

## 7 Risk management: beyond the individual

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‘People are violent not only because of who they are but because of where they are.’  
(Wortley, 2002, p. 3)

It is a truism that behaviour does not occur in a vacuum. As the economist Herbert Simon observed, rational behaviour is shaped by a pair of scissors, one blade of which is the characteristics of the actor, the other blade being the characteristics of the environment (Simon, 1990). This is equally true for violent behaviour. The past twenty years has seen growing confidence – at times misplaced confidence (Cooke and Michie, 2010; Cooke and Michie, this volume) – in our ability to evaluate risk of future violence. However, the primary focus of these efforts has been the characteristic of the actors, not the characteristics of their setting. The preoccupation with the individual is not surprising given that for most psychologists their expertise – and their predilection – is the evaluation of the individual; the individual’s psychopathology, their motives, their personality, their functional deficits, and perhaps their skills. These features are clearly important, but as Simon noted, they are only one blade of the scissors that shape behaviour.

The focus of this chapter is an account of attempts to characterize the environment of prisons and forensic hospitals that act to enhance or mitigate violence risk; the overarching aim is to identify, manage, and understand the ways in which complex organizations can influence the violence within them.

The start of this long journey – at least for the first author – was a puzzle. Following conventional clinical psychology training, with its then heavy emphasis on the psychometric evaluation of the individual, I was confronted with the conundrum that Scotland’s ‘most violent men’ were not being violent. The Barlinnie Special Unit was designed to hold difficult, disruptive and violent prisoners (Boyle, 1977; Cooke, 1989). All the prisoners had significant risk factors for violence. For example, they had lengthy histories of serious and persistent violence – both instrumental and reactive – major psychological disturbance including personality disorder, psychopathic traits, problems of addiction, and some episodic major mental illness. The majority had killed. They had sub-cultural values that celebrated violence. And those who considered the future, devalued it, expressing no interest in whether they remained in prison forever or not. In sum, they were risky. Yet curiously, over the 21-year life of the unit, only two assaults occurred

(Cooke, 1989; Cooke, 1997). As individuals, the prisoners remained challenging, hostile, impulsive, and angry but critically they were rarely violent; the most parsimonious account of the observed change was not that substantial changes had been wrought in the individuals – the changes were in their environment.

In the 1980s, Scottish prisons were subject to much prisoner unrest. At worst, this led to an epidemic of rooftop demonstrations where hostages were taken, abused, and humiliated. Direct observation gained through involvement with the incident management teams in four of these serious incidents – as well as professional commentaries (Coyle, 1987; Scratton, Sim, and Skidmore, 1991) – further highlighted the importance of context; specifically, ill-treatment by staff, inadequate regime quality, limited availability of privileges, and the inaccessibility of prisons for family visits, amongst other things. In the aftermath of these incidents, a conference was held in camera where senior civil servants, prison officials, outside experts and – critically – ten prisoners who had activity engaged in the riots, sat together for three days to debate the way forward. A dramatic volte-face took place in the official position, encapsulating a switch from explanations couched in terms of personality pathology to explanations couched in terms of environments (Cooke and Johnstone, 2010; Cooke, Wozniak and Johnstone, 2008). This analysis accepted the critical role of institutional factors, including the absence of sophisticated frontline custodial staff, deterrent sentences, shifts in parole policy, overcrowding, geographical remoteness, and impoverished regimes. The change in mindset was from doing things *to* prisoners to doing things *with* prisoners (Scottish Prison Service, 1990).

On reflection, the salience of situations should not have been a surprise. Famously, Mischel (1968; see also Mischel, 2004) challenged the field of personality psychology by showing the limited predictive power that personality variables have for observed behaviour; he argued that the characteristics of the situation in which an individual is placed has as much, if not more, influence on their behaviour. This is not just theory. Situational management of risk has a long and distinguished history in the area of crime prevention. Situational strategies include the use of anti-robbery screens in banks and off-licences, soothing lighting, reduced crowding, the provision of toughened beer glasses in public houses, and CCTV and neighbourhood watch schemes in areas of high crime (Clarke, 1985; Clarke, 1997). Striking confirmatory case examples exist within the violence literatures. In a famous prison laboratory study, Haney, Banks and Zimbardo (1973) found that young men who had been randomly assigned to either the role of prison guard or the role of prisoner rapidly adopted negative behaviour in the simulated prison: ‘guards’ became abusive and aggressive, ‘prisoners’ became so distressed that almost half had to be released because of their acute emotional responses. Haney (2006), commenting on the study years later, noted ‘None of the personality or attitudinal measures used in the study explained the behavior of the participants, which seemed to occur entirely as a function of the extreme nature of the environment in which they had been placed’ (p. 130).

In other domains, such as preventative medicine, the important distinction between the strategies that target high-risk individuals and those that target the

whole population is well recognized (Rose, 1992). Population strategies are often situational in nature. Population strategies are particularly effective where, as is the case for violence, the known risk factors are relatively weak (see Cooke and Johnstone, 2010 for a fuller discussion).

Unfortunately, the influence of situational factors on violence risk has not been subject to rigorous research testing and the findings that do exist are inconsistent at times (see Byrne and Hummer, 2008; Gadon, et al., 2006; Wortley, 2002). Nonetheless, some key papers have suggested a link between the organizational, environmental, systemic, staff, and managerial levels of institutional functioning and violence in prisons (e.g., Bloom, Eisen, Pollock and Webster, 2000; Byrne and Hummer, 2007; Cooke, 1991; Cooke, 1991; Ditchfield, 1991; DiLulio, 1987; Gendreau, Coggins and Law, 1997; Rice, Harris, Varney and Quinsey, 1989; Silver, Mulvey and Monahan, 1999; Wortley, 2002) and mental health settings (Richter and Whittington, 2006).

### **Towards the systematic evaluation of situational risk factors for violence**

The last twenty years has seen major strides in the professional study of violence risk in individuals. The seminal work of Hart, Kropp, Webster and others, in the development of the structured professional judgement approach (SPJ) to the evaluation of violence risk, has contributed substantially to the field. These SPJ approaches are evidence-based, they are comprehensive, flexible – designed to deal with the generalities, but also the idiosyncrasies of individual cases – they allow the application of professional judgement and discretion, and guide management strategies. We decided that the time was ripe to approach the problem of situational factors more systematically; we wanted to produce an evidence-based, but practical, procedure, for use by practitioners: we resolved that the SPJ provided the best fit for the purpose. *Promoting Risk Interventions by Situational Management* (PRISM) was the result (Johnstone and Cooke, 2008).

We developed PRISM using three steps. In order to capture the evidence base, we first carried out a systematic review of the literature on institutional violence in both forensic hospitals and prisons. Systematic reviews differ from traditional reviews (e.g. Cooke, 1991) because rigorous methods are employed for locating, appraising, and synthesizing evidence from the research literature. In order to make the study replicable, it is not only necessary to specify the criteria for the inclusion or exclusion of studies, but also the search strategy – including the databases that are to be reviewed – must be delineated before embarking on the review. Tellingly, while a very large number of studies were identified, only very few had direct relevance to the central purpose of the review – the understanding of situational risk factors for violence (Gadon, Johnstone, and Cooke, 2006). We formed the view that the restricted nature of the literature highlighted the lack of attention that has been given to this class of risk factors.

The second step in developing PRISM was the collection of qualitative information from prisoners and staff currently, or previously, employed in prison

and/or health settings. This process clarified which situational variables were associated with institutional violence – compensating for the paucity of empirical studies – but it also provided a rich source of putative explanations concerning why these variables might increase the risk of violence (Gadon, Johnstone and Cooke, 2005, 2006). It informed our thinking not merely about ‘what?’ risk factors to consider but ‘why?’ these risk factors should be considered – understanding risk processes has implications both for the development of effective risk-management strategies and also for providing a deeper understanding of the mechanism by which situational risk factors impact on individual patients or prisoners.

Having gathered this evidence from both research and practice, we moved to the third step in the development of PRISM: this was to distil that evidence – using rationale criteria – into a set of practice guidelines. These guidelines were designed to lead from assessment, through formulation and scenario planning, to effective risk interventions.

### **A brief description of PRISM**

From the outset, the focus of PRISM was institutional violence. We used a broad definition, ‘the actual, attempted, or threatened harm towards another person within the institutional setting. Institutional violence may be construed broadly to include acts such as verbal aggression (including threats of harm or behaviour which is intimidating), physical assault and sexual violence’ (p. 16). We also used a broad definition of situational risk factors in order to capture the diversity and complexity of the organizations studied; and we thus refer to them as features of the context within which the violence takes place. Using a rationale approach, we derived five domains of risk factors. (Figure 7.1).

The first domain is concerned with the *History of Institutional Violence*. Violent behaviour in the two-year period prior to the PRISM evaluation is considered. To some degree, the decision to consider a two-year period is arbitrary but, based on experience, we considered that it was sufficiently long to provide a sample of violent incidents while sufficiently short that the situational risk factors are likely to have remained the same. We broke this domain into four risk factors. It includes: (1) *Previous institutional violence* (i.e., the level of violence within the last two years); (2) *Escalating institutional violence* (i.e., increase in violence in the last two years); (3) *Diversity of institutional violence* (i.e., occurrence of different types of violence – different perpetrators, victims, levels of seriousness, weapon use, and so on); and (4) *Change in number and/or type of complaints submitted* (i.e., any increase or decrease in number or types of complaints).

The second domain is concerned with *Physical and Security Factors*. We broke this domain into two risk factors: (1) *Supervision and control measures* (i.e., the extent to which the availability and implementation of supervision and control is carefully targeted and matched to the level of risk posed); and (2) *Physical layout and resources* (i.e., the extent to which the structural quality, level of cleanliness and hygiene, noise levels, temperature and space, and so on, are appropriate for

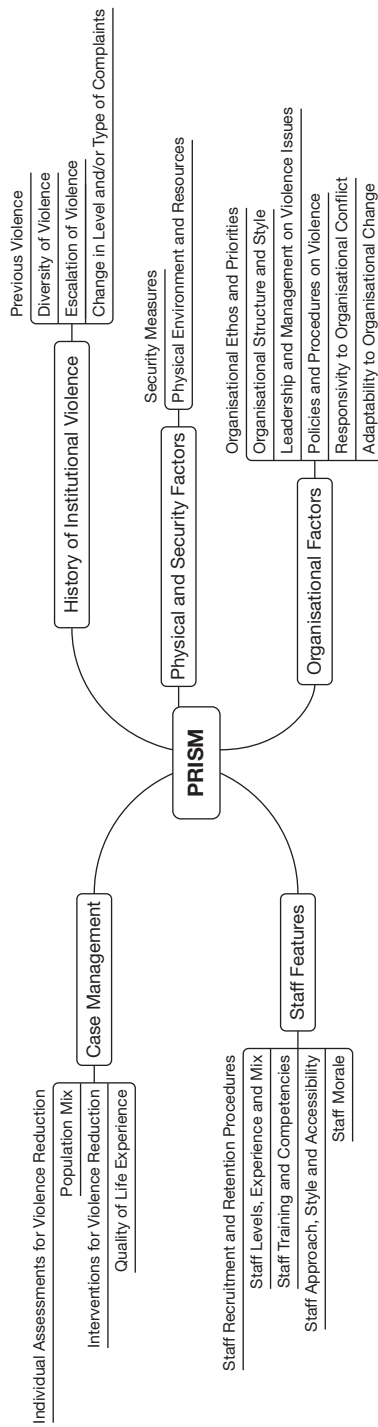


Figure 7.1 Domains of risk factors in the PRISM

the purposes of the institution and are compliant with health-and-safety and human-rights legislation).

The third domain is concerned with *Organizational Factors* and focuses on the strengths and weaknesses of the relevant organizational structures, not only within the institution per se, but the organization in which it is embedded. We broke down this domain into six risk factors: (1) *Organizational structure and style* (i.e., the extent to which the organization has a clear structure and style to its management); (2) *Organizational ethos towards violence* (i.e., the extent to which the organization fosters a zero-tolerance ethos on violence); (3) *Leadership and management on violence-related issues* (i.e., the extent to which the institution promotes a strategic approach to the implementation of violence risk assessment by having a dedicated lead); (4) *Effective policies and procedures on violence* (i.e., the extent to which the organization has a clear policy which explicitly states a pledge to promote a violence-free work environment); (5) *Responsivity to conflict* (i.e., the extent to which the organization responds to conflict either between staff groups, or prisoner groups, or between prisoners and staff, and so on); and (6) *Adaptability to change* (i.e., the extent to which the organization can adapt to change – positive or negative).

The fourth domain is concerned with *Staff Features* and is focused on determining the strengths and weaknesses of the staff compliment. We broke down this domain into five risk factors of concern: (1) *Recruitment procedures* (i.e., the extent to which there are appropriate recruitment and retention procedures for appropriately trained and skilled staff to ensure the effective day-to-day running of the institution); (2) *Staff numbers and mix* (i.e., the extent to which an appropriate number of staff are available to ensure the effective day-to-day running of the organization and the extent to which there are an appropriate number of staff to manage the needs of the prisoner group; included in this item is the extent to which staff are appropriately mixed in terms of their competencies and experience); (3) *Staff training* (i.e., the extent to which staff are given appropriate levels of training on issues regarding risk assessment and risk management and the extent to which this training matches their role); (4) *Staff morale* (i.e., the extent to which staff perceive appropriate working conditions, levels of support, both professional and personal, and how engaged they are with the institution); and (5) *Staff approach and style* (i.e., the extent to which staff foster and engage prisoners in communication and collaboration where possible).

The fifth and final domain is the *Case Management* domain. This domain is concerned with risk factors associated with the population residing in the institution and the matching of risk-management interventions to their aggregate risk and needs. We broke this domain into four risk factors: (1) *Case formulation* (i.e., the extent to which prisoners are appropriately assessed for their violence risk and needs, the extent to which these assessments correspond with existing professional standards of risk assessment such as the HCR-20 (Webster, Douglas, Eaves, and Hart, 1997) and the extent to which staff monitor these risks on a day-to-day basis); (2) *Programmes/therapies for violent prisoners* (i.e., the extent to which the institution makes available and delivers effective programmes);

(3) *Population mix* (i.e., the extent to which the institution appropriately considers prisoner placement decisions); and (4) *Quality of life experiences* (i.e., the extent to which prisoners have access to positive experiences, such as recreation, education, contact with the outside world, and so on).

### **PRISM as an action-orientated process**

As practitioners, from the outset we wanted to make PRISM action-orientated. We were conscious that a PRISM evaluation could be construed as an ‘inspection’, something which would be inimical to effective change. It was important to ensure that the process was collaborative. One way to achieve this was to emphasize that all risk assessments require a multi-method and multi-source approach; the best way to achieve this in an institutional setting is to engage with a multidisciplinary team. A multidisciplinary approach not only facilitates the collection of a broad range of good-quality data but it also enhances ‘buy-in’ from staff; ‘buy-in’ is fundamental to the achievement of change.

The PRISM process is a seven-step process; the principles underpinning systematic case studies provided helpful guidance when developing this process (Yin, 2003). First, the team is selected and trained in the PRISM approach and they are then assigned tasks. Second, the team gathers information about the PRISM risk factors. A multi-method approach to data gathering is utilized, with the reliability and validity of the data being assessed. Third, the multi-disciplinary team, as a group, debates and evaluates the evidence concerning each risk factor and decides whether the risk factor is currently *problematic*, *needs improvement*, or is *satisfactory*. A *not known* option is used when there is inadequate information to rate the item: the use of this option is discouraged; essentially, it is used as a stimulus for more information gathering.

Fourth, future scenarios of violence, which might occur in that particular institution or section of the institution, are envisioned by the multi-disciplinary team using the techniques of scenario planning. Scenario planning has a long history and is applied in the management of uncertain and negative futures (Miller and Waller, 2003). A risk scenario can be considered to be a short narrative, or risk formulation, designed to capture the essence of a complex set of information and translate it into a meaningful account about what – and how – risk factors may be relevant for future violence. Scenarios are methods for thinking systematically about the future and they should guide decision-makers concerning interventions designed to obviate risk (see Hart and Logan, 2011; Hart, et al., 2003). Fifth, having identified key risk scenarios, the next step is to prioritize where to intervene in terms of urgency.

Sixth, the team and responsible managers consider each scenario and develop appropriate, and targeted, intervention strategies. It is vital, if these strategies are to be effective, that they are developed with cooperation amongst professionals working in different areas of the institution, with different skills, roles, responsibilities, and knowledge bases. Critically, risk interventions should be realistic and achievable; it is important to plan to fit with the short-, medium- and long-term

capabilities and capacities of the institution. The seventh, final and perhaps the critical step, is the communication of risk. Communications need to be clear, concise, and simple, and expressed in a fashion that facilitates appropriate action. Fundamentally, the PRISM entails a process that is designed to assist multi-disciplinary teams to apply evidence-based practice to develop effective anti-violence interventions. But does it work?

### **PRISM in the real world: some institutional case studies**

PRISM was developed to facilitate the understanding of institutional risk factors in real-world settings; it was designed to be sufficiently flexible to be useful for a range of tasks. Below we describe three case studies that demonstrate a variety of uses of PRISM – critical incident review, multiple case comparisons within a prison system, and cross-comparison of three segregation units within one prison in New Zealand.

#### ***Barbados prisons in transition***

One of the first real-world uses of PRISM was in Barbados (Cooke and Wozniak, 2010). Barbados is a former British colony in the Eastern Caribbean with a population of just over a quarter of a million people. On 30 March 2005, a fight broke out among a small group of prisoners in Her Majesty's Prison Glendairy, a large Victorian prison built in 1855. The prison held all the prisoners on the island: a thousand prisoners; males and females, adults and young offenders, convicted and remand, and even a group of adult males on death row. Over three days, the single violent incident escalated to the point where a large number of prisoners rioted and took control of the prison and engaged in widespread destruction and arson. The prison was severely damaged and was no longer habitable – the only prison in Barbados was lost and a major logistical and political crisis ensued. To meet the challenge, the government required all metal fabrication facilities on the island to cease their normal activities and build temporary accommodation within the dormitories of a former US naval base, Harrison's Point. The majority of remand and low-security prisoners were housed in dormitories in 'cages' built from metal reinforcing rods; for higher-security prisoners the 'cages' contained one or two prisoners. The nature of the prison experience can be characterized in a number of ways: the principal remand units contained approximately 140 prisoners in four adjoining 'cages'; there was only one toilet and shower for each section of 35 prisoners. Triple bunks were provided but these were insufficient in number, with the result that some prisoners had to sleep on the floor. Exercise, work opportunities, and education were severely restricted for all but a small number of prisoners; most prisoners were forced to spend the vast majority of their day in their dormitory. Other essential services were restricted for many, water and toilet access being the major ones.

Shipping containers were used to segregate prisoners under punishment; these containers were hot during the day and cold at night. The perimeter security of



Harrison's Point was limited and any investment in improving the perimeter of the temporary facility was not cost-effective; therefore, control within the prison was rigorous. Movement for most prisoners was extremely limited and when it was permitted – or required – it generally entailed prisoners having to wear manacles and leg irons and being escorted by staff with dogs and 'supervised' by armed staff. Family members were denied the opportunity to visit or communicate with their relatives in prison other than via video or audio connection. By any objective standards, this was a regime based on limited prisoner movement and extreme personal control.

Inevitably, because the prison had been lost, there had been a loss of critical information. Our first task was to collect information from as many sources as possible, and this was achieved in a number of ways: through the first Barbados prisoner survey (response rate 93 per cent) and the first Barbados prison staff study, through individual interviews and focus groups with prisoners and prison staff, and by informal discussion with ex-prisoners (Cooke and Wozniak, 2010).

It is not surprising that we found many problematic areas in the functioning of the prison system in Barbados; the government and prison service are to be commended for allowing us to examine their system. Indeed, while the regime at Harrison's Point was impoverished and challenging, none of this should distract from the achievement of the Barbados authorities in creating a prison capable of housing over 1,000 prisoners in a matter of weeks.<sup>1</sup>

PRISM allowed us to systematically characterize the regime both in Glendairy prior to the riot and in Harrison's Point subsequent to the riot. We identified many and various areas of concerns in all the PRISM domains in regard to both Glendairy prison and Harrison's Point; however, our particular concern was to the future. During our second visit to Barbados, the new purpose-built prison was being constructed; our primary concern that the dysfunctional culture, attitudes, and practices that grew up in Glendairy, and which were hardened in the fire and conflicts of the riot and its aftermath, would be transferred to the new prison. We made a large number of recommendations regarding new approaches to prison management, procedures for improving staff morale, staff training, leadership and management, strategies for enhancing staff–prisoner relationships, methods for resolving problems of population mix and the benefits of a coherent information system. In couching our recommendations, we drew on best practice internationally but, critically, we tailored the recommendations to fit within the culture and resources of the Barbados Prison Service: recommendations must be realistic to be effective (Cooke and Wozniak, 2010).

### ***High security facilities in New Zealand***

The New Zealand Department of Corrections is a highly sophisticated corrections service. Two research psychologists, Nick Wilson and Armon Tamatea, carried out the first PRISM study in New Zealand (Wilson and Tamatea, 2010). A prior study had indicated that in New Zealand prisons gang members were over-represented in incidents of violence. The gangs were well recognized and

included nationwide organized criminal groups such as Black Power and the Mongrel Mob. Perpetrators of prison violence were significantly younger (40 per cent under 25 years of age) and more likely to be of Maori descent. The majority of violent incidents occurred in remand (awaiting conviction or sentence) or maximum-security units. The focus of Wilson and Tametea's compelling study were New Zealand's only three dedicated maximum-security units, situated next to each other in a prison in Auckland; these units were selected for study in the wake of a number of serious, and high-profile, assaults – prisoner upon prisoner and prisoner on staff.

Following a careful and detailed PRISM assessment, the authors found that management and staff held distorted views of violence and safety. There were significant problems from a lack of leadership focused on violence management, and there was an absence of specific recruitment and training for the peculiar challenges of working under conditions of maximum security. They highlighted the very restricted unlock regime that operated, a regime with no treatment options and only limited recreational activities. The specific management challenges that they identified related to population mix, with gang issues at times preventing prisoner movement, and more broadly there was a problem of siltage, with other prisons reluctant to take transfers of prisoners from these high-security units. There was evidence of staff buy-in to the PRISM process. For example, Wilson and Tametea discovered that corrections staff found the use of risk scenarios a 'natural' move to a future focus; from a focus on blaming for past problems to more pragmatic interventions. It is heartening to note that they found the PRISM process to be an intervention in and of itself resulting in changes, including the paying of more attention to staff mix, the implementation of an active management approach, and the injection of some greater flexibility in regard to quality of life experiences.

### ***Comparing prisons in Scotland***

The PRISM was devised and grew up in Scotland, so it is appropriate that the largest study undertaken so far is a multiple case study of five Scottish prisons (Johnstone and Cooke, 2010). As noted above, in the 1980s, the Scottish Prison Service (SPS) was a failing organization (Cooke, Wozniak, and Johnstone, 2008). In an unprecedented U-turn, the new solution was not to isolate but to integrate the 'difficult' prisoners, to encourage them to participate actively in their sentence planning, and to provide opportunities for quality of life experiences, dignity, respect, and responsibility-taking (SPS, 1990). In addition, the role of the prison officer was redefined from a purely custodial function to a supporting function. Twenty years on, while it is by no means a violence-free organization, the SPS is in a position where, overall, it can boast reducing rates of violence. Notwithstanding, the picture is not uniform and despite these landslide changes in penal philosophy, there is a dearth of high-quality, robust, and replicable research specifically designed to identify 'what works' in terms of Scotland's approach to situational risk management. The organization supported the study of five prisons, which

were selected because not only were they heterogeneous in purpose and design, but they also varied in level of perceived violence. The prisons were diverse, from Scotland's only prison for female offenders, through the main national facility for young offenders, to a high-security prison holding prisoners serving sentences of four years or more, a local prison for untried and convicted male prisoners (young offenders and adults), and, finally, a smaller local prison. We opted to use a multiple case study design as such a design is appropriate when the purpose of the research is to investigate 'a contemporary phenomenon within its real-life context especially when the boundaries between phenomenon and context are not clearly evident' (Yin, 2003, p. 13). Case study designs have the advantages that they tolerate differences across cases while, at the same time, they allow broad generalizations to be achieved.

At the conclusion of each evaluation, each site received a detailed and highly individualized report outlining the specific risk factors, scenarios and risk-management interventions appropriate to their setting. For the purposes of illustrating the application of the tool, common themes to emerge are presented here. All sites were rated *problematic* or *needs improvement* on *Previous violence* and *Diversity of violence*. Tellingly, in most settings it was impossible to rate the *Complaints* item due to inadequate data. Three of the five sites were rated as *problematic* in terms of their supervision and control procedures, and three of the five prisons were rated as *problematic* on the *Policies and procedures on violence* factor. Three of the five sites were rated as *problematic* on *Leadership and management on violence issues* and four of the five sites were rated as *problematic* on *Effective policies and procedures*. All but one site received a *problematic* or *needs improvement* rating on *Staff levels, experience and mix*. None of the sites were viewed as having satisfactory *Staff morale*. Three of the sites had *problematic* ratings on *Population mix*, four were rated *problematic* in terms of *Case Management* and all sites were rated as having inadequate *Interventions for violence reduction*. The evaluations also revealed that policies and procedures with respect to identifying and managing risks in individual prisoners could be improved.

Across all settings, the most likely scenario was verbal and physical aggression between individual prisoners or between prisoners to staff. One setting identified a high risk of collective violence. All settings were rated as having a low likelihood of sexual violence.

A range of risk-management interventions were proposed. These were matched to the risk-factor ratings and the scenarios to be managed. Examples included an improved and more sensitive violence-recording procedure, a review of the complaint procedure, staff training on the importance of attending to all forms of violence, including minor incidents, ongoing communication across the tiers of staff with regard to security and control, immediate intervention with regard to some of the physical environments rated 'not fit for purpose', improved policies and procedures on violence issues, having a competent leader on violence-related issues in post, a review of staffing issues – levels, mix and retention procedures, better individualized violence risk assessments, improved

access to treatment programmes, and better processes to ensure acceptable population mix.

The fieldwork demonstrated the practical utility of PRISM in that it was found to facilitate comprehensive assessments of each setting and to achieve positive ratings on user-satisfaction. Feedback from participants indicated that the PRISM process encouraged collaboration and ‘buy-in’ from different staff, with different perspectives and priorities. Indeed, the assessment process itself appeared to have functioned as an intervention whereby team members had the opportunity to learn about the relevance of situational risk factors and how these factors might be tackled in creative ways.

The above are just three examples of PRISM case studies. We believe that they have demonstrated the content validity of the PRISM process, but also that they have demonstrated its utility. However, good evidence of the approach can only accrue through the application of the method in diverse settings, and specifically by its use by other practitioners. Other studies have been carried out; Gregg and Payne (2010) considered an institution for incarcerated youths (15–17 years) in England, Neil (2010) studied a unit within a Scottish high-security forensic hospital, and Johnstone, in collaboration with colleagues, is in the process of facilitating an evaluation of a continuing care inpatient ward in a Scottish psychiatric hospital.

The case studies we have featured highlight some applications of PRISM but we consider that there are others. First, colleagues in New Zealand have indicated that PRISM will provide a set of guiding principles when developing a new treatment regime for sexual and violent offenders. It will assist those tasked with planning and implementing the new regime to consider the situational factors that need to be taken into account from the very beginning. This promotes a proactive approach to violence prevention. Second, PRISM could play a part in the training of practitioners and other professionals working within institutions containing those with the potential for violence. Training may enhance awareness and lead to creative interventions.

Third, we believe that PRISM can be used to inform theory by helping to identify the latent – or unobservable – ‘risk processes’ that underpin the risk factors that we assess. The research strategy that led to the development of PRISM helped to answer the ‘What?’ question, that is, what institutional risk factors should we attend to when we are considering risk of future violence in prisons or forensic hospitals. However, to effect change, it is necessary to answer the ‘Why?’ question too; why, for example, might lack of staff training or lack of clear management or poor information systems lead to an increase risk of violence? It is as if the evaluator has to carry out a ‘conceptual factor analysis’ based upon their understanding of the processes that underpin violence (Cooke and Wozniak, 2010). Each risk factor needs to be considered and then deconstructed in order to identify the potent elements of it that contribute to future risk. The key elements of these risk factors are likely to be underpinned by a limited set of risk processes; for example, promotion of a sense of injustice, promotion of a sense of uncertainty, promotion of a loss of agency, promotion of cultural expectations to be violent

(e.g. through gang membership). Consideration of ‘why?’ a risk factor may be relevant should assist our understanding of distinct but related risk processes that – individually and together – shape the topography of violence (see Cooke and Michie, 2010; Cooke and Wozniak, 2010).

### **PRISM: things we have learned so far**

Underpinning the philosophy of all forms of SPJ approaches is the core principle that they should be evidenced based. PRISM is still relatively new, the evidence base is just developing, but we believe that we are learning some key lessons from the case studies already carried out so far; these lessons relate both to practical issues to do with effective interventions and theoretical issues to do with the interplay between situational risk factors and violence.

We discovered that the PRISM process is, by its very nature, an intervention and it fosters an understanding and collaboration amongst members of staff in the institution who would ordinarily not have anything to do with each other, and who often would have little appreciation of the skills and commitments of others in the workplace. This can be energizing. From a practical perspective we have learned that the model is relatively complex and for optimal use the PRISM team needs to contain some members who are *au fait* with the SPJ approach to risk assessment and risk management. The organization needs to commit appropriate staff across a range of levels to achieve an effective assessment.

Looking to the future, we think that there are three key tasks. The first task is to carry out development work – reviews and interviews (expert and stakeholder) – to determine whether the approach can be generalized across types of settings. We see no immediately obvious reasons why the principles of effective organizational functioning should not generalize to other types of organizations: secure care settings for juveniles, community-based services for offenders or out-patient settings for forensic patients, residential settings for populations presenting with challenging behaviour (e.g., older adults care homes or inpatient wards, resources for patients with learning disabilities), and so on. But this assumption requires testing.

The second task is to carry out developmental work to determine whether these situational factors also influence markers of distress, disturbance and dysfunction in closed settings other than violence; these markers might include suicidal and parasuicidal behaviour, depression and anxiety, reluctance to engage with regime, or failure to benefit from treatment activities, absconding, and other risk-taking behaviours, perhaps even relapses in mental illness. The third task is to develop a taxonomy of strategies for risk management. One of the findings that struck us, looking at the available studies across settings, is the commonality of problems. We believe that while responses need to be tailored to the individual institution, there are common strategies that can be adapted to fit specific circumstances. The wheel does not need to be reinvented.

We conclude this brief chapter by arguing that the situational approach has a number of advantages and the application of PRISM might be viewed as a first

step in unlocking these advantages in a systematic manner (Cooke and Johnstone, 2010; Johnstone and Cooke, 2008). What are these advantages? First, the interventions derived from a situational approach are applicable across a whole institution and can have a broad – and significant – impact in situations where there are insufficient resources to deliver individualized interventions. Second, situational interventions should influence the group of ‘difficult’ prisoners or patients who, almost by definition, are unlikely to engage with individualized approaches. Third, these interventions can be cost-effective, with current assets being brigaded more effectively.

We started this chapter by observing that behaviour can be thought of as being shaped by a pair of scissors, with one blade being the characteristics of the actor and the other blade being the characteristics of the environment. We hope that the PRISM provides the missing second blade.

## Note

- 1 The three reports submitted by the authors to the Office of the Attorney General in Barbados are available online at [www.icpa.ca](http://www.icpa.ca).

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