purely structural account of penal power to one able to conceptualise agency and lived experience, in so doing embellishing upon some of the most significant achievements of critical criminology, most notably those derived from the work of Stuart Hall. Sim also focused upon the experience of black prisoners and, through the use of women prisoner autobiographies, located women at the centre of the medical gaze, transcending the masculinist assumptions of many of the previous histories of the prison.

Another of the book's central achievements is its scrupulously detailed evidence of how medical knowledge has largely been subsumed beneath the priorities of order, security, discipline, and classification. Harrowing testimonies, such as Harry Howard's recount of his own lobotomy, through to detailed exposures of how drugs such as chlorpromazine were deployed to provide a 'liquid cosh' for recalcitrant prisoners, permeate the text. Sim also provides shocking revelations about the medical legitimation of inadequate diets; the high number of deaths at prisons such as Coldbath Fields (where 376 prisoners died between 1795 and 1829); and the consequences of harsh regimes rooted in the principles of less eligibility, such as the tragic death of 15-year-old Edward Andrews at Birmingham Prison in 1854.

The controversial issues highlighted in this penal history from below continue to plague the prison estate today. Calls for equivalence in health care face the obstacles of less eligibility and the needs of people neglected by welfare agencies on the outside, whilst the current ascendancy of psycho-medical power, epitomised in the influence of psychologists in daily penal practices and the development of the 'health promoting prisons' agenda in penal policy, sadly demonstrate that the insights from this book remain as relevant today as they did on publication.

