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## **Legal culture and professional cultures in the prison system**

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### **Abstract**

The contribution focuses, with reference to Italy, on the interplay between professional cultures in the field of the prison and tries to describe how the normative characteristics, typical of the professional cultures of teachers and health professionals, meet the total institution. The introduction presents the different sources from which the empirical material comes, collected by the authors in the course of different research and monitoring activities, which allowed them to access to the prison field. The second paragraph introduces the reader to the complexity of the Italian prison system, which has undergone a profound differentiation in recent years. The third paragraph analyzes, on the basis of the qualitative data collected, the encounter between the professional cultures of teachers and doctors and the specific prison culture. The conclusion enlightens the irreducible polymorphism that characterizes the institution and unavoidably interferes with a sociologist's efforts at generalization.

### **Key words**

Legal culture; prison culture; prison management

### **Resumen**

La contribución se centra, con referencia a Italia, en la interacción entre las culturas profesionales en el ámbito de la prisión y trata de describir cómo las características normativas, típicas de las culturas profesionales de los profesores y los profesionales de la salud, se encuentran con la institución total. La introducción presenta las diferentes fuentes de las que procede el material empírico, recogido por los autores en el curso de diferentes actividades de investigación y seguimiento, que les permitieron acceder al ámbito penitenciario. El segundo apartado introduce al lector en la

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complejidad del sistema penitenciario italiano, que ha sufrido una profunda diferenciación en los últimos años. El tercer apartado analiza, a partir de los datos cualitativos recogidos, el encuentro entre las culturas profesionales de profesores y médicos y la cultura penitenciaria específica. La conclusión pone de manifiesto el polimorfismo irreductible que caracteriza a la institución y que interfiere inevitablemente en los esfuerzos de generalización de un sociólogo.

### **Palabras clave**

Cultura jurídica; cultura penitenciaria; gestión de prisiones

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## 1. Introduction

Studying crime and deviance without taking into account the everyday practices of social control agencies suffers from a methodological deficiency inasmuch as it fails to consider the selective nature of the criminal justice system in defining and dealing with these objects of interest. Qualitative research has played a crucial role in producing a critical view on total institutions in the last century (Clemmer 1940, Sykes 1958, Cloward and Ohlin 1960, Goffman 1968). These empirical studies have revealed the paradoxes and contradictions among the criteria legitimizing such institutions, the practices through which they are reproduced, and the effects they have on individuals and society (J. Irwin 1985, 2004). The empirical grounds for such research are illustrated here in the findings of qualitative studies on the Italian prison system conducted by the authors, who are both members of the not-for-profit Antigone National Observatory on Prison Conditions. In the last 15 years, they have interviewed hundreds of inmates and prison staff, developing a theoretical viewpoint on how prison cultures function (Sbraccia and Vianello 2016, Sbraccia 2018).

From a methodological point of view, the empirical materials presented for this article are therefore not related to a single research project. We don't have here the space to deepen the methodological reflection with reference to prison studies and we suggest the reader to consider some other publications of ours (Sbraccia 2012, 2021, Ferreccio and Vianello 2015, Sbraccia and Vianello 2016, 2018). In synthesis, we can here refer to the opportunities we had to access the prison system as a field of interest and research. The already mentioned activity of monitoring within the Antigone's National Observatory permitted the authors a systematic exchange and comparison with the health, school and education workers, especially in the correctional facilities of the Veneto and Emilia-Romagna regions. From these encounters fieldnotes and talks' transcriptions derive, starting from the first years of the new millennium. The authors' involvement in specific projects of research allowed them to produce other ethnographic materials (direct observations, informal talks) and to realize interviews with staff members and inmates inside the prisons. Even though the focuses of these researches can be referred to different themes (recidivism and criminal careers, prison radicalization, work recruitment, gender issues, ethnicity, changes in the practices of surveillance, etc.), some of the empirical materials collected offer significant cues for the theoretical argumentation we develop in this writing. The authors' participation in the university activities dedicated to detainee students ("poli penitenziari universitari" in Padova and Bologna) gave them the chance to interact with institutional actors involved in the wider field of education and schooling in prison. Engaging in an enduring comparison of all the data at their disposal in an apparently "unscrupulous way", the authors actually rely on Goffman's evidence: "the examples, as a whole, form a coherent scheme that recomposes the fragments of lives lived and which provide the scholar with a scheme that is worth verifying in particular studies of institutionalized social life" (Goffman 1969, 10). Triangulation, through the combination of different methods (interviews, informal talks, participant observation), has produced, in our opinion, converging results.

The time extension of these references (fieldnotes and interviews reported here can be referred to a period of 15 years) is linked with the continuity of a qualitative approach

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oriented to reconstruct and analyze the attribution of meanings that the different social actors inside the prison environment produced and produce (in this case on health and school). Such extension could appear as problematic. For instance, while the juridical framework on the prison school sector didn't face, in this period, significant changes, the reform of the prison health system has had a deep impact on prison' services organization. In our opinion this is an element of evolution to appreciate because, as we will try to demonstrate, it produces a relevant dynamic in the relation between the legal and professional cultures involved. Elements of continuity and discontinuity, considered in a diachronic dimension, can be related to the processes of socialization and adaptation that school and health workers face in the institutional and relational context of the prison.

Being a total institution, prison could be envisaged as an environment where juridical requirements rigidly define all facets of the everyday life of staff and inmates. Giving shape to the most restrictive form of state control over national and foreign citizens, the prison system relies on strict and precise criteria for its legitimization (Mosconi 1995, Sarzotti 2010). Its normative structure should therefore be strictly linked to the law, to protect inmates from any abuse of power at least. Is such a strict approach actually adopted in the framework of the prison staff's legal culture? Are there elements of a specific institutional culture capable of affecting the prison's normative routines? If so, how do they relate to the inmates'(sub)cultural adaptation (convict codes)? How are legal cultures influenced by prisonization processes? To answer these research questions, it seems useful to consider *legal culture* as a dynamic concept (Pennisi *et al.* 2018), and as a mobile construct revealing contradictions and conflicts that relate to the formal representation of the objectives of prison institutions (discipline, rehabilitation, schooling, conflict reduction, order, re-education) and the practices of the various actors inside the prison.

## **2. The prison archipelago: a complex and variegated system**

This section gives an account of the Italian penitentiary system and the culture widespread in the prison environment. Discussing prisons always involves dealing with a highly articulated and complex system, in terms of the set of human inhabitants, structural characteristics and internal organization of these institutions. Italy's prison system currently contains 52,000 inmates, approximately 32,000 members of staff in the penitentiary police, and a little over 1,000 educators in regular service, distributed around 189 institutions all over the country. This prison system comprises several, more or less well-known, distinct entities. Prisons for men are very different from prisons for women. It would be more accurate to speak of sections for women, however, because – with few exceptions – the very small number of women behind bars (less than 5% of the prison population) live in dedicated sections of male prisons. This has a negative fallout in terms of the allocation of dedicated resources for women, and opportunities for them to access a university education, for instance. Life in a prison is very different from life in a correctional facility for people awaiting trial, as the latter features high prisoner turnover rates and a lack of resources for inmate re-education projects. As in other countries, the Italian prison system has a great diversity of architectural and infrastructures and organization of internal spaces, which can have an important influence on the allocation of spaces and the organization of life inside. There are prisons

occupying 12<sup>th</sup> century convents in historical city centers and modern maximum-security prisons in the suburbs, prisons designed to serve re-educational goals and prisons merely intended for the purpose of containment (cf. Miravalle *et al.* 2016). They also differ in styles of administration and prison practices: whatever their legal definition, some prisons are more punitive, while others focus more on *treating* their inmates. Some prison directors are more *enlightened*, some penitentiary police are more *old style*; some take a flexible approach to the rules, others are stricter.

The situation is further complicated by provision for several *circuits* dedicated exclusively to prisoners placed for various reasons under a particular regime. The “hard” regime envisaged by law 41bis – dedicated to contrast organized crime concerns – approximately 700 inmates distributed in 11 prisons, and about 50 of them are further restricted in so-called “reserved areas”. The maximum-security prisons contain about 9,000 individuals, who are distributed among three different circuits, depending on their sentences. Inside prisons, there are also dedicated sections for the more than 500 prisoners who are cooperating witnesses (and some of them have members of their families with them). Other circuits have been added over the years to cope with the particular needs of managing certain types of prisoners (cf. Santorso and Vianello 2017). These include: more open prisons for people with a diagnosis of drug addiction (ICATT); exclusive sections for women with young children (ICAM; there are five of these, housing about 50 women and 50 children in various parts of the country); areas for transgender people (cf. Vianello *et al.* 2018); and separate spaces for sex offenders (cf. Frenza *et al.* 2017); and floors reserved for prisoners under psychiatric observation (cf. Sterchele 2017). This multifaceted picture formally meets the criteria for distributing the population behind bars in the categories established by the applicable regulations. Then there are informal criteria for allocating prisoners to a given institution or switching them between circuits, and for adopting different disciplinary methods to manage different sections – even within the same prison (Sbraccia and Vianello 2016). Inmates may be allocated to a given section on the grounds of shared geographical origins, or to protect the perpetrators of “infamous” crimes. They may contain the more disruptive prisoners, or those considered worthy of more services (schooling, work, training and recreational activities). Or they may sanction distinctions relating to a prisoner’s social dangerousness, or due to combinations of pathological states (diseases, behavioral disorders, drug dependence).

The active involvement of volunteers inside prisons, and the institutions’ degree of openness towards the outside world (or closure in some cases) are variables that add further complexity to the overall picture. As it is easy to imagine, such factors considerably influence the inmates’ quality of life, and the amount of independence a given prison’s administration has in its management. Significant numbers of volunteers (approximately 16,000) are active in Italy’s prisons, but they are distributed very differently among the various institutions. When activities organized behind bars (from schooling to sports, from training to work) are managed at least partly by people who are not part of the prison administration, these people have to occupy a flexible intersectional space between inside and outside. This space may have different features, but it always contains problematic elements, tensions and contradictions.

The outcome is a penitentiary system so diversified that it justifies not only the well-known saying that “every prison is a world unto itself”, but also the claim that we can encounter very different situations inside the same prison (cf. Sbraccia and Vianello 2016). Prisoners are well aware there are different types of prison and different circuits, and they know they constantly risk being transferred from one to another. The prison staff have a clear idea of this diversity too, having had experience of working in various roles, with different spaces for action and movement. Given such a situation, the quality of relations between inmates and the prison administration depends on the attitude of the management and of individual members of the prison staff; the context in which the operators move; and the capabilities of individual prisoners (in the sense of resources, skills and networks, cf. Sbraccia and Vianello 2016). Even under the same reference legislation and regulations, changes in management positions or commanding officer posts can reveal, better than any other event, just how discretionary prison practices can be – and the systematic temporal overlap in recreational, cultural or working activities can become wider or narrower. Particular restrictions on various types of prisoners meeting each other can become an insurmountable obstacle to some inmates’ access to activities. The transfer of prisoners can be more or less frequent. Even the number of items a prisoner is allowed to receive at any one time can vary significantly. Permission to keep a computer may first be granted and then withdrawn. The rooms available for activities may be assigned to other uses. The hours when teachers or operators from outside are allowed to enter the prison may be more or less severely restricted.

As we write, the effects of the COVID-19 pandemic on prison life are stabilizing and the first comparative studies (Associazione Antigone 2020, Marietti and Scandurra 2020) give an account of the international scale of its consequences. Among other things, it has necessitated a readjustment of the balance between security demands and the need for re-education projects behind bars. There have been fewer training and recreational activities in prisons due to a marked reduction in the movements of teaching staff (only partially compensated by remote teaching solutions). In managing the emergency, the overall shape of the relations between different professional areas has been redefined, with healthcare operators coming to occupy a central position in a prison’s spatial management dynamics and day-to-day life, leaving less room for other activities. In Italy, changes prompted by the lockdown to contain the spread of COVID-19 coincided with a wave of prison revolts. In the spring of 2020, the protest reached levels not seen in at least forty years (with at least 40 prisons involved, hundreds of wounded, 13 dead, and damage in millions of euros, cf. Garante Nazionale 2021). Efforts to analyze this explosion of violence see it as the prison population’s reaction to an institutional strategy that generally tended – instead of taking steps to reduce crowding in areas at greatest risk of spreading the virus – to adopt more restrictive measures. Opportunities for contact with anyone who might bring the virus in from outside (volunteers, educators, teachers, relatives) were cancelled. This approach proved paradigmatic in terms of the prisoners’ rights: the measures focused on protecting their physical health rather than on preserving their relations with outside actors capable of limiting the negative effects of their isolation in prison (Ronco *et al.* 2020). In other words, what prevailed yet again was a security-focused logic of closure and separation – which failed to prevent dozens of outbreaks of COVID-19 involving numerous members of prison staff and inmates alike.

### 3. Educational and health professionals meet prison

Considering how any cultural adaptation and adjustment to established practices needs to be examined as part of a process of socio-juridical analysis, and not simply assumed on the basis of a changed or changing legal framework, the field of interest here concerns the inter-institutional dynamics taking place within the walls of a “hosting” institution (the prison) that has a pervasive capacity to reshape “other” practices and goals to suit its own cultural horizon. Professional cultures can be analyzed as means of resistance in the field of the law in action: examining how they function in a given context is fundamental to understanding the experience of order and the normative balancing of the prison system. In fact, prison culture is founded on a logic of punishments and rewards, and often tends to follow the informal aim of causing pain (Scruton and McCulloch 2009, Khosrokhavar 2016). The legal culture of teachers and healthcare operators revolves around the area of inmates’ rights, but these professionals can find it a challenge to preserve their own culture against a shift towards institutionalization.

For the purposes of our analysis, it is important to examine in what terms the space that can be acknowledged to “prisoners’ rights” comes to depend, behind the prison walls, on the subordination of professional cultures or their capacity to lend substance to resistance tactics in relation to an institutional setting where another management culture prevails (Sarzotti 2007). To be more specific, this contribution looks at how the normative characteristics typical of the professional cultures of teachers (Bayliss and Hughes 2008) and healthcare operators (MacDonald and Fallon 2008) react to the penal institution. We look at how these cultures influence, and are naturally influenced by, the legal culture of other institutional actors (the prison management and penitentiary police officers, in particular). Teachers (from primary education to university) work in prisons within a frame of partial autonomy. The chance to study is defined as a fundamental individual right, and education is represented as a strategic tool for inmates’ rehabilitation and social (re)integration. That said, teachers have to come to terms – in their everyday activities inside prisons – with a sort of subordination to the organizational and security demands of the prison administration (Vianello 2018). Healthcare operators face similar problems, even though a recent Italian (2008) reform ratified the inclusion of the prison population within the local healthcare system for the population at large, and outside the formal control of the prison administration. This legal innovation, with the declared goal of placing the medical treatment of prison inmates on a par with that of the population outside, was expected to increase the health professionals’ level of autonomy (Sbraccia 2018, Ronco 2018).

Looking beyond the present public health emergency, adaptations and resistance tactics have been the main object of interviews that we have conducted with outside professionals going into prisons in the course of the last 15 years. While the arrival in prison of tenured teachers creates opportunities for contact – and possible conflict – between institutions with different mandates (schools and prisons), the relocation of healthcare providers outside the administrative hierarchy of the Ministry of the Justice’s Department for Penitentiary Administration (as a result of a recent reform) might prompt the emergence of a more structured opposing force. In other words, this may lead to a partial reshaping of the interaction between the professional culture of the world of public health and the legal-institutional culture of the prison (Cherchi 2016,



Ronco 2018). In the following pages, we examine this situation, drawing on significant excerpts from interviews regarding the spaces for movement and negotiation.

### *3.1. Teachers meet prison*

#### 3.1.1. Education behind bars as rehabilitation, a prisoner's right, or a benefit?

Regarding education behind bars, it is important to remember that, from a legislative standpoint, formal education was to be provided in prison as an integral part of the inmates' treatment in custody. Before the reform of 1975, when the prison population still suffered from high rates of illiteracy, education was envisaged as compulsory, together with work and attendance at religious ceremonies. Since then, the general idea of schooling has changed, and it is now tendentially seen as an opportunity for personal emancipation that cognitively and critically empowers the individual. From a numerical point of view, the educational pathways in prison range from learning to read and write (mainly for foreigners) to primary and secondary school and are now provided for more than a third of the prison population (about 20,000 individuals, cf. Vianello 2018). Prisons rely on a broad network of agreements and conventions with local school authorities, which establish branches inside most prisons. The recent development of a network of "Penitentiary University Poles" has given around 1,000 inmates the opportunity to continue their further education (Prina 2018) thanks to conventions between local universities and the regional Supervisory Boards of the State's Department for Prison Administration. Over the years, within the Italian penitentiary legislation, the access education in prison has changed from being an aspect of the prisoners' re-education and treatment to a fundamental social right that focuses on the development and personal growth of individuals in detention. Opportunities for an education behind bars are certainly consistent with, but now go beyond the concept of rehabilitation alone. Such a trajectory underscores the complex process of emancipation of an activity that was previously a coherent part of the prison administration's re-education programs. Education behind bars is now tending towards a normative redefinition that formally acknowledges the service and its operators a whole new level of independence. As we shall see, however, the path is still bumpy. Going beyond the new normative formula, the prison administrations' resistance and the efforts of the academic apparatus to accommodate them carry constant risks of subordinating and instrumentally isolating teachers entering the prison. At the same time, any attempts made by teachers and lecturers from outside to assert their role and mandate, and demand spaces for their activities can lead to their formal removal (sometimes for invented reasons that are always readily available to a system that gives priority to security) or to the informal boycotting of their educational proposals.

Although the offer of academic activities is perfectly suited to the purpose of individualized re-education pathways established by prison regulations (formally shaping a positive intersection between the right to an education and the right/duty to submit to a rehabilitation treatment), the practical organization of teaching activities behind bars comes up against several problems. Prison routines selectively define which inmates can access activities outside their own section. These aspects have to do with internal organization, security issues, restrictions on movements and meetings between inmates belonging to different circuits or under different regimes, and the reward-based

attitude to the informal organization of prison life that tends to translate rights into benefits (Salle and Chaintraine 2009, Ronco 2016, Vianello 2017).

For a start, according to our empirical data, training and schooling activities in prison often compete with other more desirable activities, such as jobs, in a situation where the amount of time prisoners can spend outside their section is limited, and potential employers may be unwilling to agree flexible or shorter hours or strike a compromise with the needs of teachers. There are clearly also logistical obstacles to studying in prison. The lack of privacy and forced promiscuousness oblige inmates to adapt as best they can to find the physical and mental spaces they need to concentrate. Studying while cellmates are outside doing yard time or elsewhere, working or engaging in other activities, means having to give up these other opportunities to leave the cell or take part in other types of rehabilitation treatment. Prisoners often talk about shutting themselves in the bathroom during the long hours of forced cohabitation to escape from the television (which is always on) and the distracting chatter. Giving up their yard time seems especially tough as having to choose between a walk outside and other activities seems a genuine injustice, an interpretation of prison rules that is limiting, not to say deliberately repressive, as it sounds from the words of this student, collected during fieldwork

Yard time is important to inmates. Of all the prison activities, it's the only one that cannot be suspended, in the sense that it's required by law and every institute has to guarantee it for all prisoners. It involves going for a walk in a cell that's a bit bigger but without a ceiling, and therefore "in the open air". For reasons of order and security, the amount of time inmates can spend in these spaces is limited exclusively to the hours of 9.00 to 11.00 in the morning, and 13.30 to 15.00 in the afternoon. Going outside is not just about stretching your legs after 20 hours in your cell. It's also an opportunity for socializing or sports. But the prison managements all consider yard time in the same way as cultural and schooling activities. That's why all the activities are scheduled in the same two hours as the yard time. When yard time comes around, the agent in the section passes with a sheet shouting 'schools or walks?' He ticks the names off one by one with their respective destinations, then opens the gate. (Ex-student-inmate, ethnographic diary, 2018)

Similar directives are often made necessary partly by the social composition of the prison population because the prisoners who normally access the various activities (education, training, work) are often the same people. Those who already have some formal education respond to certain behavioral requirements and have a modicum of communicational expertise.

Knowing how to communicate and how to take a collaborative stance helps the inmates who want to join the course. Even if everyone would like to leave their cell and attend a course, which might last a few months, not many inmates know how to apply 'the right way'. So, the people selected are almost always the same. I was always one of those people. I was invited to attend all the activities, and now I have a whole folder full of certificates of attendance. Someone said we were favorites, but actually it was more a matter of "utility" than a privilege. The people capable of ensuring a good performance in the activities were 'useful' people. (Ex-student-inmate, ethnographic diary, 2018)

To further complicate matters, specific restrictions on people's movements within the prison or the need to prevent some inmates from meeting one another became

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insurmountable obstacles to their access to activities, schooling included. As well as the special regimes established by laws like the 41bis (which specifically suspended the rules concerning re-education activities), there are also circuits that house certain kinds of prisoner who are formally or informally forbidden from encountering other inmates. For prisoners under maximum-security regimes, in Italy and elsewhere (cf. Drake 2015), it is often difficult even to bring in the normal textbooks. After their release, prisoners have spoken about ingenious teachers tearing pages out of books and sending them with the mail, or even copying them all out by hand and including them in letters (cf. Musumeci 2013). While some restrictions and provisions to ensure an adequate surveillance may seem understandable to meet the needs of security, others appear incomprehensible, not to say deliberately punitive, and designed to weaken the spirit of any prisoner refusing to cooperate (cf. Kalica 2016).

I asked if I could have him sent two exercise books, one for Italian and the other for history and geography. They said no because, combined with the pencils, that would exceed the allowable number of items. We're talking about exercise books, for heaven's sake... They said he had to finish one first, then I could have him sent another. (Teacher, north-east Italy, 2013)

Despite their formal right to re-education treatments, which include schooling, prisoners in maximum-security circuits can only sporadically access any academic activities. The rules against their meeting with the so-called "common" prisoners (cf. Citroni and Sala 2016) prevent them from attending any of the classes routinely provided under agreements with the territorial school institutions. Restrictions on the meetings allowable during the hours spent outside their cells – even within the circuit (especially for the first level of high security "AS1", with each inmate assigned to a small group of as few as three people and destined for years to share the same yard time or hours for so-called socializing) – make it extremely difficult to provide any dedicated educational services. Thanks to the patience of the teachers involved, this often means having to repeat the same classroom material several times so that all their students can attend the schooling activities available.

Another issue concerns the so-called "protected" prisoners (a term that, applied in this setting, underscores the contradictions of the "protection" prison offers to the perpetrators of "infamous" crimes). The prison administration houses them in dedicated sections that turn into segregated areas, giving rise to their virtually total isolation. Being unable to take part with other inmates in any re-education treatments on offer (be it a school class or a cultural activity, attending the gym or going down to the sports field), the "protected" prisoners live in a prison inside the prison, where only explicitly dedicated projects (if any are authorized) succeed in reaching them.

### 3.1.2. Discretion and reward as constitutive elements of prison life

As we have learned from the sociology of prisons, discretion and reward systems are intrinsic in the structuring of re-education treatment processes in custody. This often-seen issue concerns the tension between rights and benefits, aptly described by prison sociology (cf. Salle and Chantraine 2009, Ronco 2016). As Ronco (2016, 219) put it, "studying in prison is a right, but the practical steps needed to guarantee this right (by placing prisoners in a section with single cells and PCs available) are benefits". The right to study is also always subject to the needs of security and other treatments, and can

therefore be practically impossible to exercise, so it is ultimately very hard to qualify it as a *right* (cf. Pavarini 2006). While the right to study formally exists, and is reiterated in all the legislation and regulations, sustaining the widespread rhetoric about everyone having a “right” to an education, what actually happens behind bars is another matter. There is a particular system where other essential needs, discretionary assessments, material obstacles, and mere disinterest contribute to restricting and influencing the inmates’ chances of exercising this right. If prisoners need to work, and complementary timetables are not arranged, they will very likely give up studying. If prison directors, educators, and even volunteers do not judge *at first glance* that a given prisoner is capable of studying, they will not even bother to notify them about the courses they could attend. If prisoners want to study, but none of the teachers or courses available are appropriate for their level of education, they can choose between giving up altogether or repeating the same classes, even several times. If someone does not take their right to access the courses seriously, they may even be left in the dark about their options or believe what they are told about limits on the number of places available and waiting lists. In prison, the inmates’ awareness that they are entitled to enroll on a course of study, whatever their state of detention, seems to be at the mercy of another world. Some prison managers, educators, teachers and volunteers appear to share, according to our research findings, the conviction that this “right” can readily depend on a variety of other considerations relating, for instance, to the appropriateness of a prisoner’s behavior or, even more trivially, to the duration of their sentence or their state of health (which would raise the question of whether they should even be serving their sentence in prison).

You’re not going to enroll *this guy*, are you? His behavior is uncooperative. He speaks very little and not very well. He’ll never come to anything! We could enroll this other guy instead. He seems more promising... (From a teacher’s conversation with a prison director, north-east Italy, 2012)

This guy isn’t worth your while, you know, because his sentence is too short. Then he’ll leave and we’ll have wasted time and money on him because, once he’s outside, he’ll never finish studying. (From a teacher’s conversation with a volunteer, north-east Italy, 2013)

There’s no point in wasting time with this one, because his sentence is too long. He’ll never get out, so what’s the point of spending energy and money on him if he can’t make any use of it? (From a teacher’s conversation with an educator, north-east Italy, 2013)

This man is mad. He’s dangerous and shouldn’t even be here. He should be getting treatment. He can’t be enrolled. You don’t really want to enroll him, do you? (From a teacher’s conversation with a prison director, north-east Italy, 2015)

Through participant observation, we took notes of these different staff members assessments in their interactions with teachers: every teacher who has ever gone inside a prison will have to face them, often deciding in advance what opportunities there are for contact between school or university institutions and candidate students. Even the people concerned with inmates’ training or work experiences tend to preselect their potential candidates based on their existing professional and relational competence. This is not just to “reward the best”, but also to establish a group of “presentable” prisoners who can draw on their limited experience to testify to the success of the re-education project that legitimizes the very concept of prison (cf. Ferreccio and Vianello 2015, Fassin

2015). Selective communication of the necessary information can be accompanied by an informal system of recommendations. Inmates know this, and consequently rely much more on other inmates already involved in a project than on the prison's official channels.

If I had just waited, I'd still be here. It was someone from my own village who told me to apply, to apply for everything... He even recommended me to his teacher, who knew him already. (Inmate, north-east Italy, 2013)

We got everything ready for the enrolments: written notices, posters to attach around the section complete with dates for the interviews, at least two months in advance. Then, on the day of the interviews, people arrived looking confused, in their tracksuits. They had only heard about the interviews that same morning from the police officer. Many didn't even turn up because they hadn't been told and they were afraid of losing their jobs. (Teacher, north-east Italy, 2020)

Even after joining the courses, the availability of the resources needed to study (books, computer materials, spaces to meet tutors and lecturers) is the object of a continuous negotiation process. Nothing is ever *guaranteed*, but only *permitted*, and everything can be delayed or forbidden at any moment. The principle that applies in life outside prison, according to which everything that is not forbidden is permitted, is reversed behind bars: inside, everything that is not specifically permitted is forbidden (cf. Salle and Chantraine 2009, Vianello 2017). Changes in the management or line of command, even under the same laws and regulations, can reveal better than any other event just how much discretionality lies behind prison practices. The number of books that can be borrowed at the same time can vary significantly across prisons. The use of computers (which are only allowed in after they have been checked by the police officers) may no longer be permitted. The rooms available for studying may be reallocated to other uses. The hours when tutors and lecturers can come in from outside can be severely restricted. Any requests can only play out by nurturing the informal internal balance of power. There are no regulations to quote in appeals against a presumed security-related emergency.

A course of study (like any other activity) that has been effortfully pursued against all sorts of odds (personal difficulties and structural restrictions) can easily be interrupted by a prisoner being transferred to another correctional facility. This is one of the most traumatic events for inmates engaging in re-education projects who, with time, develop meaningful relations with operators and volunteers, as it results from our fieldworks. Things can happen very quietly, with no warning. Prisoners may be told to pack their bags at dawn, with neither the operators nor the prisoners' families being given any advance notice about their new destination. Then everything has to be reconstructed and renegotiated in the new prison, where – apart from the physical distance involved – the same items might not be permitted, and the same people may not be allowed to visit. Despite the pertinent regulations explicitly recommending that any transfer of prisoners already attending school courses and re-education activities generally be avoided, these situations are by no means unusual. Whether they are ordered by the State Department for Prison Administration for reasons of security (or punishment), or by its regional Supervisory Boards to cope with overcrowding, these events are barely even (and not always) notified to institutional reference figures outside the prison, by which time nothing can be done. Regardless of an inmate's re-education pathway, it is very rare for any volunteer's activism and prolonged informal negotiations to succeed in moving the

unfortunate prisoner back. Judging from our experience, for this to happen it is often necessary for prisoners who have been transferred to engage compulsively not only in repeatedly submitting applications (called “domandine” [little requests]), but also in demonstrating that they are so desperate of their transfer to resort to forms of self-harming – which have to be severe enough to worry the prison administration.

The following excerpt comes from an interview that we attended between a prison officer and a volunteer attempting to secure the return of a foreign prisoner who had been transferred elsewhere against his will during one of the regular efforts to reduce overcrowding, with no consideration for the much-advertised needs of inmates’ re-education projects:

“Are you really sure he wants to come back?”

“Look, the day he was transferred he was distraught... If he really wants to come back, the educator at the other end will know for sure.”

“You mean he has to put in a request?”

“No, it’s not about requests! Let’s see if he cuts himself, or has been cutting himself, if he does something meaningful.” (From a conversation with a volunteer, north-east Italy, 2017)

Communication methods and timing are fundamentally important in the organization of prisoners’ daily lives. The traditional *domandina* is a preprinted form used by inmates to make all sorts of request, from meeting with family members to an interview with an educator, from the purchase of extra food to the chance to take part in football matches, from a job to a school class or vocational training course. These request forms are often the only means of communication between inmates and the prison administration, which very often “forgets” to answer (cf. Verde 2002). The forms pile up, the same request is made to different operators, and the frustration builds until it proves necessary to find other solutions (Ronco 2016, Di Marco and Venturella 2016, Citroni and Sala 2016). Refusing to eat or “cutting themselves” can be the only tool available that can penetrate the indifference of those in authority by leveraging on the risks of the institution being held responsible for failing to safeguard its inmates’ physical integrity (cf. Torrente 2016). Self-harming thus becomes one of the main communication channels between inmates with nobody to champion their cause and an institution that behaves as if it were deaf.

Another question concerns how prison administrations allocate spaces where prisoners can routinely work or study, and in-prison university branches can operate. In a penitentiary system that suffers from chronic overcrowding, often in unsuitable buildings, for prisoners to have the chance to serve their sentences in better living conditions is a huge advantage. Dedicated prison sections usually have larger prison cells, more spaces available for studying and socializing, and more flexible hours for people such as lecturers, tutors and volunteers to come in from outside. Prison staff responsible for surveillance may be assigned exclusively to such dedicated sections, and consequently have a better relationship with the inmates. Opportunities for contact with the outside world may be greater too, in such dedicated sections, possibly through a limited use of IT communication tools such as the internet and Skype.

To comply with the regulations, the prison spaces serving as branches of schools or universities, and the associated features and living conditions, ought to be standard and guaranteed to all inmates. Instead, empirical studies have shown that they are the exception, not the rule, and they are generally perceived by all the actors in the prison world as a *reward* – a destination that is seen as a better prison within the prison (cf. Vianello 2018). How you gain access to this prison is rarely clear, and never formalized, and the terms governing your stay never seem to be stated in plain words. The rarity of these sections naturally means that the number of places is limited, and the conditions for accessing them very often have much more to do with good conduct, the type of crime committed, and the duration of a sentence than with prisoners' inclination to study or their academic results.

Be that as it may, such dedicated sections nonetheless remain immersed in a wider prison environment to which the inmates fear they might be sent back. After acquiring their privileged status, they need to know how to retain their position, keeping all these intermingling and interfering elements in mind.

### 3.1.3. The pervasive nature of the correctional culture

We can see the pervasive nature of the correctional culture in the prison administration' systematic efforts to coopt teachers and other operators from outside. It is essential for educators, volunteers and teachers entering this playing field to recognize the potential impact of their positive comments and recommendations. Teachers and educational reference figures may find themselves in a very difficult position. As representatives of public institutions complying with their official mandate, they should demand full respect for what has been formally established by law and local conventions regarding in-prison educational projects. If their understanding of prison life is flimsy or non-existent, they easily run the risk of joining in what Fassin (2015) called a "lay liturgy". Official meetings in prison, ceremonies for the delivery of diplomas, the inauguration of new academic years give the prison administration a chance to show off their treatment project and enable the educational institutions to demonstrate their dedication to the more marginal sectors of the population. But if the teachers begin to understand how prison works, their initial shock on learning about practices and customs that are unimaginable outside – "we see terrible things going on, but must say nothing", as Fassin put it – will gradually give way to their socialization in the prison world. On the basis of our fieldworks and advocacy experiences, we can confirm that quite often they undergo a prisonization process that makes them come to see as *normal* the limitations of inmates' rights and the rituals of subordination, the invasion of their students' privacy, and the waiving of deontological ethics of their teaching profession.

The virtual unavoidability of being exposed to practices that would be inconceivable in the world outside seems to be one of the most disturbing effects of a prolonged exposure to prison culture. This topic has been amply discussed in the sphere of social psychology, but much less in that of a criminology embedded in prison administration, which has focused more on legitimizing the declared function of custodial sentences. The processes of adaptation to prison culture that *all* actors engaging with prison life ultimately experience works exactly like any other process of cultural assimilation. As we had the chance to observe pretty often, an initial sense of dismay on seeing practices that are not only unusual, but even inconceivable outside is followed by a gradual adaptation that is

clearly influenced by the degree of exposure to the environment. The systematic searching of teachers arriving to do their job, the widespread use of special recommendations to gain access to educational programs, the denial of the opportunity to study on the grounds of behavioral assessments, the prescription of psychoactive drugs without any formal diagnosis: these are all things that outside prison would be deemed an abuse, while inside prison they can easily become normal. Anyone attempting to resist such processes of socialization and normalization prompts reactions – in *all* the social actors involved, not just the prison staff – that tend to stigmatize and isolate them. More or less generic claims such as “that’s the way things work in here” or “prison is another world” are extremely common in the carceral environment we observed. They confirm an acceptance of the distance between the prison’s functioning mechanisms and those of the world outside and suggest that anyone who fails to conform is simply naive.

Submission to prison culture and practices can be expressed actively as well as passively, depending on how power is distributed, and therefore on the prison hierarchy. Consider, for instance, the sessions of the team responsible for monitoring and treating the prisoners, to which teaching staff – along with psychologists, social workers, chaplains and volunteers – are routinely invited to report on the progress of their teaching programs. In situations like this, there is a shared and established idea of the *good* prisoner, of the successful critical review, or the positive prognosis. The inter-institutional relationship is really only nominal: book lending, contact with tutors, relationships with lecturers, and the only barely more objective exam results all become indicators contained in a short report that educators send to parole officers. Their findings are considered alongside the assessments of psychologists and prison police, and ultimately influence the chances of students in prison accessing special benefits while inside or seeing their sentence shortened. While these assessments can benefit the prisoners in some ways, and even give them some degree of control over decisions concerning them, the end result is that the teaching staff turn into prison operators, as they come to occupy a place in the institutional culture of the penitentiary.

### *3.2. Health professionals meet prison*

The reform of healthcare provision in Italian prisons was completed more than a decade ago. The declared goal of this reform was to place the medical treatment of prison inmates on a par with that of the population outside. This egalitarian goal was pursued by implementing a reorganization of the medical services available in prisons, which were separated from the hierarchy of the prison administration (which answers to the Ministry of Justice) and placed within the framework of the public health services organized by the regional authorities (and coming under the Ministry of Public Health). This change (Mancinelli *et al.* 2020) was accompanied by a significant turnover in the prisons’ medical and nursing personnel, and the aim – in theory – was to give the healthcare personnel a greater degree of autonomy. The healthcare operators’ emancipation from the prison management hierarchy could have configured them as a genuine “opposing force” in the day-to-day prison management scenario. During the years covered by our research there have been profound changes in how the prison system is organized, as concerns both the social characteristics of the prison population, and the new regulations and management actions designed to reduce overcrowding and



its harmful effects on the inmates. While there have been rising levels of marginalization in society, along with the criminalization of migrants, changes in the styles of consumption of narcotics and an increasing psychological discomfort intercepted by the criminalized subjects (Sbraccia 2017, 2018), the latest healthcare arrangements and criteria for recruiting medical personnel have at least partially reshaped the relationships within and between the institutions (prison administration and health service). It would be impossible for healthcare to be fully autonomous, especially in terms of the treatments available. Healthcare operators are routinely obliged to compromise with the demands of the prison management and security issues. The precarious nature of their employment (increasingly based on fixed-term contracts) also appears to negatively affect their ability to withstand the prisonization process that tends to affect people working in penitentiaries (Ronco 2018). Research findings nonetheless indicate that, grasped in their micro-physical and daily dimensions, the processes briefly described here tend to enliven the composite field of the institutional and legal culture of imprisonment (Sarzotti 2010), particularly as regards the tension between its disciplinary and afflictive references, and its focus on providing treatment and care.

### 3.2.1. The paradox of health service organization

Now they're sending everybody here. Other institutes just use us as a way to reduce the pressure, because mental illness is difficult to manage in prison. This is just because we're better organized to cope with the clinical and therapeutic needs in relation to the numbers we had. This is really paradoxical: our efforts focused on going beyond the logic of emergency and shaping our service in terms of efficiency. We achieved good results in the sphere of health and psychiatric treatment, but then the practice of transferring ill and troubled inmates here from other prisons disrupted the balance. Now we're in emergency mode again. It's unavoidable. You just have to do the best you can in a system like this. (Medical doctor in chief, central Italy, 2016)

In the words of this public health manager, the conflict of rationality goes beyond the domain of inter-professional relations in the prison under his medical responsibility, posing a systemic problem. During his interview, the physician attributed considerable importance to the hard work of mediation with the prison administration and prison police that had enabled a satisfactory organizational "balance" to be reached. Briefly, he had emphasized how reorganizing healthcare involved not just the sick bay (better distributing shifts, rationalizing the joint presence of doctors and nurses, refining the diagnostic and prevention strategies for inmates), but also relations with the local public health unit (ASL) serving the area (for regular access to specialists, purchasing medical equipment, procuring medicines, fast tracks for clinical examinations and laboratory tests in hospitals and at outpatient services). All these essential aspects of the reorganization process explicitly contemplated in the legal requirements for the reform of the prison health system (Cherchi 2016) had to be agreed and balanced with other prison management issues. These include, for instance, the availability of the mobile penitentiary police unit for escorting and guarding prisoners, or the police officers' commitment to ensuring an effective reporting of any problems and a timely and well-organized transfer of prisoners to the sick bay. As for accompanying prisoners outside the prison, the doctor interviewed explained how the procedure had been made more effective and flexible, and the ASL had acknowledged the practical difficulties for the prison police escorting prisoners, and the need to cater for the rapid rescheduling of

clinical examinations and laboratory tests missed due to unexpected problems. These efforts at mediation were not always equally effective, as emerged clearly from dozens of interviews conducted by the authors on similar issues at other prisons too. We could describe the situation in terms of a virtuous inter-professional composition of cultures and practices anchored to legal provisions designed to achieve a more efficient health service.

The new balance was threatened however, because of a systemic management-related paradox. As soon as word of the clinical department's efficiency got out, according to the doctor interviewed, the prison administration triggered an influx of prisoners from other institutions, evidently identified as needing more structured healthcare. This action naturally responds to the demands of administrative rationality. Faced with difficulties and the time it was taking to replicate the efficient healthcare model elsewhere, the State Department for Prison Administration chose to redistribute the patient-inmates to reduce the pressure on other sick bays within the prison system, and to exploit the organizational improvements made at the prison described by the doctor interviewed. Improvements that were consequently short-lived: his department was back in emergency mode in no time because of the growth in the number of patients it had to treat. At this point, there was no avoiding a return to an institutional environment and a daily practice in which, generally speaking, "you just do the best you can".

Apart from the formal mechanisms for moving inmates from one prison to another, since specific clinical and therapeutic units are located in certain prisons, the strategies for organizing prison healthcare departments have to come to terms with prison management dynamics activated by other, substantially independent decision-makers and administrators (Saponaro 2018). Within this institutional frame, the dialogue concerning the strategies adopted by different professional cultures can be difficult, and this can have the demoralizing effect that seems to emerge from the above doctor's interview.

### 3.2.2. Treating drug addiction: clinical assessments and normative frameworks

The incidence of people with drug dependence issues in the Italian prison system is statistically highly significant. It is estimated (also with reference to the official data by the Ministry of Justice) that they make up between one in four and one in three of the inmates, but the exact figure is unclear due to problems with its measurement. Without going into detail here, these problems include variability in the diagnostic criteria and the methods used to record and report such information. There is evidence of differences in the clinical assessment of prisoners' styles of consumption that may be based on different thresholds for abuse and addiction. The diagnostic work-up also interacts with very important legal aspects, inasmuch as certification of a state of drug dependence is a prerequisite for specific measures to be adopted as alternatives to detention, such as placement in therapeutic communities, or other treatment pathways involving the use of probation (cf. Mantovan and Sbraccia 2010).

That is why the management of prisoners with drug dependence problems comes wholly within the field (of tensions) typical of prisons' legal culture, also as regards the housing of such people in open prison sections (as required by the regulations), which are numerically inadequate for absorbing the numbers of prisoners defined as drug

addicts. Apart from the canons governing inmate transfers between prisons, this issue becomes charged with meanings because it juxtaposes the language and goals of the different actors involved: physicians, educators, police officers, and supervisory magistrates. Drug dependence can be seen as a disease brought inside the prison by an archetypal prisoner – the polydrug-user (often a foreigner, often sentenced for pushing modest quantities of illicit substances), whose problematic and disorderly drug consumption is associated with medical conditions deriving from his social marginality. It may be worth mentioning here that, well in advance of the penitentiary healthcare reform, a first attempt had already been made to set up a team of independent specialists (answering to the ASL) inside prisons, establishing dedicated services for treating drug dependence behind bars as a branch of the specific territorial services (first called SerT, now renamed SerD). It might be more useful, however, to consider the treatments provided, since the general therapeutic approaches appear to vary considerably. We refer here not to the clinical options available to a given physician (Bertolazzi and Zanier 2018) or to the necessarily individualized nature of the strategies for treating a given patient, but to the polarization emerging from the next two excerpts from interviews, which goes to show how the treatment of drug dependence is interpreted in the specific context of the total institution (cf Wheatley 2008).

Prison is the perfect place for reducing the doses of legal drugs used to manage withdrawal symptoms. In general terms, being behind bars helps because it eliminates the outside environmental factors that lead to a relapse in drug abuse. Reducing the medication is an attempt to rid inmates of their forms of addiction in a place where you have the chance to monitor their conditions at all times. (SerD medical doctor, north-eastern Italy, 2005)

Sometimes inmates arrive with a prescription for very high doses of Methadone or Subutex, enough to treat a horse. In such cases, we can try to reduce these doses, but this demands great caution. Generally speaking, we think the best option is to maintain the prescribed doses. Look, the experience of detention is already hard, I don't think it's a good idea to disrupt the balance. (Medical doctor, central Italy, 2011)

So, prison can be seen as the ideal environment for an aggressive treatment to reduce inmates' dependence on psychotropic substances, or as a place too stressful to allow for any attempt to contain their addiction. From what they know about the prison environment, the two physicians arrive at opposite conclusions that necessarily draw on different ideas woven into the way they interpret and deal with a situation – in a word, their professional culture. If such a different approach can be encountered within a specialist medical department (the SerD) under such a normatively homogeneous regime as a prison, then legal distinctions (outside the clinical sphere) are bound to further complicate the picture. The following excerpts from interviews refer to a discriminatory element that has now been overcome from a legal standpoint because foreigners in prison are now guaranteed the same treatment as other inmates whatever their legal status as migrants. Although the excerpts apply to the recent past, they go to show how a more or less accentuated tendency to combine deontological factors and normative provisions can give rise to quite different “interpretations” in terms of the legal culture.

When there are foreign inmates with drug addiction problems, if they are illegal migrants we try to do our best within the set of laws and regulations. It depends on the

SerT organization involved, but I can confirm that a lot of them deal with such inmates' withdrawal symptoms just by giving them a few drops of tranquilizer. (Medical doctor, north-eastern Italy, 2004)

I don't give a fuck about the normative framework, and I don't care about coming into conflict with some colleagues of mine. For sure, I've always been very critical about the massive distribution of methadone inside and outside the prison. As professionals, we've just aggravated the problem. But, based on a single clinical assessment, if I think an illegal immigrant needs methadone, I just give it to him. If someone's not happy with that, they can knock on my door. Then it would be fun to discuss professional ethics with them. (Medical doctor SerD, north-eastern Italy, 2006)

### 3.2.3. Sedation: helping the patient and managing the institution

Closely related to the above-discussed question of drug dependence in prisons, there is the ever-topical matter of the use of "legal" psychoactive drugs behind bars. Here again, there are no reliable data available, but the estimates point to statistically extraordinary amounts of benzodiazepines, sedatives, and other medicines affecting the central nervous system being administered to inmates (long term or "as needed"). As we have seen, these medicines might sometimes be adopted as inappropriate substitutes for the specific preparations used to treat drug addiction. The core issue, however, concerns their ambivalence, as their psychoactive components are also known to produce or consolidate a state of dependence harmful to a person's health. Calculating the cost-benefit balance is a fundamental part of a healthcare operator's job, inside and outside prison. Here again, however, such calculations seem to be influenced by considerations on the particular features of imprisonment, which is bound to cause anxiety, stress, sleeplessness, and psychological suffering, even to the point of making a prisoner psychologically unbalanced (Mosconi 1995). The well-established theory about psychopathological conditions emerging in the outside world and being imported in the prison (Miravalle 2015) goes hand in hand with the theory that sees prison as a direct cause of mental impairments and disorders (Gallo and Ruggiero 1989, Gonin 1994).

The physicians' total autonomy in deciding a patient's treatment is therefore formally guaranteed, and "only" subject to the patient's consent – barring extreme cases of involuntary commitment (which are not managed inside penitentiaries).

Their pressure is high. Of course, they're trying to forget where they are, to sleep as much as they can. We try to keep things under control, but I think we're in no condition to reduce the use of tranquilizers. (Medical doctor SerD, central Italy, 2012)

I have to work as a doctor depending on the context. It's obvious that a man locked up in a cell for 22 hours in every 24 will try to make the time go by, to sleep, to minimize his suffering. Have you seen the prison sections here? If I were in there, I'd ask to be sedated for sure. Wouldn't you? (Medical doctor, north-eastern Italy, 2004)

Moving on to the substance of the matter, since the prescriptions are signed by physicians, and the medicines are distributed by nurses (who also have a situated agency), we can sum up the attitude of the healthcare operators that emerges in the above excerpts using an expression typical of prison jargon: they are "easy-going" ("di manica larga", to say they're generous in prescribing and distributing tranquilizers). Any induction of forms of dependence on medicines is seen as a lesser evil, and significantly influenced by a sense of empathy for (and even identification with) the

patient. It is extremely difficult to pass judgement on the use of such treatment options. It would be wrong not to see them in terms of a situated rationality (which is convincing in many ways). The pressing needs of patients/inmates have been widely acknowledged as legitimate (and not pathological) by healthcare operators in prisons, even those described as being “strict” (although any improper recreational use of medicines is stigmatized [cf. Sterchele 2020]).

You can be sure you’re going to be pressured by the inmates, and that’s easy to understand. Then there’s the pressure coming from the prison officers. It’s easier to manage a prison with a higher proportion of inmates deeply sedated, and that’s easy to understand too. But I came here from a hospital, and I have to take responsibility for my actions. How can I see hundreds of young men and fill them with drugs. What’s going to happen when they’re released? We can’t promote addiction, neither from a clinical nor from an ethical or social point of view. (Medical doctor in chief, central Italy, 2015)

The most serious problem (also from the analytical stance taken here) emerges when the “pressure” goes beyond the legally acceptable relational dimension of the doctor-patient dyad as concerns the goals of a functional therapeutic alliance. In fact, it is the institutional actors – the penitentiary police officers in the case in point – who might exert a legally unacceptable (not to say illegal) “pressure” regarding the distribution, frequency of administration and dosage of some psychoactive medicines. There is no intention to point a finger here, but rather to acknowledge that – whatever the rules say – they too pursue a rationally situatable (albeit ethically questionable) goal, and that is to work in a less conflictual environment (cf. Drake 2015). During our visits as Antigone observers, and on other occasions when we chat with penitentiary police officers, it is not unusual for them to explain their point of view. They too – possibly out of empathy for those suffering from the psychological effects of imprisonment – are often against the medical goal of reducing the use of sedatives. In short, the “easy-going” approach may be prompted by both legitimate and illegitimate attitudes that both respond to clinical and management criteria that disregard legal requirements.

The medical director whose words are quoted in the last of the above excerpts from interviews took a (“strict”) clinical view that focuses on what he himself described as an “epidemiological responsibility”. Referring to the prison population as a whole, he felt there was a massive and dangerous tendency for inmates to become dependent on psychoactive drugs while in prison. His concerns became so widespread in the prisons that a protocol was drawn up together with the prison physicians of his regional area. This was an attempt to regulate the prison healthcare system that is bound to give rise to internal tensions and conflicts, especially with the penitentiary police (Princivalli and Sbraccia 2021).

#### 3.2.4. Interpreting self-harm

Coming from outside, you’re always worried about suicide and self-harming in prison. We worry too, when things get serious. But what you don’t understand is that we’re routinely trying to manage instrumental behaviors relating to requests constantly coming from people who have almost nothing. Nothing to do and nothing to lose. (Medical doctor, central Italy, 2013)

These words very clearly illustrate a recurring element in interactions between researchers and prison physicians. The issue concerns what is called “instrumental behavior” – a backbone (primarily of cognitive type) of the institutional culture of prisons. In the most classic of penitentiary narrative threads (cf. Brown 2013), the opposition between members of staff and inmates is represented by the former in the following terms: we behave transparently, go by the rules, pursue formalized institutional goals; they systematically behave dishonestly, pursuing unspecified goals, trying to get something they do not deserve. The inmates’ instrumental action is therefore very often delegitimized and seen as a scam. It is often assumed that symptoms of illness, expressions of suffering, pathological conditions are “simulated” to obtain some concession. Sometimes, this approach basically serves the purpose of reiterating a mechanism that degrades the prisoner (Garfinkel 1956, Khosrokhavar 2016). Sometimes, as in the above excerpt, it serves as a sort of justification (for the desperation of those who have nothing, and nothing to lose). Much more rarely, it is problematized and, through the cracks that emerge, we can see a prison environment steeped in informal rules, anchored to the logic of reward and punishment. Far from representing exceptions to the institutional norms, negotiations and concessions form the dominant relational framework, basically legitimizing instrumental actions.

When it comes to the very widespread self-harming practices, the notion of instrumental action becomes extremely troublesome. In some cases, we have met physicians who associated self-harming behavior with a prisoner’s need to let off steam (getting stitched up in sick bay was a way to be out of their cell for a few hours), or an extreme attempt to make themselves heard, get someone to answer a request they had made (for an extra interview or a transfer, the chance to exercise a right or to get the TV repaired, or a job inside the prison). In short, self-harming – and how it is interpreted – can also depend on specific elements typical of the institutional and legal cultures that take shape in prison.

It’s the Maghrebians who cut themselves. It’s part of their culture. Let’s say they express themselves this way. (Medical doctor, north-eastern Italy, 2004)

We’ve really reduced self-harming in this prison. First, we forbade the use of wine. Then we went round checking each inmate’s use of legal drugs. Reducing their altered states reduced the cutting. (Medical doctor, north-eastern Italy, 2017)

In the first of the above excerpts, we see a culturalist essentialism quite common in the interviews conducted with healthcare operators in prison. They attribute self-harming on the part of “Maghrebians” to cultural and religious reasons, clearly in the absence of any anthropological grounds (cf. Fanon 2011). They are unable to grasp (or prevented from realizing) that it might be associated with the extra burden of these inmates’ prison experience – in a state of severe isolation and extreme poverty, with little or no contact with the outside world, accommodated in degraded “ethnic” sections (cf. Scraton and McCulloch 2009). The second excerpt expresses a more structured correlation, with the idea that inmates seeking to numb their feelings (understandably, given the deprivation and oppression they experience) would experience a loss of self-control and an impulse to harm themselves. Such a hypothesis certainly fits the scarcely tolerable levels of structural and symbolic violence experienced in prison (Ronco *et al.* 2020), but the proposed solution of normative type (more rules) simply eludes this correlation.

Such reductive approaches to the complexity of the problem strongly influence a fundamental normative aspect of the patient-doctor relationship, which should be founded on trust. Instead, prisoners as patients are very often deprived of the very premises of this trust because what they say is routinely questioned and assumed to be a scam. This is a mighty attack on a crucial deontological dimension of the healthcare professions, an attack that stems directly from the processes of signification that define prison cultures and separate them from the normative horizons of the outside world.

### 3.2.5. Sport and health

In prison, the different ways of conceiving health (Annandale 2014) in relation to how the right to health is guaranteed, the adoption of maximalist approaches that focus on wellbeing rather than on efforts to contain inmates' discomfort (typical of damage control – the damage being due to institutionalization), and inmates' access to dedicated services all acquire characteristic features. In the following excerpts, for instance, the positive psychophysical effects of practicing sports and other recreational activities take on a very peculiar twist (Sbraccia 2018). While they are normally always associated with human wellbeing, for the imprisoned human being they are conceived differently.

I had to keep insisting with our director to convince her to forbid sports in our concrete yard. I have to think about the inmates' health. Football was a constant cause of conflict and trauma. Now you can hear them saying. 'Fuck, they're even leaving us without football'. But then, do we know what it looks like to treat an injury, a bad sprain or a fracture inside a prison? (Medical doctor in chief, central Italy, 2011)

Sports, gym, running: every opportunity should be incentivized. Every available space should be used in this sense. At this stage, it's clear that physical exercise is fundamental to reduce the internal pressure, to keep order, to give an alternative to people who are otherwise forced to stay in their beds. If it were up to me, the gym and the yard would be open and available 24 hours a day. (Medical doctor, north-eastern Italy, 2012)

Yet again, the situated cultural orientations differ hugely. The tension evident here refers to the mechanisms for identifying the priorities in relation to the shared goal of safeguarding the inmates' health. Within the healthcare operators' professional culture, this dialectic cannot be brought down to a polarization between the universal and the contingent in relation to the "fundamental" right to health. Instead, it is traced through different interpretations of what is contingent to the total institution (Campbell 1984). When they come up against prison, with its regulatory mechanisms and cultural configurations, even the founding concepts of a professional culture equipped with such solid and shared deontological references – like that of public health operators – begin to crumble (cf. Cherchi 2017).

## 4. Conclusion

Considering the stances and viewpoints of teachers and healthcare operators, collected by the authors and here selected as representative from a qualitative point of view, the core aim of this contribution was to reflect on the intersectional dynamics between elements that can be brought down to their legal and professional cultures. The picture we have painted is extremely complex and variegated. The institutional environment taken for reference – prison – is characterized by a near-totalizing formalized control deriving from prison regulations and various subordinate (but often strongly influential)

legal provisions, such as those contained in ministerial circulars. A first reading of the legal culture of the operators considered here, necessarily refers to their styles and their ability to interpret, metabolize and translate this legal content. This unavoidable linear exercise produces absolutely unsatisfactory results, however. These styles can be described instead in terms of the tensions and contradictions that emerge when we analyze the relationship between legal culture and normative socialization, the latter to be reconstructed in its contingent and situated dimensions (Sbraccia and Vianello 2016, Kalica and Santorso 2018).

The second analytical level reveals spurious normative arrangements where the juridical is not just threatened by informal regulations: it is overwhelmed by radically discretionary (and often arbitrary) practices. It comes under attack from continuous illegal acts and is overridden by aspects of ideologies and values that are sometimes (barely) concealed, sometimes openly stated in spite of the constitutional and regulatory goals of imprisonment. On the one hand, the value of inflicting a sentence seems to be waved about by the prison institution like an intangible flag, in front of which the inmates rights are subordinated. On the other, the systematic cognitive and operative use of the logic of reward and punishment (though it is far removed from the legal provisions) makes it impractical to try and describe the relationship between inmates' exercise of their rights (to healthcare and education) and operators' provision of the services involved. Simply put, this relationship is set within the frame of an institutional culture that largely disregards legal definitions. What prevail are anti-juridical cultural configurations. Operators appear to be socialized towards a hazy, rather unstable normativity as the shape of the power relations between the actors involved can vary, depending on a balance that is the result of multiple management styles and contingent alliances.

On a third level, we can then try to see how professional cultures interact with such a fragmented and elusive institutional world. Unfortunately, however (as we hope to have demonstrated in these pages), even this attempt only adds to the complexity of the picture. The pathway becomes more and more bumpy for anyone striving to essentialize the deontological and normative elements relating to these services.

The apparently greater homogeneity and compactness that we find among teachers, as regards their propensity to interpret the right to study in an inclusive key, constantly come up against the evident difficulties posed by the prison environment that hinders their access and the development of their projects. As we have tried to explain, the balance in the interaction between school and prison often risks tilting in favor of the prison. Even when it strives to emancipate, formal education in prison always refers to a situated sense of emancipation. Co-opting teachers in the prison's observation and treatment activities ultimately distorts their institutional mandate. By the general use of terms such as *repentance*, *regret*, *critical analysis*, *rehabilitation* and *reeducation*, the prison staff tends to absorb education within the semantic field of prison treatment. Then emancipation loses the nature of an open door, and is interpreted instead in a moral sense, as a way of making amends. Prisoners should become emancipated from their past, their negative behavior, their corrupt views and harmful habits. The relationship between education and treatment is thus unilaterally sucked towards the concept of correction typically used to legitimize the punishment. Inmate-students and lecturers



teaching in prisons struggle to avoid adopting this idea, and to escape a process of institutionalization – or what we could call prisonization (cf. Vianello 2018).

For healthcare operators, on the other hand, it even proves difficult to agree on a definition of health. There is evidence of a resounding polarization between ideas that tend towards limiting the damage (caused by institutionalization) and ideas more anchored to principles of consequentiality in the link between diagnosis and treatment. The legal orientation towards equity in healthcare, inside and outside the prison walls, takes different routes depending on how much healthcare operators realize and admit that they are taking action in a very anomalous setting that is pathogenic per se. A further level of fragmentation can then be seen within professional cultures too, giving rise to a great variety of processes of signification of the inmates' diseases and the clinical response to them (Lupton 2012). The conflict taking practical shape in patient management and treatment practices thus becomes so intense that it may even prompt solutions and actions that do more harm than good.

Day to day, the cognitive and operative options must ultimately come to terms with the mechanisms of negotiation with the various actors in the penitentiary field, which come to bear on strategic horizons that are hardly compatible. This situation turns into a battle to establish the primacy of the institutional goals (Sim 2002) because the prison needs to maintain acceptable security standards, contain the most disruptive conflictual elements, outline a rehabilitation plan, provide support for a marginalized population, assure inmates healthcare and promote a review of their life experiences, but also keep them in order, and make them suffer. No definition of organization or institution could realistically cope with such a plurality of references and objectives. So, a balancing act is needed to preserve a limited degree of professional and deontological autonomy, in an effort to avoid being crushed by the one clearly identifiable goal, that of systemic self-reproduction.

Within such a particular type of institution, the encounter between professional cultures and legal cultures cannot fail to give rise to an irreducible polymorphism, and unavoidably interferes with a sociologist's efforts at generalization. On the other hand, the situated forms of conflict resolution and the strategic horizons adopted in prison contribute to making these environments extraordinarily interesting to researchers aiming to engage in dynamic interpretations of normativity.

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