Cocooning in prison during COVID-19: Findings from recent research in Ireland

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Abstract
The advent of COVID-19 prompted the enforced isolation of elderly and vulnerable populations around the world, for their own safety. For people in prison, these restrictions risked compounding the isolation and harm they experienced. At the same time, the pandemic created barriers to prison oversight when it was most needed to ensure that the state upheld the rights and wellbeing of those in custody. This article reports findings from a unique collaboration in Ireland between the Office of the Inspector of Prisons – a national prison oversight body – and academic criminologists. Early in the pandemic, they cooperated to hear the voices of people ‘cocooning’ – isolated because of their advanced age or a medical vulnerability – in Irish prisons by providing journals to this cohort, analysing the data, and encouraging the Irish Prison Service to change practices accordingly. The findings indicated that ‘cocooners’ were initially ambivalent about these new restrictions, both experiencing them as a punishment akin to solitary confinement, and understanding the goal of protection. As time passed, however, participants reported a drastic impact on their mental and physical health, and implications for their (already limited) agency and relationships with others, experienced more or less severely depending on staff and management practices. The paper also discusses the implications for prison practices during and following the pandemic, understanding isolation in the penological context, and collaboration between prison oversight bodies and academics.

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Introduction

The global pandemic reshaped prison regimes and the experiences of people in custody. New rules imposed to manage the spread of COVID-19 were felt most acutely by people categorised as vulnerable due to their age ($\geq 70$) or underlying health conditions, with many placed on long-term restricted regimes for their own protection (Byrne et al., 2020). Given existing knowledge about the pains and deprivations of imprisonment (Crewe, 2011a; Sykes, 1958), however, it was likely that this policy of ‘cocooning’ – the prolonged separation from the general population of those most vulnerable to dying from COVID-19 – would exacerbate the isolation, lack of access to services and diminished agency already experienced by those in custody.

Early in the pandemic, the Office of the Inspector of Prisons (OIP) in Ireland collaborated with academics to hear the voices of people required to cocoon in Irish prisons. They aimed to overcome the barriers to prison oversight and establish how best to minimise the harms that imprisoned ‘cocooners’ experienced because of the public health restrictions. In April 2020, they gave journals to most persons cocooning across Irish prisons. Out of 86 journals delivered, 72 were returned after two weeks, 49 of which contained writing and/or drawings. Upon the journals’ analysis, the group engaged with the Irish Prison Service (IPS) and civil society stakeholders to discuss the findings and their implications for policy and practice.

This article reports their process and findings, exploring how people in prison (PIP) experienced cocooning early in the pandemic, and situating the results in the literature on experiences of imprisonment. The findings suggest that, while cocooners generally believed that the policy was in place to protect them, their feelings of punishment, boredom and despair greatly exceeded those in normal times, particularly among people reporting existing mental or physical health conditions. Moreover, the study indicates that decisions made by prison authorities, and by the staff with whom cocooners interacted, could temper or exacerbate the problems they experienced.

Although compulsory cocooning has now ended in Ireland, the insights and implications of this research are of value across the prison studies field for several reasons. Firstly, PIP can continue to cocoon voluntarily, and recent experience suggests that public health measures, including quarantine periods for recent committals, may be relaxed and reintroduced cyclically for some time. Secondly, as PIP globally are subjected to prolonged periods of isolation for various medical and non-medical reasons, these findings can inform responses to isolation in prisons generally. Thirdly, the study represents an example of how prison services can listen to the voices of the most vulnerable people in their care and how academics can support prison oversight.

The article commences by outlining the restrictions imposed in Irish prisons as the pandemic commenced and the need for research to investigate their impact, in the context of literature on the negative effects of isolation in prisons. The next section describes the challenges of prison oversight during the pandemic, before detailing the project’s initiation and, separately, the methodology. It then divides the findings into
four themes: cocooning felt like a punishment equivalent to solitary confinement; identities frayed as time passed and mental health deteriorated; the restrictions compounded existing constraints on agency; and consultation and communication with the prison service and interactions with staff and with other people could exacerbate or abate negative feelings. The article concludes by discussing the implications for policy, practice and academic–inspectorate collaboration.

COVID-19 and isolation in prisons

Globally, prisons were potential locations for COVID-19 outbreaks (Kinner et al., 2020), and their residents were uniquely vulnerable to the physical and mental health challenges thus created. Firstly, as a respiratory illness, COVID-19 spreads primarily through prolonged periods of close contact between people, especially when indoors. As such, prisons are ideal environments for its rapid transmission as they are often overcrowded and designed in ways that hinder physical distancing (Kay, 2020). Indeed, PIP have often contracted the virus at higher rates than people in the community (Penal Reform International, 2020). Secondly, PIP have significantly higher rates of physical and mental ill-health than the wider population (Fazel et al., 2016; OIP, 2016). This has implications for those who contract COVID-19 in prisons, or for whom further isolation might intensify existing health problems, given that medical and psychological services available in prisons do not match residents’ needs (OIP, 2016; World Health Organization, 2019).

Prison administrations around the world put a range of measures in place to reduce the spread of COVID-19. In Ireland, this involved a programme of early releases to provide space for isolation, single-cell occupancy and physical distancing (Conneely, 2020; Irish Penal Reform Trust [IPRT], 2021). Within prisons, video calls supplanted in-person visits, while in-cell telephony replaced some face-to-face psychological and other services (Garrihy, 2020a; IPRT, 2021). The services and amenities facing closure or severe restrictions included education, workshops, gyms, religious services, and external medical appointments, while all PIP faced longer periods of in-cell confinement (Garrihy, 2020a). The current research focused on another restriction, cocooning, whereby immunocompromised PIP and those aged ≥70 were isolated in certain areas of the prison, confined to their cells for 23 h a day, with only one hour for recreation and exercise in the yard.

Extraordinarily, the IPS did not report a case of COVID-19 among its population until August 2020. As outlined in a paper submitted to the World Health Organisation to evidence a model of best practice (Conneely, 2020), the IPS swiftly adapted an infection control plan that was introduced previously to manage a tuberculosis outbreak. Many of those who participated in this project recognised this success at the time of the data collection (April–May 2020) and expressed the belief that cocooning aimed to protect them. Nonetheless, these restrictions came at a human cost, severely affecting the lives and wellbeing of PIP. In Ireland, psychiatric care in prisons was reduced to just five consultant psychiatrists, two registrars and 11 psychiatric nurses supporting approximately 3800 people (Fagan, 2021), despite mental health being among ‘the most pressing issues within Irish prisons’ (European Committee for the Prevention of Torture and Inhuman
or Degrading Treatment or Punishment [CPT], 2020: 37). While oversight and research were needed to understand what was happening in prisons and how to minimise the suffering of PIP, traditional approaches to both risked bringing the virus into prisons.

Of course, isolation in prisons is nothing new. PIP may be subject to various forms of isolation, depending on the jurisdiction, the type of prison and their individual circumstances. For many people, their primary experience of isolation is from family, friends and others on the outside. Others might be subject to ‘supermax’ regimes (King, 1999), while others, still, might experience a period of solitary confinement during their imprisonment, whether voluntary or involuntary (Smith, 2006). In Ireland, PIP could be isolated for administrative reasons (punishment) or protection from/for others, with each used at a relatively high rate before COVID-19 (IPRT, 2018).

Social isolation generally has been characterised as a ‘form of pain’ (Cacioppo and Cacioppo, 2014: 20) and, in conjunction with its synergistic relationship with perceived social isolation (loneliness), is linked to higher risks of mortality and other negative outcomes (Beller and Wagner, 2018; Holt-Lunstad et al., 2015; Xia and Li, 2018). The pernicious impact of enforced isolation can emerge even if imposed with benevolent intentions. For example, medical quarantining can cause ‘general psychological symptoms, emotional disturbance, depression, stress, low mood, irritability, insomnia and post-traumatic stress symptoms’ (Brooks et al., 2020: 913).

The negative effects of penal isolation are well versed in the empirical literature, which presents it as a ‘psychologically destabilizing’ (Haney, 2017: 321) experience that can undermine the sense of self and preclude both social interaction and sensory stimulation (Akil, 2020; Grassian and Friedman, 1986; Kupers, 2017). Isolation in prison has been linked to depression, self-harm and suicide (Brown and Day, 2008; Kaba et al., 2014; Liebling, 1992), although Suedfeld (1974) suggests that its impact may be contingent on the circumstances and motivations behind its use. Choosing isolation is experienced differently than enforced isolation, as is isolation of varying durations, with implications for the harm caused and coping mechanisms employed (Arrigo and Bullock, 2008; O’Donnell, 2014; Rhodes, 2004). Still, it is difficult to overstate the harm that isolation can cause in prison environments and necessary to keep this in mind when considering the repercussions of COVID-19 restrictions, and the need for oversight and research in this context.

**Prison inspection during COVID-19**

The pandemic created obstacles to prison oversight. While inspectorates’ legal duties remained, many paused in-person monitoring during national lockdowns (Deitch and Bucknall, 2020), or adapted their approach to overcoming the ethical and logistical barriers to monitoring (Association for the Prevention of Torture, 2020; Zinger, 2020). In England and Wales, for example, HM Inspectorate of Prisons (2021a) suspended visits, before introducing one- and three-day ‘short scrutiny visits’, involving varying degrees of access and direct engagement with PIP.

In Ireland, too, such adaptation was necessary. The OIP, led by the Inspector of Prisons (IoP) has statutory responsibility for prison monitoring under the Prisons Act 2007 (OIP, 2022). Comparably with national bodies across Europe, and under its
inspection framework, it aims to support excellence in delivery and outcomes in prisons ‘through an independent programme of inspections and investigations’ (OIP, 2022). It also investigates the deaths of people in custody or on temporary release, receives letters from PIP, and oversees the prison complaints system, albeit without investigating individual complaints (OIP, 2022). Ireland remains an outlier in Europe, being one of only three European Union countries yet to ratify the Optional Protocol to the United Nations Convention against Torture, and thus lacking a National Preventative Mechanism (Aizpurua and Rogan, 2021: 2). Additionally, there is no Prison Ombudsman, despite successive justice ministers and the OIP (2016) supporting its establishment.

Given the restrictions imposed in Irish prisons to prevent transmission of COVID-19, including restricted regimes and limitations on external visitors to prisons, oversight of prisons was of the utmost importance early in the pandemic. The OIP remained committed to oversight, despite the challenges posed by COVID-19, and its principle of ‘doing no harm’. They decided to continue in-person oversight through short visits to all 12 Irish prisons during the first month of restrictions. The visits varied in length and aimed both to examine how prisons implemented COVID-19 preventive measures and to determine their impact on PIP. The IoP was mindful to balance the need to hear directly from PIP and to avoid spreading COVID-19. Cognisant that these challenges would likely sustain indefinitely, early in the pandemic the IoP sought new ways to fulfil her statutory duties and minimise the harm to those in custody. Preliminary discussions with one author identified those cocooning in custody as a priority group. Subsequently, the IoP met the researchers to discuss collaborating to listen to those cocooning and establish how to mitigate the harm they experienced. Their challenge was to find a way, within available resources, to capture rapidly first-hand experiences of those cocooning in Irish prisons, without in-person data collection.

**Methods**

The academic partners obtained ethical approval from their university. The IoP and researchers developed a plan to work with Irish Red Cross (IRC) volunteers – PIP trained to deliver peer-to-peer healthcare support – to distribute journals to cocooners to enable them to record their experiences over two weeks in April and May 2020. The journaling methodology was used to collect as much data as possible, rapidly and without face-to-face interactions with PIP. Remote interviews were ruled out because of their resource intensity, given the restrictions on respondents’ movements. Cocooners could complete the journals in their cell at any time; interviews would require prison staff to move otherwise isolated persons at specific times. The IRC established Health and First Aid programmes in Irish prisons in 2009. Their volunteers support peers to participate in projects and hold a trusted status within the prison milieu (IRC, 2021). Their involvement in distributing and collecting journals enabled anonymity vis-a-vis staff, and they could explain the project’s purpose and voluntary nature to cocooners.

The journal’s front page was a brief information sheet, developed with IRC volunteers and prison teachers to maximise its accessibility. It included statements that returning a
marked journal constituted consent to participate, participation was voluntary, and every effort was being taken to maximise anonymity. Recognising participants’ diverse literacy capabilities, the journals had lined and blank pages. The front page stated that participants were free to write and/or draw about their experiences of cocooning in any manner they saw fit. It also provided three prompts for those who wished to use them: How are you getting on at this time? How connected do you feel to others within the prison? How connected do you feel to people outside the prison? To maximise anonymity, journals were only distributed in prisons with two or more cocooners (hence, not all cocooners received a journal), and the front page asked participants not to include details of their location or personal information. These decisions limit what we can learn from the findings, as we do not know how representative participants were of cocooners regarding age, gender, ethnicity, sentence length, prison of residence and other factors. It is also possible that persons who were the only cocooners in a prison, whose literacy or English language skills (journals were only distributed in English for expedience due to the uncertainty around the pandemic and the restrictions’ duration) did not enable their participation, or who otherwise opted not to mark or to return their journals, had different experiences from those who returned data. The anonymity of responses also made it impossible to intervene if, for example, a person reported self-harm. These decisions were deemed necessary, on balance, to maximise anonymity and therefore to minimise the potential of repercussions for participation. Everyone given a journal was asked to return it (whether marked or otherwise) to maximise respondents’ anonymity.

After receiving standardised training including the research aims, objectives, ethics and requirements from the IoP, the IRC volunteers distributed 86 journals across seven prisons in April 2020. This represented most of the 94 cocooners, of whom approximately two-thirds were cocooning due to advanced age (≥70) and one-third because of medical conditions. As noted, some cocooners did not receive a journal if they were the only person cocooning in a prison. Three prisons had one or zero cocooners at the time; two prisons had more than one person cocooning (two and four, respectively), but did not receive journals for practical reasons relating to expediency (very low numbers of cocooners combined with relatively large distances to those prisons) reflecting the universally challenging situation at the start of the pandemic. The IoP delivered the journals to IRC volunteers and briefed them to explain the project to prospective participants and help those who sought support to participate. This included the goals, methods and voluntary nature of the study so that volunteers could convey these to cocooners. Volunteers collected the journals a fortnight later and gave them to the IoP, who scanned them and shared them electronically with the academic partners. A two-week period was selected, firstly, to balance the need to obtain sufficient data for the study against the desire to report findings rapidly, and secondly, because the distribution and collection of the journals were set to coincide with the IoP’s prison visits. A two-week period was seemingly sufficient, as none expressed a desire to extend their journaling further. Ultimately, 72 journals were returned, 49 of which contained writing or drawing over 355 pages. The flexibility afforded participants was reflected in the diverse entries, including answers to the prompt questions, diary entries segmented in days or hours, unstructured entries throughout the fortnight, thematic entries, drawings and combinations thereof. As noted, a limitation of this study is that the sample likely
skews towards those with stronger literacy or English language skills. While qualitative by design, a notable limitation is a reliance on self-reported data and the absence of contextual data on participants with the findings presented below on this basis.

After gaining familiarity with the journals, the two researchers employed inductive thematic analysis to manually code the data (Braun and Clarke, 2006). The research questions focused on how cocooning was experienced, what can be done to ameliorate this in the short term, and what insight these provide on prison life, policy and oversight functions? These guided initial individual coding but open-coding allowed the inclusion of all prospective themes before comparing codes and discussing their observations with the IoP, who also read the journals. Based on preliminary coding, they collaboratively identified ‘candidate themes’ (Braun and Clarke, 2006: 91) before reviewing and refining them, focusing on prison practices that helped or harmed participants, ways that the service could meet needs, and insights into cocooners lived experiences. The researchers’ initial codes showed high consistency and overlap. Consequently, collaborative analyses effectively refined codes to develop themes including eventual higher-order themes such as ‘punishment’ and ‘mental health’. Outlier codes were considered and synthesised or omitted as appropriate. In July 2020, the partners convened a stakeholder roundtable of IPS policymakers, academics, civil society bodies and PIP to discuss the findings and recommendations. This culminated in a report (OIP et al., 2020), written as a practical overview of the findings and their implications for policy and practice. The following sections represent an attempt to situate these findings in the penological literature and consider their implications for understanding isolation and restrictions within prisons more widely.

Cocooning felt like punishment and solitary confinement

Despite recognising that cocooning was introduced with non-punitive aims, for many cocooning still felt like punishment and solitary confinement. Participants almost universally expressed severe negative psychosocial and emotional experiences and a sense of suffering an additional punishment of segregation because of their age and/or health status. According to one, cocooning quickly felt like ‘a severe P19 punishment’¹ (Journal 1). This reportedly had significant deleterious effects on participants’ mental health, sense of self and social engagement. Other participants equally noted:

My punishment by the courts was prison, now doing my punishment cooconing is like doing my time in solitary confinement. Being punish[ed] now for having a chronic [x] disease. (Journal 26)

This is a far worse punishment than being locked up for a P19 and is very very depressing. (Journal 9)

Cocooners’ exclusion from the general population, services and daily routines compounded such feelings to undermine the notion that it was in their interests to cocoon. In an inversion of the medical advice from which cocooning originated, participants expressed feeling stigmatised and treated as a source of risk by prison staff, despite cocooning because of their own vulnerability. Participants framed these perceptions in evocative terms: they felt like a ‘leper’ (Journal 11) or a ‘pariah’ (Journal 12).
For many, the enforced solitude resembled or became indistinguishable from the restricted regimes often used as punishment in prisons, even if their suffering was unintended. That is, a theoretically benevolent policy interacted with the dynamics of coercion and vulnerability that contextualise the prison experience. While some assert that greater confinement to cells should endure post-pandemic (Parkinson, 2020), prison services must recognise the trauma this causes and reduce, not further normalise, voluntary and involuntary prison segregation (Haney, 2020). In Ireland, the CPT report (2020) described the impact of protective segregation on mental health, likewise indicating that benevolent rationales do not counteract the adverse psychological effects of isolation.

**Identity, time and deteriorating mental health**

The participants expressed high levels of despair relating to isolation, segregation and disturbed temporal order. In particular, the rupture of established routines seemed also to rupture participants’ identities and coping adaptations to the prison environment. As one person noted:

> I surprise myself I have become so depressed since being cocooned: I feel that I am isolated and solitary. I am also surprised that I am unable to lift myself out of this depression. There is only a few times in my life when I felt suicidal and this is one of them. (Journal 34)

The negotiation of time and space are inexorably linked to identity and survival in prison life (Moran, 2015; O’Donnell, 2014), and participants’ coping strategies were disrupted by the imposition of cocooning. They described days blurring into each other, reflecting what Crewe et al. (2020: 301) refer to as ‘time distorting and losing ontological meaning’.

As cocooning endured, participants expressed sentiments suggesting a flattening of their temporal textures. One (Journal 8) succinctly wrote: ‘The trouble is tomorrow is the same as yesterday’. This reflects a central challenge of prison life and its modification whilst cocooning: prison timetables. PIPs’ relationship with the prison timetable is complex. In offering structure and routine, it can be both resented and appreciated (Foucault, 1977). Its rigidity can overwhelm; its consistency offers ‘certainty when much is uncertain’ (O’Donnell, 2014: 199). While cocooning, however, the refuge offered by the timetable, populated with services and activities helping PIP ‘avert their gaze from the future’ (O’Donnell, 2014: 199), largely ceased. Indeterminate cocooning created a barren temporal landscape with little purposeful activity or social contact. Stripped of familiar routines and ‘time anchors’ (O’Donnell 2014) – events demarcating time and providing a location for memories – time unmoors.

For participants, the experience was one of affected sleep patterns and acute frustration and boredom. As one person wrote:

> My mental health is suffering big time because of all of this, I feel the doctor here doesn’t hear me […] I feel she thinks I am lying to her about not being able to sleep, it’s like my brain won’t shut down at night. (Journal 37)
Another stated:

All you are left with when the door bangs out is your thoughts and my head drives me fucken [sic] crazy. I’m suffering bigtime with this. (Journal 37)

This corresponds with existing studies of prison isolation (Haney, 2020; Smith, 2006). Identities developed in prison societies require curation and maintenance, rely on social interaction and are mediated through exchanges in prison-orientated economies of material, social and cultural capital (Crewe, 2009). As such, an abrupt cessation of most forms of social contact, activities and exchanges can fracture one’s sense of self (Rhodes, 2004), while reduced social interaction and purposeful activities generate a vast temporal expanse, furthering people from their anchored self, intensified in that temporal wilderness of solitude. Again, the pernicious effects of isolation on mental health under cocooning mirror the well documented effects of prison isolation in other forms (IPRT, 2018; Mills and Kendall, 2018) and emerging research on the impact of COVID-19 in prisons (Carvalho et al., 2020; HM Inspectorate of Prisons, 2021b).

Those with an upcoming release date experienced specific anxiety. PIP can feel conflicting emotions when approaching release, including excitement, focus, hesitancy and worry (Smith et al., 2018). However, the prospect of being released into a national lockdown undermined any positivity. The demographics of the sample may partially account for this. Due to participants’ age profile, the sample likely included elderly and (given the Irish context) historic sexual offenders, who can have higher rates of literacy and education than overall prison populations. This cohort is already at risk of isolation, reduced family ties and physical and mental health vulnerabilities (Humblet and Snacken, 2016; Joyce et al., 2016; OIP, 2016; Ricciardelli and Moir, 2013). For some, cocooning may conceal ‘hidden injuries’ (Crawley and Sparks, 2005) and make them especially vulnerable to the reduced medical services treating existing ailments and illnesses:

Prison was supposed to make appointment for me to see a surgeon before this… I understand the problem with hospitals at this time of emergency with Covid 19. Not knowing [identifiable details removed] is very worrying. (Journal 3)

The findings reveal the tension between the ostensibly protective purpose of cocooning and its acute negative impact on participants’ reported wellbeing. Concerning the search for meaning and agency, too, the findings reflect how cocooning may have exacerbated the prison’s inherently coercive nature. Reflections on social isolation, restricted lives and mental health have permeated public discourse during the pandemic, but these findings highlight the uniquely crushing experience of imprisonment during the pandemic. The opportunities and resources available in the community eclipse those in prison, while such comparisons attest to the lack of appreciation for how public health restrictions can compound the existing traumas and limits to agency in prison environments.
Agency and preservation of mind and body

In an environment that restricts agency by design and through power relations, limited opportunities to exert agency – such as purposeful activity, moving between spaces and selecting one’s own food – acquire symbolic and practical significance (Hancock and Jewkes, 2011; Rowe, 2016). The regression in agentic opportunities during cocooning created additional idle, unregulated time, demanding new adaptations or the revision of established rituals and routines, counteracting perceptions that the new regimes were justified or underpinned by a rationale of care.

Excess idle time without education, vocational courses and workshops were accentuated by the reduction of stimulation such activities provided. Participants’ experiences corresponded with the existing literature on long-term imprisonment and solitary confinement (Flanagan, 1981; Middlemass and Smiley, 2016), often characterising time as ‘an adversary’ (Crewe et al., 2020: 302). Cocooners reported endeavouring to exert agency by structuring or segmenting their days, a ‘reorientation’ strategy (O’Donnell, 2014: 240) to protect against the indeterminacy of the pandemic. Examples provided included allotted periods for reading and other intellectual activities, listening to news broadcasts, or undertaking domestic chores or exercise in their cells, timed relative to meals and yard time. Some journals were written so as to provide daily accounts that vividly report participants’ reportedly continuous temporal struggle.

The limited agency available to cocooners relied on the consistency and communication of the particulars of the regimes, including their timetable for yard access, family phone/videocalls, psychological services, and meals. This purportedly hindered adaption, resulting in distress and anxiety. For one person, the ritual reading of a daily newspaper was undermined when an officer unusually delivered it late at night. Their dependence on this ritual resulted in the participant’s continued adherence: despite the newspaper’s late arrival, they read it until early morning, with the effect of further sleep disruption and lethargy over the following days. In another strategy, some participants sought to control or subdue time by engaging in routinised periods of what O’Donnell (2014: 226) called ‘removal’ – or ‘busyness as an end in itself’ – by reading, watching television, listening to the radio, cleaning or completing puzzles:

Another day locked away from everything. I know it’s necessary but it sure is boring. My cell is very clean and tidy, mop and polish every morning. I might become an obsessive cleaner! (Journal 7)

Several persons also expressed serious discomfort at being moved from cell to cell, preventing them from settling and creating uncertainty as to whether they would be moved again. Some acknowledged efforts to progress and communicate the hastily imposed regimes to them. The intensity of isolation seemingly increased the need for, and the benefits of receiving, regular information:

The routine seems to be falling into place at this time and yesterday we received a schedule for the week of when our turn to go to the yard would take place. The schedule is much appreciated. (Journal 11)
I have 6 leaflets from the IPS re: the virus. Communication is very good, explaining why the normal prison routine has been so drastically changed. [...] Info sheet[s] from the IPS encouraging us to keep our minds busy [...] are very useful. (Journal 37)

In some prisons, participants highlighted officers’ efforts to provide varied, novel sources of stimulation, entertainment and intellectual engagement. Service-wide innovations included a dedicated channel on the in-cell television system broadcasting Netflix (Deegan, 2020). In practice, one film or serialised show was broadcast every evening on the channel which, while not comparable to the ordinary service for those familiar with streaming services, offered more content than is typically available on terrestrial television channels available in prison (Garrihy, 2020a). Cocooners appreciated this and other efforts to occupy their minds and time, such as the (often, locally arranged and ad hoc) provision of puzzles. Still, the volume of time to fill could overwhelm such efforts:

Gets a bit boring at times, only so many word searches you can do. (Journal 42)

Otherwise confined to a cell, opportunities to ‘escape’ to the yard or workshops are imperative for PIPs’ physical and mental health (Strong et al., 2020). Ordinarily, out-of-cell time facilitates structured activities such as work, education, exercise and informal socialising, which form essential components of identity (Sloan, 2016). However, cocooning regimes restricted out-of-cell time to one hour per day and, as such, opportunities to nourish mind and body in this way were of paramount importance.

Participants recognised the correlation between physical and mental health and sought to maximise the exercise achievable in their brief yard time. Some journal entries included tracking of steps (in prisons that provided pedometers), laps of the yard or distances covered. These data were included in several journals, sometimes alongside explanations of the merits of exercise and personal step targets. Additionally, many entries highlighted relationships with the built environment (Jewkes, 2018), punctuated by references to engagement with the natural world, such as weather and foliage:

Looking forward to a walk in the yard, at least I can see the trees coming into leaf over the top of the wall, that’s it for now. (Journal 8)

Cocooners’ struggles to sustain mind and body were evident in their descriptions of food. Food in prisons is associated with health and wellbeing and is symbolically linked to the construction of identity, possessing agentic qualities (Earle and Phillips, 2012; Godderis, 2006; Smoyer, 2014). The ability to select one’s food is one of few choices available to PIP. In Ireland, most PIP attend a servery station at which they can select elements or quantities from the options available within a set daily menu. Cocooners, however, reported being brought food without having any input into what they received. As one participant noted:

Could not eat dinner and put it straight in the bin. The food they bring me is not great and usually has gravy or sauce all over it. I can’t eat most of it. (Journal 30)
Many suggested that the indignity of the inability to select their food was exacerbated by its dehumanising presentation in cardboard boxes:

We have meals on wheels but it’s not very nice eating [x] out of a cardboard box. (Journal 19)

Accommodations made for other PIP were not available to cocooners, compounding feelings of lesser treatment, limited autonomy and punishment. Adaptations were essential, such as rationing food from one meal to compensate for the disliked or allergenic elements of another, with a noted absence of fruit or vegetables. Such restrictions to one’s basic needs serve ‘as a painful bodily manifestations of the power the institution holds over the individual’ (Ugelvik, 2011: 47).

While the pandemic resulted in the swift imposition of cocooning regimes, these findings highlight the need to adapt, modernise and reconsider the provision of purposeful activities. The pandemic clearly illustrates both the need for access to technology and that the rapid adoption of technology and other resources is possible, despite historic resistance. Quite apart from the benefits, in ‘normal’ times, of PIP having access to in-cell telephony, computers and other devices, their adoption is essential given the ongoing potential for open and communal activities to cease suddenly. These findings reflect an institutional culture that, to the great detriment of those in custody, was too slow and averse to providing technology before COVID-19. Prison services must reconsider their relationship with purposeful activity and invest in flexible, adaptable technology and other resources that can meet PIPs’ needs, even under ‘lockdown’ conditions.

Communication, relationships and social engagement

Many of those cocooned keenly felt the wider absence of social contact. As one participant said: ‘We need people to come talk with us, help us. We are on our own’ (Journal 38). For some, the value of time in the yard reflected the social contact this afforded. In many accounts, this was the highlight of their pointedly limited days. The data collection for this study occurred over two weeks in April and early May 2020 during an unusually warm spring. Some participants reported spending time outside each day in a group, while others shared the yard with just one or two others. Almost all participants presented social contact as a welcome respite, but their experiences were infused with melancholy in other respects:

It often feels that the small group I go to the yard with […] are the only prisoners in the place. This virus has sucked the life out of everything, even this prison. (Journal 7)

For some, physical distancing on the yard served as a reminder of limited social contact and heightened the sense of isolation. Even for those cocooning in a cell with another person, the combination of limited purposeful activity and boredom undermined the benefits of social contact:

It’s getting harder, we’re running out of things to talk about and there is only so much coulering [sic] you can do. (Journal 36)
Despite greater access to phone/videocalls, prison staff provided the primary source of social interaction for many. Staff-resident relationships are central to prison life (Liebling et al., 2011) and span the gamut from adversarial, contemptuous ‘us and them’ positions, to less abrasive relationships and ‘softer’ barriers (Crewe, 2011b; Liebling et al., 2011). Positive relations can contribute to ‘dynamic security’ (Parker, 2006) and the moral legitimacy of prisons (Liebling, 2004). However, research suggests that prison officers in Ireland receive little support for relational practices, with security remaining the overwhelming priority for the IPS (First author Garrihy, 2020b; Jesuit Centre for Faith and Justice, 2012; OIP, 2021).

The journals often featured the relationships and communication between cocooning PIP and staff. In the context of isolation, many discussed the importance of positive interactions with prison officers and other staff (e.g. healthcare staff). For some, staff alleviated anxiety, isolation and loneliness:

Several different medical staff do their duties without complaint, from week to week with a kindly smile on their face. I know this sounds strange, to the suits outside, but for anybody outside who knows how it feels to be cocooned for so long a smiley face means a lot.☺

(Journal 2)

Other cocooners raised serious concerns and issues with certain staff, distinguishing between those who treated them humanely or not:

The ‘Bully’ is on duty again today. [...] Happily, the officer for the next [x] days was a godsend. [They] treated us like human beings—no shouting or short snappy answers etc.—what a relief.

(Journal 31)

Other participants, still, reported that relations were neither antagonistic, nor especially engaging:

The staff will drop by to take care of things, but they are not open to conversation with us. So, any visit by a staff member is a very brief one.

(Journal 26)

Further entries reflected adaptations to extreme variations of staff orientations by benignly accepting the positive while being resigned to the negative:

I am grateful for the staff who care + who help, without them I could see a lot more problems. For staff members who don’t care—ah well—fact of life I guess but very hard to stomach at times.

(Journal 5)

A strong sense of loneliness, common across the prison literature (Schliehe et al., 2021), was mirrored in the journals. In a finding specific to the COVID-19 context, however, some participants alluded to comfort in knowing that staff were ‘doing their best under the circumstances’ (Journal 21) and generally had their best interests at heart. In a similar reflection of the ‘in this together’ mentality pervading early narratives of the pandemic, some participants reported feeling more connected with the outside
world because all lives were impacted by the pandemic. This contradicts the traditional sense of dislocation and being ‘left behind’ that prisoners experience as families and friends move on with their lives, while those imprisoned exist in a world characterised by stasis and abstraction from ‘normal’ experiences (Crewe et al., 2020; Jewkes, 2005).

The Irish government, like others, conducted publicity campaigns to foster togetherness and encourage compliance with restrictions under the banner ‘In this together’ (Department of the Taoiseach, 2020). The sense of concern for those outside suggests solidarity emerging from some of the most isolated and marginalised members of society. Yet, it remains to be seen whether society will feel the same solidarity with those in custody as our freedoms return and theirs do not. Prison is designed to isolate in many ways: physically, emotionally, psychologically, spatially and temporally. In this study, data emerged indicating that cocooning was acutely isolating, but the penological literature reminds us that these experiences are inherent in prisons and – unlike the restrictions faced by the public – not unique to the pandemic.

Conclusions

The pandemic created significant barriers to prison research and oversight. Still, we are beginning to see the acute impact that fear of COVID-19, prolonged isolation, and restricted services, movement and family contact has had on PIP globally (Beaudry et al., 2020; Brennan, 2020; HM Inspectorate of Prisons, 2021b; Maycock, 2021; Novisky et al., 2020; Rapisarda and Byrne, 2020). This article illustrates the costs to physical and mental health among the most restricted cohort of people in Irish prisons. It exemplifies the consequences of crisis management in an institution that systematically restricts agency and excludes those in its care from decisions that affect them (Crewe, 2009), but reveals how consultation in prisons can inform practices in ways that reduce harm and support legitimacy (Weaver, 2019). While some cocooners queried the wisdom of the new regime, many accepted its benevolent intentions and reported making minor requests directly to staff. Those who felt heard spoke positively about these interactions and vice versa. Others made practical suggestions in the journals, which the project partners reported to IPS policymakers and published in a short, practically oriented report (Authors, 2020). This highlights the potential for researchers to support prison oversight, empower people in custody and drive institutional transparency in times of crisis.

The project emerged from existing relationships between academics and oversight professionals who had previously established a mutual desire to engage in a socially useful collaboration. This agenda informed a dialogue that explored how to achieve the most value given limited resources and pandemic-related constraints (Aizpurua and Rogan, 2021). The decision to focus on cocooners and use journals was co-created, aiming rapidly to provide first-hand accounts and insights for presentation to policymakers, without face-to-face contact with the participants. Criminologists are often sceptical of collaborating with criminal justice agencies for fear of legitimising the harm they cause. Yet, oversight bodies and researchers may be similarly motivated to hold justice agencies to account. While the funding of the OIP in Ireland has increased in recent years, international oversight bodies’ underfunding or lack of financial independence
may limit their capacity to do so (Aizpurua and Rogan, 2021). Criminologists and over-
sight professionals should establish relationships and identify shared aims for collabo-
ration. The authors welcome the IPS’ engagement with this study and hope that the
experience encourages a greater willingness to collect, publish and facilitate researcher
access to data.

The findings presented here are prescient for post-COVID-19 prison systems globally.
In many countries, prison populations are both ageing and growing as sentences lengthen
(Joyce et al., 2016; Walmsley, 2017, 2018). As Ireland and other countries showed,
however, it is possible to rapidly reduce prison populations through early releases with
little risk to the public. Ireland will soon open the country’s first prison for older
people (>54 years of age) and a new female prison replacing dilapidated accommodation
on a wing of the Victorian Limerick Male Prison (IPS, 2020; Jewkes, 2018). Yet, the state
must consider whether it is right or necessary to incarcerate these people, and how it
should care for those it selects for coercive confinement. The rapid introduction of video-
calls and in-cell telephony illustrates the potential for technology to support familial rela-
tionships, education and service provision. Ireland, mirroring other jurisdictions, should
drastically improve PIPs’ access to information technology, including tablets and laptops.

The IPS replaced enforced cocooning with a voluntary isolation regime soon after
hearing these findings, albeit temporarily retaining the collective segregation of vulner-
able cohorts within the restricted regimes. As of March 2021, regimes for those who
had cocooned eased in line with public health guidelines in the community. Except for
those in quarantine, there are no longer any separate arrangements to the general
prison population for food provision, time out of cell/yard time, social contact and
access to services and education. Yet, throughout 2020 and 2021, all PIP were subjected
to ongoing restrictions that reflected, and sometimes exceeded, those in the community,
including long periods of isolation and restrictions on services and activities (OIP, 2021).
Thus, the findings are important contributors internationally as segregation (for many
reasons) remains widespread, and as intermittent lockdowns seem likely to persist.
Moreover, the study contributes to the relatively sparse criminological literature in
Ireland where there remains a dearth of empirical prison research and published data.

The experiences of cocooners notwithstanding, the findings point to opportunities for
penal reform post-COVID-19 and support the reduced use of solitary confinement and
imprisonment internationally. The greater use of early release to reduce overcrowding
and the availability of technology are gains on which prison services can build, as they
address the need for dignity and agency in ameliorating the experiences of prison resi-
dents during and after the pandemic.

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Note

1. P19 is the code for a written disciplinary process against PIP, often resulting in loss of privileges.

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