

International Journal of Prisoner

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Journal:	International Journal of Prisoner Health
Manuscript ID	IJPH-01-2023-0003.R2
Manuscript Type:	Research Paper
Keywords:	Prisoners, Health promoting prison, Mental health, Qualitative research, Health in prison, Health promotion

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Abstract

Purpose

To identify the factors which influence male prisoners' motivation for, and engagement in, exercise and subsequent healthy behaviours.

Design/methodology/approach

The first authors conducted 20 semi-structured interviews with male prisoners inside an English medium-security male prison. Interviews were recorded and transcribed, themes were identified using thematic analysis, and a critical realist perspective applied to understand objective processes behind prisoners' experiences and shared meanings of exercise and engaging in healthy behaviours in prison.

Findings

Emerging themes indicate that in the context of healthy behaviours male prisoners aspired to a masculine ideal that was characterised by a culture of either adaptive behaviours, or maladaptive behaviours. The former fostered an adaptive exercise culture which promoted psychological wellbeing through an autonomy-supportive environment, consequently internalising motivation and minimising perceived barriers to engaging in healthy behaviours. Conversely, a culture of maladaptive behaviours fostered a maladaptive exercise culture which led to negative psychological well-being, underpinned by external forms of motivation which emphasised barriers to engaging in healthy behaviours.

Practical implications

Findings emphasise the need for prisons to promote an internal perceived locus of control for male prisoners when engaging in healthy behaviours.

Originality/Value

The authors adopt a rare interdisciplinary approach combining a psychological theory of motivation and criminological perspectives of prison culture to understand how best to minimise the impact of prisons as an institution on the psychological well-being of male prisoners.

Plain language summary

Male prisoners face many barriers to being healthy in prison, and over time these have an inevitable negative impact on well-being. We explore the ways that exercise can be used as a positive tool to promote a healthy environment for men in prisons, helping them to overcome the barriers and take control of their health and well-being.

Background

Prisoner health

The prison population in the UK has seen a 70% rise in the last 30 years to over 79,000 in March 2022, with males making up 96% of that figure (Ministry of Justice, 2022). Alongside a growing population, just over a third of prisons are meeting the prison inspectors' expectations for provision of purposeful activity work to aid rehabilitation (HM Chief Inspector of Prisons, 2020). Many publicised cuts to prison services in the UK have led to lower staffing levels, poor morale amongst staff, more self-harm and violence amongst prisoners, and ultimately a culture of tension which prevents rehabilitation (Criminal Justice Alliance, 2012). Male prisoners present with a complexity of mental health needs, and the issue of offenders returning to the community without engaging in any health

rehabilitation processes during their incarceration has worsening effects on their physical and mental well-being (De Viggiani, 2007; Fazel and Danesh, 2002; Gatherer, Moller & Hayton, 2005), which serves to thwart any efforts at rehabilitation that prisons may adopt by leading to an increased risk of reoffending (Bowles, 2012). Therefore, to support a rehabilitative culture, there is a need for male prisoners to engage in innovative, health-promoting activities which are less resource-intensive.

Exercise in prisons

Throughout this paper, the term "exercise" is used to reflect all forms of physical activity, sport and exercise, from informal in-cell exercise performed individually, through to structured programmes and team exercise. Prisoners may have the opportunity to access the prison gym or exercise yard for individual exercise, or to engage in group or team activities such as football matches organised by the prison gym staff, in addition, remedial gym sessions are often available for those with injuries who have been referred by the prison health team. Interest in participating in exercise amongst prisoners is often high (Buckaloo et al., 2009; Lewis and Meek, 2012), and research has already demonstrated its positive impact on rehabilitation and behavioural change (Baumer & Meek, 2019; Buckaloo et al, 2009; Nelson, Specian, Campbell & DeMello, 2006, Meek & Lewis, 2014), particularly in promoting desistance, positive relationships, identity transformation and education and employment opportunities (Meek, 2014). From a psychological perspective, exercise participation in prisoners has been linked with reduced feelings of hopelessness and loneliness (Cashin, Potter & Butler, 2008), improvements in mental health as measured by Quality of Life scales (Baumer & Meek, 2019; Mannocci et al., 2017; Muller & Bukten, 2019), and increased intentions to engage in further available well-being opportunities (Woods et al., 2020).

Masculinity and exercise participation

Despite its potential benefits and apparent popularity amongst prisoners there is great inequality of participation in exercise within and between prisons. An average of 64% of male prisoners report exercising outside more than five days a week, and 47% report using the gym twice a week or more (HM Chief Inspector of Prisons (HMCIP), 2022), but the number of regular gym goers in prisons is likely to be far lower. Facilities for exercise in prisons across England and Wales are variable, with most exercise yards featuring static exercise equipment, and others being described as "stark, bare and even and cage-like" (p. 53, HMCIP, 2022). Although structural barriers such as depleted resources and restrictive regimes are partly responsible for such low participation rates, this disparity is exacerbated by the "competitive masculinities which dominate" prison exercise spaces (Baumer & Meek, 2018, p. 214). These masculinities are reflective of gender roles which emphasise winning and exclusivity, and are embodied by a muscular physique, in turn preventing participation through fear of losing (Johnsen, 2001), purposeful exclusion by others (Meek, 2014), or the avoidance of "bodily presentation" (p. 236, Wellard, 2002). Furthermore, weightlifting is the overriding activity of choice in a male prison gym (Baumer & Meek, 2018), and the pre-existing hierarchy surrounding the weight machines can make this a difficult space to negotiate for new-comers (Riciardelli et al., 2015).

Outside of these scheduled gym sessions there are some opportunities for prisoners to engage in sports-based interventions (SBIs) which are non-competitive in nature and promote a positive culture of teamwork, intimacy, and personal development. In the context of prison, a typical SBI would involve the use of participation in sport as the key focus, with additional aims related to outcomes such as personal development or employability (Woods et al., 2017a), with a recent example aimed at young male prisoners in the USA emphasising relationship-building, peer-to-peer interaction and leadership roles (Wahl-Alexander et al., 2022). Research into SBIs in prisons is sparse but growing (Woods & Breslin, 2022), with Woods et al.'s (2017b) systematic review into the perceived benefits of SBIs on the psychological well-being of people in prison identifying 14 peer-reviewed studies from the UK, North America, Italy and Australia. The review highlighted reductions in depression, stress and anxiety, alongside increases in self-confidence, self-esteem and pro-social identities. However, Woods and Breslin (2019) also highlighted multiple barriers to sport-based interventions, including

availability when taking place over multiple weeks and operational restrictions of the prison environment. Furthermore, these interventions are limited in terms of both duration and frequency, and research should not neglect to consider how to maximise engagement and well-being in the context of exercise in prison beyond structured approaches.

In the context of exercise, Self-Determination Theory (SDT; Deci & Ryan, 1985) is an extensively tested psychological theory of behaviour change focused on the quality of motivation, suggesting that exercise engagement can be regulated through identification of autonomy or control. SDT identifies three basic psychological needs (BPNs) that influence the strength of intentions when behavioural desires are formed; the need for competence; relatedness, and autonomy. Further to autonomy as a psychological need is the concept of autonomous (or self-determined) behaviour, which is experienced with an internal perceived locus of causality, a concept framed by deCharms (1968) as perceiving oneself to be an origin of one's own behaviour. This is opposed to an external perceived locus of causality where one's behaviour is perceived as being controlled by external forces. Deci and Ryan advise that self-determined behaviour is a requirement for integration of individual and collective cognitions, emotions and experiences into the personality, leading to psychological maturity, constructive social development and overall personal well-being. Thus, SDT is an appropriate theoretical framework for understanding how to maximise engagement and well-being in the context of exercise in prison.

To date, research on sport in prison has focused on prisoners' individual motivations to engage in exercise (Parker, Meek & Lewis, 2014), and the health and well-being benefits for those who do engage (De Marco & Meek, 2022; Woods et al., 2017). Consequently, the current paper aims to explore the following research question:

What structural and cultural factors influence male prisoners' motivation to engage in exercise and subsequent healthy behaviours?

Method

Design and ethics

A qualitative research design with face-to-face semi-structured interviews was adopted. Ethical approval was granted by the National Offender Management Service National Research Committee, reference 2016-413.

Recruitment and sampling

Data collection took place in a category B local male prison, housing prisoners serving medium to long-term sentences, and prisoners awaiting trial, re-allocation, and release. This was one of the largest prisons in the UK at the time, holding over 1,400 prisoners, 39% of which had never been to the gym at all according to the latest inspectorate report.

A purposive sample of 22 men from a pool of 78 prisoners who had voluntarily completed a SBI called the Cell Workout Workshops were invited to take part in the interviews. The SBI was open to men of all ages and level of Incentives and Earned Privileges (IEP) across the prison, a scheme currently running in prisons across England and Wales which classifies prisoners' allowances based on behaviour and their willingness to work towards their own rehabilitation. This group was chosen because of their engagement in exercise as a healthy behaviour in custody. More details of the SBI along with an evaluation of their impact on participants' motivation for sport, physical health, and psychological well-being are published in [REMOVED].

The sample were selected to ensure representation from prisoners of varying sentence type/length, those who had jobs within the prison and those without, and individuals from all three levels of the IEP scheme. One third of the participants had been serving their current

sentence for over a year, ages ranged from 18-62 years (M = 34.86). The proportion of non-white participants were reflective of the general prison population (30%), but there was an overrepresentation of White British (>40%) and underrepresentation of White Non-British prisoners (<10%) as this was the demographic of those who had attended the SBI. Most participants had been to prison at least once before, and their previous exercise experience ranged from regular strenuous exercise to no formal exercise.

Procedure

The lead researcher made several visits to the prison across a twelve-month period between 2016-2017, during which time prisoners were made aware of the researcher's independence from the SBI and the prison. Visits included joining exercise sessions with prisoners as part of the SBI, joining them on a 'family day' with their friends and family from outside the prison, and speaking to prisoners through their cell door when they were locked up. Taking this time to speak with the prisoners in informal settings enabled the researcher to build rapport with the interviewees and to seek initial verbal consent for their participation. Interviews were conducted in late 2017 over two days in the legal visits suite, a quiet but secure space which was 'outside' of the main prison creating a relaxed and personal interview environment. Information sheets were provided and consent forms signed prior to commencement of the interviews. Only the lead researcher and one interviewee were present during each interview, which lasted between 25 and 45 minutes and were voice-recorded with the express permission of the participant and the prison.

Interviews were transcribed verbatim and analysed with the support of qualitative data analysis software, QSR International's NVivo 11 Software (QSR International Pty Ltd. Version 11, 2012). Pseudonyms are used for all interviewees to ensure anonymity.

Materials

The semi-structured interview schedule was informed by an evaluation of the SBI [REMOVED], which highlighted key themes pertaining to individual factors affecting exercise motivation. The interviews aimed to explore any relationship between the previously identified individual factors and the structural and cultural factors that affect exercise engagement, being healthy, and subsequent well-being outcomes in prison. Interview questions included "Other than exercise, are there any ways you try to be healthy, mentally or physically? What are your main reasons for engaging in these behaviours?" and "How much choice and control do you feel you have over being healthy in prison?"

Analytic Approach

Critical realists posit that for research to make a difference then one must imagine there is some form of tangible reality that we can access to influence it. As Madill, Jordan & Shirley (2000) put it, there is a real and knowable world sitting behind the subjective and socially-located knowledge that we as researchers can access. This research aims to access the tangible reality of prisoners' experiences with <u>exercisesport</u> in order to identify the structural and cultural factors that facilitate and hinder their subsequent well-being outcomes. The purpose being to achieve real-world impact by informing future prison-based interventions, as by understanding what prisoners perceive to be the barriers to <u>exercisesport</u> as a healthy behaviour, it is then possible to understand how these barriers might be minimised. Prisoners' experiences of <u>exercisesport</u> in prison are reflective of the social structures that operate inside the prison, and these shared meanings may be outdated, or false, but they must be understood to understand what hinders or promotes the positive impact of such experiences. Furthermore, if prisoners' shared meanings in

relation to <u>exercisesport</u> in prison are somewhat skewed, then these can be challenged in appropriate ways.

Thematic analysis was applied as a means of qualitative inquiry as guided by Braun and Clarke's (2006) comprehensive argument of thematic analysis as a method in its own right. A flexible, deductive process of coding was adopted, <u>using-driven by the research question and SDT as a theoretical framework. Codes were reflective of cultural and structural factors affecting exercise in prison, and psychological need satisfaction and well-being (as defined by SDT). NVivo was used to highlight and code relevant extracts, before categorising these into themes. These themes informed several iterations of concept maps created by the lead researcher and reviewed by the co-authors to provide a nuanced and detailed account of a particular set of themes within the interview data. These themes were explored at a semantic level to allow for an understanding of how prisoners construct their reality.</u>

Findings

Findings are illustrated in terms of key themes and sub-themes on the concept map in Figure 1. The foundation of interviewees' experiences with <u>exercisesport</u> and healthy behaviours is represented by the "overarching prison culture", which encompasses the combined structural, social and cultural factors that were prominent in daily prison life. These factors represent three themes; "tension", "structural barriers to being healthy in prison", and "masculine ideals". Tension and structural barriers are summarised together. "Psychological well-being" is a fourth emergent theme reflecting the impact of prison culture on prisoners. These themes will form the focus of the findings, with illustrative participants' quotes throughout.

Figure 1. goes here

Tension & Structural barriers

The theme of tension refers to an ever-present mental and emotional strain experienced by prisoners throughout their daily lives in the prison. There was a consensus that "*[prison] really is a lonely place*" and "*prison is hard at the end of the day*" which was reinforced by fear for one's personal safety.

This strain was further exacerbated through the absence of positive challenges, a lack of control, and restricted communication with the outside world. A lack of positive incentives led to subsequent relapse into negative behaviours, whilst the continual passiveness associated with a lack of control was underpinned by the belief that it was within prison management's control to ease some of this tension.

no matter what you try and do in 'ere... it's the same old stories off the officers it's "no, not enough staff"... it brings you down (Brian)

The structural barriers to being healthy in prison were divided into two sub-themes *the lack of a proactive approach from prison management to promote a healthy prison*; and *the inherent negative health impact of prisons*. In terms of the former, interviewees recognised and accepted that certain restrictions were necessary to adhere to standards of safety, but the crux of their frustrations surrounding a lack of health promotion tended to be directed towards the inconsistency of access to opportunities for being healthy. For the most part, this inconsistency was prompted by factors that were out of the prisoners' control such as their wing, employment status, sentence type, peer group associations, and a tighter regime.

In this jail [access to the gym] it's random, in other jails it's set like you'll be going three times a week... but here it's a bit random and it's such a big prison and it's short staffed (Ahmed)

[Gym access] depends what part of the prison you are... even within those some of us have full time jobs some of us don't, full time education... So, going to the gym it's like luxury, really... Some people go every day [to the gym], but [the gym orderlies] have favourites, people know this and they're very unhappy about this (Eden)

Furthermore, it was felt that prison management were not trying hard enough to cater for prisoners' specific educational or health needs, and were too quick to cease the provision of interventions; "*it only takes one time, one person to mess it up and they'll stop it*".

The *inherent negative health impact of being in prison* was mainly felt through a lack of lifestyle exercise (i.e. walking, gardening or housework (Pate et al., 1995)) and "*the stress, the trauma, the shock*" of imprisonment, leading to poor psychological and physiological health.

[Before prison] I used to take my dog out for an hour each day, that in itself [was enough exercise], and I was always active, out and about, working, painting and decorating (Fahim)

Masculine ideals

The emergent theme reflecting the key structural and cultural factors which impact on male prisoners' motivation to be healthy is masculine ideals, which seem to be created by prisoners in response to the underlying tension, and in turn can mitigate or emphasise prisoners' perceptions of structural barriers to being healthy. Prisoners' masculine ideals took on two dominant forms; an adaptive masculinity, or a maladaptive masculinity, reflective of an internal and external perceived locus of control (deCharms, 1968), respectively.

Adaptive masculinities were experienced by prisoners as a willingness to use their time in prison positively and wanting to make themselves "better as a person", frequently referring to their role as a partner, father or grandfather. Prisoners felt that they had more time to be healthy in prison, away from the distractions and barriers encountered outside of prison.

I've always been sort of head of the family as well if you understand... so it's better to do what I can do than get myself involved and do something stupid and I end up doing a longer sentence... (Dale)

I've got a long time left to do and I wanna go out better than when I come in... You get a lot of thinking time in 'ere, I used to drink quite a bit and, take cocaine, and there's no healthiness in that at all. I wanna prolong my life, when I get out I've got children, I've got grandchildren and I wanna see them grow up... I've just had a little girl, dya know what I mean? I don't wanna have a heart attack, I wanna see her grow up (Brian)

In relation to exercise, these masculine ideals fostered an adaptive exercise culture, framing prisoners' values and attitudes towards exercise in prison, which were often different to the reasons given for exercise before prison. In this respect, an adaptive masculinity highlights the potential for exercise in prison to support the BPNs of autonomy, competence, and relatedness (Deci & Ryan, 1985). Specifically, gaining control over their physical and mental health (autonomy) and exercising "to get rid of the stress... and stay healthy", which prisoners noted was unique to aerobic forms of exercise, with weightlifting not producing the same positive psychological health outcomes.

Engaging in positive personal challenge (competence), which was based on absolute achievement rather than achievement relative to others, and seemed to result in a reduction in fights, which made it distinct from the competitive nature of the prison weights room.

Most of the time you get challenged it's negative, so in 'ere to do something positive [is good], 'cause [the SBI's] a choice, it's not telling you "you have to come"... but its challenging you on a one-to-one level (Chris)

Finally, valuing the "bonding" aspects of exercise through a "team effort" which increased vitality and self-motivation, and "helped to gain confidence" and make exercise more enjoyable (relatedness). Thus, through the lens of an adaptive masculinity, exercise is used to mitigate the mental and emotional strain of prison by giving prisoners the psychological well-being needed to manage it.

Whereas before I'd be on the bike on my own I'm now in the line-up for the running machine messing about having a laugh... it's all fun we're all socialising and we're all fit, it's healthy... I am now mixing with people I wouldn't have mixed with before (Chris)

My cellmate who was on [the SBI] with me, his cellmate, an older man in his sixties [joins us exercising on the wing] 'cause he likes doing that with us, he does the spinning with us, whereas he weren't doing nothing, he doesn't like the gym but he likes being with us, it's a nice bonding session (Callum)

Furthermore, prisoners who reflected the values of this adaptive masculinity attempted to minimise the structural barriers to being healthy, and some sought ways to engage in their positive behaviours despite the restrictions of the regime through exercising in their cell or on the wing or ordering protein-rich food through the canteen.

Despite a more positive attitude, prisoners adopting adaptive masculinities were often still negatively affected by structural barriers. When referring to behaviours that did not rely entirely on staff engagement these prisoners recognised that they had some control but conceded that "*it's laziness as well... you gotta be motivated in yourself*", and they did not always have the high levels of motivation needed to overcome barriers.

Those prisoners who appeared to overcome structural barriers on a more consistent basis were "gym orientated... and did a bit more [exercise] than the average person" prior to prison, and thus were already highly motivated and likely to have been regulated by an internal perceived locus of control for such behaviours.

In contrast to adaptive masculine ideals, maladaptive masculinities were expressed through a lack of engagement with healthy activities, which also manifested itself as a desire to sleep for extended periods of time and "*waste out the day as they think it's quicker*". Prisoners who adopted this masculine ideal were seen to be in a constant battle to "*prove themselves, trying to make out that they're gangsters*", through body image and egotistical behaviour, frequent boasting, and an attitude that suggested they were only in prison to have fun. Many felt that these behaviours were more often seen in "*the younger prisoners*".

Maladaptive masculinities fostered a maladaptive exercise culture which led to prisoners viewing exercise as a solitary activity focused on "*all of the weight lifting*". They viewed the gym as an exclusive place with a "*strong individualism*", basing self-worth on a hyper-masculine body image of being "*big*" and "*getting muscles*" and often perceiving others' abilities as far greater than their own. These externally-driven values and attitudes existed alongside a lack of perceived support for psychological needs through exercise, thus, healthy behaviours were experienced through an external locus of control. Ultimately, this lack of perceived control over being healthy appeared to emphasise perceived structural barriers and worsen the overall tension experienced by prisoners.

The type of masculine ideal that prisoners aspired to seemed to be influenced by socioenvironmental factors both inside and outside of the prison. This could be the general healthrelated behaviours and values of peers, or a specific event, such as an illness or death of someone close to them. These events either prompted a shift in prisoners' attitudes towards using their time more positively and engaging in more healthy behaviours, or it could cause a relapse into negative health behaviours such as comfort eating, smoking, drug taking, and isolating oneself.

I didn't smoke for eighteen months, that was also in prison. But then, my nan died, someone gave me a joint, I smoked it, and I started smoking from then. But, [my reason for quitting now] it's obviously my friend passing away, my mum's got COPD, [and] my nan died of lung cancer (Fahim)

As the maladaptive exercise culture appears to be the dominant culture of the prison gym, it is likely that these hyper-masculine values represent the image of the gym as held by prisoners who do not exercise. This enforces the image of the gym as an exclusive environment fuelled by testosterone and occupied by those who embody a muscular physique, at the expense of exercise engagement which promotes physical and psychological well-being.

This account of how male prisoners experience gender roles and masculinity through exercise is by no means all-encompassing, and it only reflects the attitudes, values and behaviours of those who choose to exercise in some form.

There were also examples in the present research of prisoners identifying with elements from both styles of masculinity simultaneously, for example, Eden engaged in a somewhat adaptive exercise culture by stating "*At the moment I'd say I'm on my A game [with regards to exercise]*... *the fact that there's no distractions, I am more focused in prison on my training now*", whilst still identifying with external and more maladaptive reasons for exercise such as wanting to "get *ripped*" i.e. become very muscular.

Chris noticed a shift in his behaviours from a maladaptive masculinity during his last sentence, expressed through attention-seeking behaviours and being "*a 'face guy', one of the lads*", to more adaptive behaviours in his current sentence where he is "*not so much centre page, no more doing silly little things for attention*". This change in attitude was accompanied by a change in his peer group associations, surrounding himself with others who adopted an adaptive masculinity and whom he referred to as "*the nerd crew, the geek crew, the ones who are- socially acceptable to officers*", which he felt gave him a far greater chance of avoiding trouble.

Furthermore, there was evidence of prisoners experiencing conflict in terms of how they viewed their own masculinity, with Dale understanding himself through a more aggressive and dominating form of masculinity where he is "very strong willed, I'm me own guvnor", whilst having to "keep myself to myself inside, cause you know I can't do what I wanna do".

Psychological well-being

The final theme that emerged through the interviews was one of psychological well-being and the crucial role that this played in prisoners' discourse around daily well-being. Interviewees expressed their well-being through "energy" levels, and were acutely aware of the amount of personal energy that they possessed at any one time whilst in prison, however, most prisoners were not consciously aware of how they could positively influence their own energy levels.

[My energy] goes up and down, up and down...you're up you're down, you're here you're there, 'cause you're stuck in your cell, you sit in the chair, get comfortable, you fall asleep then, bang! You're up- it doesn't do your system any good (Dale)

Living by the prison regime and its structural barriers and managing the tension of prison diminished prisoners' energy levels, which was experienced as low mood.

I think it's just the prison regime [that affects my energy] it's just a depressing place to be really and truly even if you're not depressed, it's like it's so repetitive every day it's the same thing you come out in the morning, look around, it's lunch time, get out for lunch like you sit there and watch telly or you sit there and drift away, I've never slept so much since I came to prison, really and truly like if I lay down on my bed I just fall asleep, dya know what I mean? Even if I don't feel tired... I think it just takes your energy away even if you feel like you've got energy and you're motivated it won't stay for long (Ahmed)

Smoking tobacco was also seen as a behaviour which saw "*energy levels go down*", with vaping considered to be a healthier alternative that did not result in such a passive response.

Although many interviewees were unable to identify methods for revitalisation when asked directly, they alluded to several behaviours that gave them an energy boost. Having some perception of control over positive behaviours was important for maintaining or enhancing energy, and engaging in light exercise within the cell was another way to increase energy levels.

If I was banged up in my cell I'd get up swill my face round liven myself up, what else you do you do [to increase your energy]?... Or I might stand and do a bit of, making out I'm skipping or making out I'm jumping you know, press ups (Dale)

The key method that interviewees identified with as a means for revitalisation was "socialising and using one another for support", and "being around good people" with whom they felt a connection with inside prison.

I've got people on the wings and it's crazy we just go when we're low and we start talking about positive things trying to keep ourselves upbeat so, energy levels... Everyone gets down in here you all get your ups and downs, when you've got good people around ya it helps to keep your mind off how you're feeling (Chris)

Thus, prisoners' psychological well-being, as expressed through their daily energy levels, was negatively affected by the structural barriers to being healthy in prison, and the mental and emotional strain of daily prison life. Whilst engagement with behaviours that seek to satisfy the BPNs led to an increase in prisoners' daily well-being, which was expressed as an enhancement in energy levels. These opportunities for engaging in self-determined health-related behaviours are referred to as "cracks in the grid" by Mehay, Meek & Ogden's (2019) research with young men in prison.

Discussion

This paper sought to explore the structural and cultural factors which influence male prisoners' motivation for exercise and subsequent healthy behaviours. Prisoners' experiences of engaging in healthy behaviours were underpinned by an ever-present tension within the prison that moderated their personal well-being, this subsequently impacted their motivation to be healthy which was expressed through variations in their personal energy levels. This concept of tension mirrors the principles of Sykes' 'pains of imprisonment' (1958), and the observations of Liebling (1999; 2002), and is experienced through loneliness, fear, uncertainty and a lack of respect and autonomy.

Prisoners' ability to manage tension and navigate the structures of the prison was characterised by two dominant forms of masculinity; adaptive and maladaptive, presenting many parallels with Joel Harvey's research into adapting to prison life in an English Young Offender Institute (2007).

These masculinities adopted opposing exercise cultures, framing prisoners' perceptions of how exercise can benefit them personally. The values underpinning an adaptive exercise culture are reflective of self-determined behaviour (Deci & Ryan, 1985), with prisoners experiencing behaviours through an internal locus of causality (deCharms, 1968), and ultimately enhancing their psychological well-being. Prisoners viewed exercise as a means of gaining control over physical and mental health (autonomy), a positive personal challenge (competence), and they valued the social aspects of exercise to increase vitality and self-motivation, and to make exercise more enjoyable (relatedness). The satisfaction of these three needs through exercise provided prisoners with the personal energy, or well-being, to manage the tension of prison life, which reflects the concept of "calm energy" or "the positive feeling of having energy available to the self" which Nix, Ryan, Manly & Deci (p. 266, 1999) propose is a product of engaging in self-determined behaviours.

Conversely a maladaptive masculinity fostered a maladaptive exercise culture which was reflective of contingent self-esteem and an external locus of control, through a constant battle to prove oneself and seek internal rewards based on others' perceptions of oneself. These processes are reflective of introjected regulation of motivation, which SDT associates with low adherence to a behaviour (particularly in the case of self-reported exercise (Power et al., 2011)), and poor well-being. Therefore, it appears that behaviours reflective of a maladaptive masculinity are not conducive to satisfaction of the BPNs, and thus lack the subsequent well-being or 'energy' outcomes which can help to mitigate tension and overcome barriers to being healthy. Whereas adaptive gender roles value behaviours which lead to the creation of an autonomy-supportive environment, allowing adaptive prison cultures to flourish, in turn enabling prisoners to overcome some of the structural and cultural barriers to being healthy and maximise well-being.

The inconsistencies outlined by prisoners as structural barriers to being healthy reflect 'penal uncertainties'; a phrase coined by Riciardelli et al. (2015) to describe unpredictable features of prison life, variances in human agency, and the strategies needed to manage these. An example of such penal uncertainties can be seen in the management and operation of the IEP scheme. According to de Viggiani (2018), the very presence of the IEP scheme is seen as a strategy of 'divide and rule' by some prisoners, who believe that there is a lack of equity when it comes to rewarding or punishing prisoners for behaviour. In terms of healthy behaviours, those on the standard or basic levels of the IEP scheme will have their canteen budget and access to the gym restricted and often be excluded from positive activities, such as SBIs. Prisoners in the present research who were most self-determined in their health-related behaviours exhibited adaptive behaviours to overcome such barriers, yet they still fail to overcome all barriers. As de Viggiani (2018) proposes, prisoners on the lower levels of the IEP scheme may lack sufficient levels of resilience, motivation or life skills to navigate the system at all. This suggests that for some prisoners, the IEP scheme will not operate as an incentive for good behaviour, but instead serves to act as a structural barrier which reinforces the beliefs of these prisoners in line with maladaptive masculinities.

Researchers identify the importance of addressing autonomy in relation to prisoner health (Brosens, 2019; van der Kaap-Deeder et al., 2017; Woodall, Dixey & South, 2014), and it has been suggested that measures of prisoners' quality of life should include perceptions of autonomy (Muller & Bukten, 2019). But it is also noted that health promotion concepts such as empowerment are incongruent with prison cultures that emphasise deterrence, punishment and reform (Woodall et al., 2014). As maintained by Meek (2018), the reform of exercise in prisons must be driven by a joint commitment to improving mental and physical well-being. Therefore, we must promote a cultural shift away from the enforcement of externally regulated reasons for behaviour, with good examples demonstrated by resettlement-focused living spaces for young

people in custody, which, in line with the secure stairs framework (Taylor et al., 2018), explicitly aim to address and promote psychological needs, including freedom, esteem, and belonging.

It is widely understood that prison resources are stretched, and whilst a lack of resource may prevent the delivery of some positive activities, prisoners emphasised that their frustrations stemmed mainly from inconsistencies rather than a lack of opportunities, which have the potential to be managed without a need for additional resource. As Andrews and Andrews (2003) propose, if health inequalities are to be sufficiently addressed, prisons must ensure that prisoners' autonomy in relation to health behaviours is supported on a consistent basis. Potential adjustments prisons can make to achieve this are to introduce unrestricted spending on healthy food items from the canteen, and to permit equitable access for prisoners across all IEP levels to activities which are aimed at promoting positive psychological well-being, such as group exercise. Prisons could work towards this by ensuring that, wherever reasonable, there is a protected and dedicated space on wings for prisoners to exercise in small groups. This would mean that, providing there are sufficient staff for evening association to take place, prisoners can choose to exercise in the evening without the need for equipment or extra staff, and in addition to working a full-time job in the prison. To support these modifications prison management should promote healthy behaviour choices available to all prisoners, such as how to make a healthy meal in one's cell from the unrestricted canteen items, and suggestions for body weight exercises to be performed in groups.

Limitations and future research

There are selection effects in this study that should be considered, as there was a relatively small group of participants mainly consisting of those who had engaged in a SBI, so perceptions of maladaptive masculinities are somewhat created through second-hand or retrospective accounts. Future research should look to include a larger sample of diverse prisoners across several prisons, including those who are 'disengaged' and representative of a maladaptive masculinity, particularly those who do not exercise, to explore these experiences and influences further.

Conclusion

This paper has outlined key structural and cultural factors which strengthen perceived barriers to engaging in healthy behaviours in prison, thus adversely influencing motivation to engage in such behaviours and subsequent well-being. However, through the creation of an autonomy-supportive space, exercise can become a tool to enable male prisoners to enhance their motivation, take control of their well-being, and overcome such perceived barriers to being healthy. Importantly, for this culture to thrive, prisons need to find more ways to support prisoners' self-determination, and addressing inconsistencies in opportunities to be healthy may be an effective way to achieve this.

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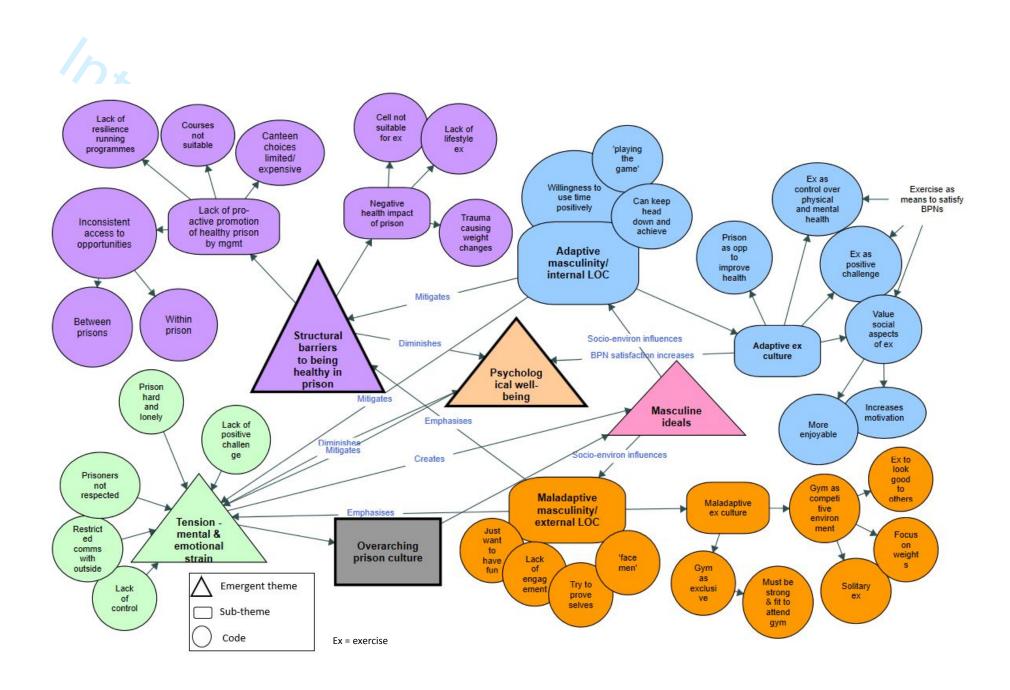
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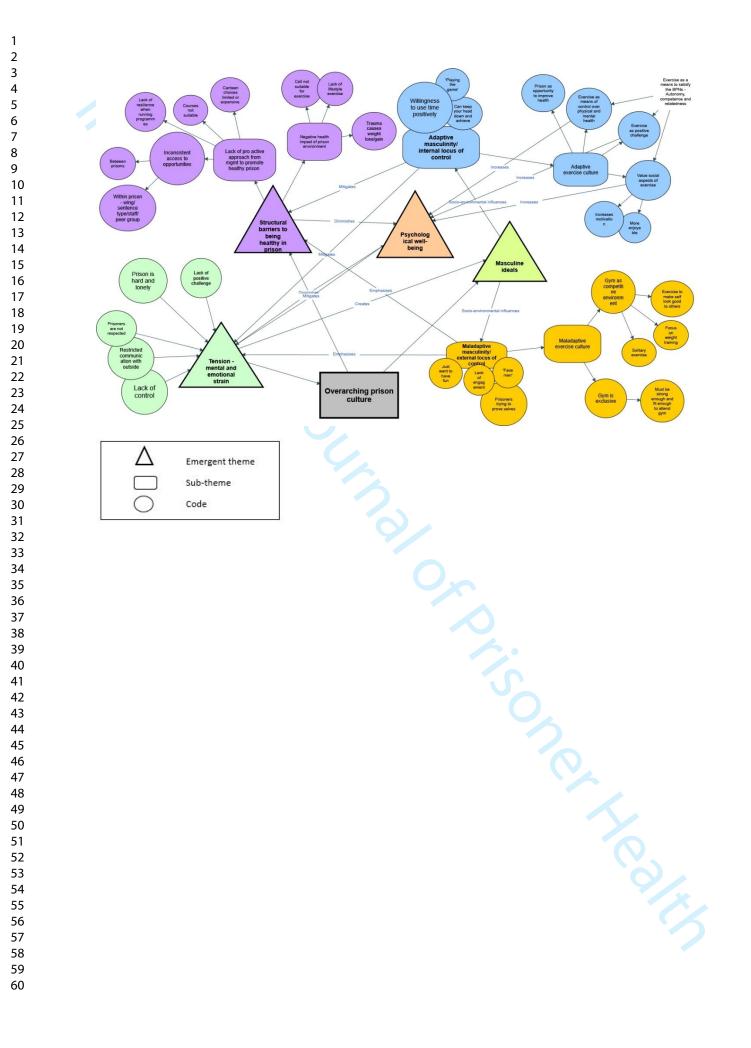
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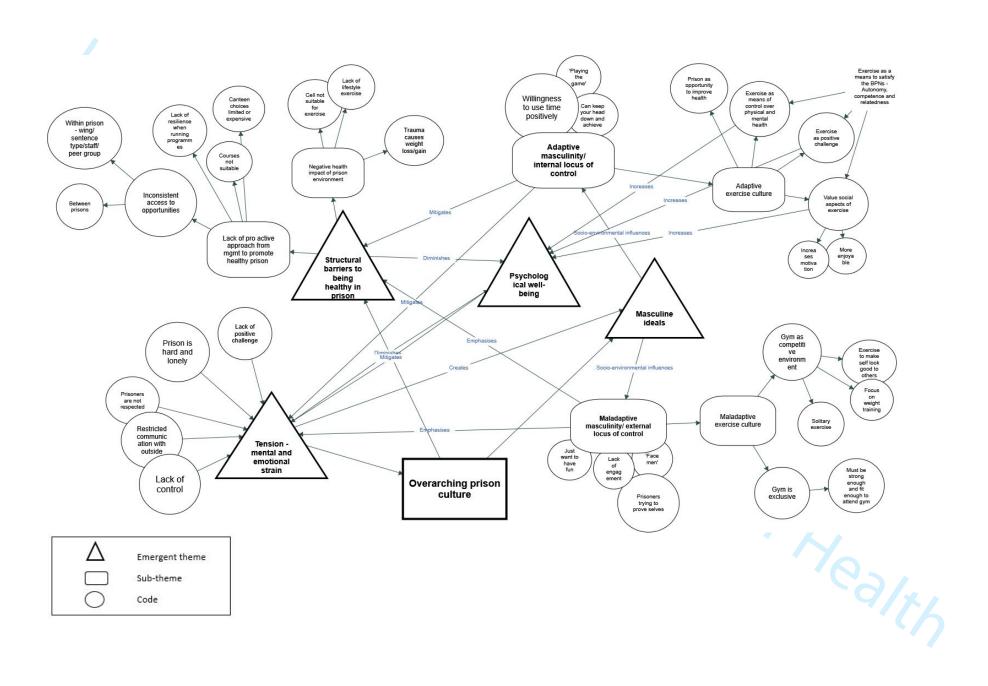
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