Book review: The Preventing of Suicide in Prison: Cognitive Behavioural Approaches Edited by Daniel Pratt

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This monograph explores suicide from a CBT perspective based upon the Prevention of Suicide in Prisons Study (PROSPeR) from the University of Manchester and provides background and chapters based on study streams.

It is made clear from the start that the writers consider suicide 'to be on a cognitive-behavioural continuum from thoughts about death, through suicide ideation, planning, action in the form of attempts through to a suicidal death'. The authors' explicit positioning is helpful in considering this book's purpose and practice utilisation as this is not another broad look at differing approaches to suicide but at a Cognitive Behavioural Therapy (CBT) model in detail and how it could be utilised in forensic practice.

The early chapters, by Daniel Pratt, explore the issues in relation to suicide in prisons and some of the differences within this context which are important when considering working or researching with this population. This is followed by a broader look at the epidemiology and the psychological models of suicide (with Patricia Gooding); with this third chapter finishing by focussing the reader back to the role of CBT with details of the CBT model developed (Schematic Appraisal Model) and how it links with the wider literature. There are hints of falling back into 'what we are thinking or doing at this University' without critically reflecting on their own findings, but it's an interesting exploration of this under-considered area of work in prison practice.

The chapter on CBT for suicidal prisoners outlines the University of Manchester's programme 'Cognitive Behavioral [sic] Suicide Prevention' (CBSP) therapy, with details of its content and delivery which presents a helpful picture of a potential new therapy which has been specifically designed and, tested within a prison setting. The modules of the therapy are outlined and these cover: attentional control training, appraisal restructuring, problem-solving skills training, behavioural activation and schema-focussed techniques. The authors continue with providing preliminary results for CBSP regarding its feasibility and acceptability, although no outcome data was provided at this stage. In order to demonstrate the programme and the SAMs model, a case study is presented on 'Mark' which brings the therapy and the theory to life and is valuable in consolidating understanding and seeing how it works in practice.

The fifth chapter 'problem-solving training for suicidal prisoners' is slightly misnamed as it focusses a useful spotlight on repetitive self-harm rather than suicidal behaviour per se. Nonetheless there is a beneficial literature review around considering problem-solving training for serious self-harm (i.e. when self-harm requires hospital attendance) which provides the justification of the development of a new training package for prison staff in the delivery of this new intervention to be implemented alongside the ACCT review process. The stages of thisd process areare outlined. At the time of publication, the training had not been implemented so its impact is not yet known.

The 6th chapter provides hands-on detail, useful for those engaged in forensic health research, around patient and public involvement, as defined by INVOLVE which is often a requirement within health research. The practical focus of this chapter is helpful and provides a number of examples of the challenges and methods employed to make effective and involved use of ex-service users within forensic research. These practical considerations continue with the next chapter exploring the challenges in implementing interventions within a prison setting. It is unfortunate that the authors do not see a role for forensic psychologists as they refer repeatedly only to clinical psychologists and therapists, with the obstacles provided being common for forensic psychologists with their skills and experience potentially useful due to their extensive experience including in the delivery of CBT interventions in prisons. The chapter would be most helpful for those new to prisons and the client group, and in developing an understanding of the challenges in the transfer of therapy between different settings. The following chapter continues this theme of developing understanding in the delivery of therapy in prisons, where it outlines a qualitative feasibility study on the recruitment, procedures and management of a study within a high-security prison. This chapter raises some important implications based on their findings around the differences, including ethical issues, between forensic and other research settings. Their clear focus on 'talking to prisoners' in the development of research takes the story back to Chapter 6 and a wider move towards greater consideration of completing effective, ethical and suitable research with this population.

The book finishes with concluding reflections from the editor which bring the story together, outlining some of the learning from their experiences plus further directions in both research and practice .

Overall, this is an interesting book for those conducting forensic research and those who want to explore suicide intervention approaches within the CBT framework. The book is based around their CBT-informed theoretical model (known as SAMS) and has some limits on its critique and outcome evaluation, but overall it provides a good base for promoting evidence-based interventions for persons at risk of suicide within prison.