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**Life in Prison Survey**

**What is this survey about?**

You are being invited to take part in a research study which is trying to understand what life in prison is like for the people who spend time in them.

Before you decide whether or not to take part, it is important for you to understand why the research is being done and what it will involve. **Please take time to read the following information carefully**.

**What do I need to do?**

The survey is not a test and there are no right or wrong answers. In most cases you just need to tick a box.

**How long will this survey take?**

Completing this survey should take about 5-10 minutes.

**Who is this survey conducted by?**

The survey is being completed by staff at University of Brighton and the University of Birmingham.

**Do I have to take part?**

You don’t have to take part but we would be pleased if you did, because we have no other way of getting this information.

**Will I gain anything by taking part?**

There are no particular benefits for you but you will help us to carry out important research.

**Will this survey put me at risk?**

There is nothing that we think will harm you in this survey.

**Will you tell anyone about my answers?**

We don’t need to know your name and we won’t give anyone a copy of your survey. If you do reveal something that puts yourself or someone else at risk, we will have to show the prison authorities your form. We will keep all the forms in a secure place.

**What will happen to the results of the survey?**

We will use this survey to write reports, academic articles, and presentations for conferences.

**What if I have any questions?**

If you would like to ask any questions, a member of our research team will be coming around the prison to talk to you about the project.

Thank you for taking the time to read this information. Your time is greatly appreciated, and the information you give is very important.

**[PLEASE TEAR OFF THE TOP SHEET AND KEEP IT FOR YOUR INFORMATION]**

**Questions about your cell**

Please answer each question to the best of your knowledge. Thank you for your participation.

1. **We would like you to consider the requirements of your cell space.**

**Please place a tick in the box that matches your answer:**

In my cell, I have…?

My own showering facilities Yes [ ]  No [ ]

Enough places to store my belongings Yes [ ]  No [ ]

Lots of personal touches around me Yes [ ]  No [ ]

Most of the time….

I’m happy with how clean my cell is Yes [ ]  No [ ]

I have enough fresh air in my cell Yes [ ]  No [ ]

The air is too stuffy in my cell Yes [ ]  No [ ]

There is enough natural light in my cell Yes [ ]  No [ ]

The noise I hear from my cell is too loud Yes [ ]  No [ ]

Can you….?

let enough fresh air in if you need to? Yes [ ]  No [ ]

Increase the temperature if it’s too cold? Yes [ ]  No [ ]

Control the lighting? Yes [ ]  No [ ]

Put things on the wall? Yes [ ]  No [ ]

Sit somewhere comfortable to watch TV? Yes [ ]  No [ ]

When I look out of my cell window, I can see…

Other buildings Yes [ ]  No [ ]

The perimeter wall Yes [ ]  No [ ]

Fields Yes [ ]  No [ ]

Trees Yes [ ]  No [ ]

Birds Yes [ ]  No [ ]

Views into the distance Yes [ ]  No [ ]

1. **Think about how you feel when you are in your cell.**

**Please place a tick in the box that matches your answer:**

Most of the time…

I feel safe Yes [ ]  No [ ]

I feel comfortable Yes [ ]  No [ ]

I feel relaxed Yes [ ]  No [ ]

I feel rested Yes [ ]  No [ ]

I feel like I have enough things to

do to occupy my time Yes [ ]  No [ ]

I feel like I have enough privacy Yes [ ]  No [ ]

I feel in charge of my own space Yes [ ]  No [ ]

I am able to sleep well at night Yes [ ]  No [ ]

**Questions about your flat**

1. **Think about your unit/wing. Please place a tick in the box that matches your answer:**

The flat is suitable for…

meeting with other prisoners Yes [ ]  No [ ]

private conversations with officers Yes [ ]  No [ ]

private conversations with other prisoners Yes [ ]  No [ ]

telephone calls Yes [ ]  No [ ]

peace and quiet Yes [ ]  No [ ]

relaxing Yes [ ]  No [ ]

recreational activities Yes [ ]  No [ ]

lots of different activities to occur at once Yes [ ]  No [ ]

**Questions about other areas around the prison**

1. **Have you ever used the following facilities? Please place a tick in the box that matches your answer:**

Gym Yes [ ]  No [ ]

Education centre Yes [ ]  No [ ]

Place of work Yes [ ]  No [ ]

Place of worship Yes [ ]  No [ ]

Faith minister Yes [ ]  No [ ]

Counsellor Yes [ ]  No [ ]

Visiting room Yes [ ]  No [ ]

Communal dining space Yes [ ]  No [ ]

Prison shop Yes [ ]  No [ ]

Library Yes [ ]  No [ ]

1. **This question refers to the outside exercise area. Do you participate in any of the following activities in the outdoor exercise area? Please place a tick in the box that matches your answer:**

Walking or jogging Yes [ ]  No [ ]

Stretching or toning exercises Yes [ ]  No [ ]

Weights and/or other resistance

activities Yes [ ]  No [ ]

Ball games Yes [ ]  No [ ]

Other team games Yes [ ]  No [ ]

Gardening Yes [ ]  No [ ]

Drawing, painting or sketching Yes [ ]  No [ ]

Meeting with people from other

parts of the prison Yes [ ]  No [ ]

Other (please write:

…………………………………….)

1. **Again, this question relates to the outside exercise area. Please place a tick in the box that matches your answer:**

Most of the time…

I like to spend time outside Yes [ ]  No [ ]

I go outside because I am told to do so Yes [ ]  No [ ]

I go outside to be on my own Yes [ ]  No [ ]

I go outside to meet friends/other prisoners Yes [ ]  No [ ]

Going outside feels like a break from prison Yes [ ]  No [ ]

I feel relaxed outside Yes [ ]  No [ ]

I take every opportunity to go outside Yes [ ]  No [ ]

In the outside exercise area, there is enough …

Grass Yes [ ]  No [ ]

Flowers and plants Yes [ ]  No [ ]

Seating areas Yes [ ]  No [ ]

Sports facilities Yes [ ]  No [ ]

In the outside exercise area, I can see…

Other buildings Yes [ ]  No [ ]

The perimeter wall Yes [ ]  No [ ]

Fields Yes [ ]  No [ ]

Trees Yes [ ]  No [ ]

Birds Yes [ ]  No [ ]

Views into the distance Yes [ ]  No [ ]

1. **Which material dominates the surroundings that you live in? Please tick one box:**

Metal [ ]

Concrete [ ]

Brick [ ]

 Wood [ ]

Plastic [ ]

Other [ ]

(please write …………………………………….)

1. **Please write down 2 colours that best describe your surroundings in prison:**

|  |
| --- |
| **1)** |
| **2)** |

1. **Please write down 3 words that best describe how the prison looks:**

|  |  |
| --- | --- |
| **1)** | **2)** |
| **3)** |  |

**Questions about you**

1. **How long have you been in this prison?**
2. **Have you ever been in prison before?**

No [ ]  Go to question 14

Yes [ ]  Go to question 12

1. **How many times have you been in prison?**

1. **Have you been in this prison before?**

Yes [ ]

No [ ]

1. **What is your current status?**

Remand/untried [ ]

Convicted (not yet sentenced) [ ]

Sentenced [ ]

Licence Recall [ ]

1. **Do you normally spend most of your day in your cell?**

Yes [ ]

No [ ]

1. **Do you have your own cell?**

Yes [ ]

No, I share a cell [ ]

1. **What is your age in years?**

**Questions continue on next page….**

1. **If you can think of anything else that we should know about how the prison building affects you, please write it in the space below:**

**Please return the completed survey to a member of staff ——— Thank you for your help!**

****

**If you would be interested in taking part in an interview or group discussion** to talk in more detail about some of the things mentioned in this questionnaire, **please fill in the form below.** We will be offering £## credit to anyone who participates. If demand is high, we will draw names from a hat.

**NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PRISONER NUMBER:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ I am willing to take part in an interview

□ I am willing to take part in a group discussion

□ I am willing to take part in **both** an interview and a group discussion

**Please tear off this sheet and return it to a prisoner officer separately so we can keep your questionnaire anonymous!**