

Improving prisoner death statistics

Policy Brief - February 2024¹



Prisoner deaths

Prisoner mortality rates are up to 50% higher than rates in the community, forming a global human rights and health equity concern, and producing tremendous harms and costs. In 2023, a UN Special Rapporteur warned that 'prisoners are ... dying needlessly' in a 'silent global tragedy'. The UN Human Rights Council has recommended that States create systems to collect, compile and analyse data on prisoner deaths. Despite this, we simply do not know how many prisoners die each year around the world. Prisoner deaths remain a 'blind spot' with national data often being absent or highly unreliable. This data deficit hinders the development of evidence-based policies and practices and the allocation of resources to prevent premature prisoner deaths.

This policy brief reports three tenets to advance prisoner death data systems in order to better understand and ultimately reduce prisoner deaths.⁵

COMPREHENSIVE

TENETS
TO GUIDE
PRISONER
DEATH
DATA

DISAGGREGATED

CONTEXTUALISED





Tenets for Prisoner Death Data

- 1. Prisoner death data should be comprehensive
 - i) count prisoners who die, not only deaths occurring within prison facilities and
 - ii) indicate *how prisoners died* by reporting detailed, distinct, specific and independently verified manners of death
- 2. Prisoner death data should be **disaggregated**Indicate *which prisoners died* by including a range of rights-required identifiers such as gender (identity), race, ethnicity, age, sexuality, disability and legal status
- 3. Prisoner death data should be **contextualised**Indicate *who and what was involved* in the death by adding descriptive tags. Were drugs, sexual violence, restraints or weapons involved? Where did the death occur and who was responsible? Were mass fatalities or mass perpetrators involved?

Applying these Tenets to SPACE I Statistics

Table 28 of SPACE I entitled 'Inmates who died inside penal institutions' provides the annual number and rates of (certain) deaths within penal institutions in Council of Europe member States (where available). The data is organized around counts and percentages for homicides, suicides and other deaths, alongside overall mortality and suicide rates per 10,000 inmates per country.

Comprehensive Data

From 2018 until 2022, statistics were only provided for deaths inside penal institutions, omitting those who died in hospital or on leave. While SPACE I remains focused on deaths occurring inside prison facilities, in 2022, additional data was included on the number of persons who died outside prisons.⁶ Yet it seems that practical challenges in securing comparable data on this issue remain:7 data was not available from 13 member States.8 It is notable that the number of prisoners that died outside prison was significant in many countries (Poland, Spain, Ukraine) and in some cases, higher than the number of deaths in prison (Albania, Belgium, Georgia, Greece and Turkey). This preliminary inclusion of data on prisoner deaths outside penal institutions is welcomed and is vitally important to ensure transparency by representing the true scale of prisoner deaths within the Council of Europe.

We reiterate our recommendation that the deaths of all persons subject to an ongoing detention order be included in SPACE I statistics and urge the Council of Europe to advocate and support the collection of this data by member States.

Disaggregated Data

SPACE I only provides disaggregated statistics for one type of death – suicide. Further, gendered data on deaths and

suicides only featured for the first time in 2010.⁹ Pretrial/ remand prisoner deaths have only been included since 2014.¹⁰ There is no data on deaths of transgender prisoners or prisoners from indigenous or minority ethnic populations, for example. This approach makes important characteristics of prisoners who have died invisible. Disaggregation is necessary to ensure prevention policies are underpinned by evidence, particularly for groups susceptible to discrimination. We support calls to move away from data collection approaches that mask 'underlying disparities' and towards the incorporation of data on disadvantaged or marginalized groups.¹¹

We recommend that the Council of Europe supports States to collect and publish prisoner death data disaggregated by important grounds of discrimination such as gender identity, sexuality, race, migratory status and disability.

Contextualised Data

SPACE I only refers to three categories of deaths: homicide, suicide or other. This limited categorization means that two thirds of all prisoner deaths in 2020 and over half in 2021 were classified simply as 'other'. Until 2011, suicide was the only category in SPACE I statistics. To bring greater clarity, a table was introduced in 2011 which temporarily included data on deaths caused by homicide, accidents, intoxication and other causes (including illness).¹² The current categorisation approach (homicide, suicide, other), introduced in 2016,¹³ conceals factors that contribute to deaths caused by or because of imprisonment and does not provide a comprehensive evidence base to facilitate death prevention.

We recommend the (re)inclusion of further, exclusive prisoner death categories. Descriptive contextual information on the location and means of death, and who was involved in the death, should be added to enhance prevention potential.

Preventing Prisoner Deaths in the Council of Europe

Illustrating the 'tip of the iceberg,' prisoner fatalities indicate the state of rights, health and safety within prison systems. Existing approaches disguise the scale of the issue, invisibilize prisoner characteristics and mask the circumstances of deaths. Reliance on a narrow handful of categories conceals the avoidable nature of many deaths and points of prevention.¹⁴ We hope our tenets can help to improve data collection and help underpin evidence-based safeguarding policies to reduce the rates of premature prisoner death.

Count 'prisoners who die' not deaths within prison

Include all deaths of persons subject to ongoing detention orders, including: in external medical facilities; during escape; of prisoners on temporary leave; of prisoners pre-trial and awaiting sentence

Indicate how prisoner(s) died

Report manners of death that are: i) detailed (reduce reliance on 'other' categorisation; represent all major forms of death); ii) distinct (reduce overlap between manners); iii) specific (have clear definitions and boundaries); and iv) verified (submitted by independent body and source(s) made clear)

Comprehensive

Which prisoners died?

Disaggregated

Extend data to indicate *which prisoners died* by including a range of rights-required identifiers such as gender (identity), race, ethnicity, age, sexuality, disability and legal status

Contextualised

Who or what was involved in the death?

Add descriptive tags to enhance death prevention potential. Were drugs, alcohol, fire, sexual violence, restraints or weapons involved? Where did the death occur and who was responsible? Were mass fatalities or mass perpetrators involved?

¹ Based on P. Tomczak and R. Mulgrew, 'Making prisoner deaths visible: towards a new epistemological approach' (2023) 4(1) Incarceration 1-21.

² 'Deaths in Prison', Report of the Special Rapporteur on extrajudicial, summary or arbitrary executions (A/HRC/53/29) 18 April 2023, para. 2.

³ 'Human Rights in the administration of justice' (A/HRC/RES/42/11) 26 September 2019, para. 8.

⁴ Penal Reform International and prisonDEATH, Deaths in prison: Examining causes, responses and prevention of deaths in prison worldwide, 2022 at 5.

⁵ This research is based on a thematic analysis of multidisciplinary scholarship and supranational prison oversight reports (116 reports from visits to 58 countries) that focused on the penological and rights issues relating to prisoner deaths in various world regions. Funded by the University of Nottingham, Research England SPF-QR funding and UK Research and Innovation [*grant MR/T019085/1*]. See also R. Banwell-Moore (2022) *What Is Known About Prisoner Deaths Internationally*? (DOI: 10.13140/RG.2.2.11922.12486).

⁶ Table 28, SPACE 1-2022, PC-CP(2022)4 at 115-116.

⁷ Aebi, Berger-Kolopp, Burkhardt and Tiago, *Prisons in Europe 2005-2015: Volume 1: Country profiles* (2019, Strasbourg: COE) at 28. SPACE I statistics contained an additional table outlining which deaths or suicides occurred in hospitals or outside prisons (2006-2017).

⁸ Austria, Bosnia-Herzegovina, Bulgaria, Croatia, France, Germany, Italy, Latvia, Liechtenstein, Portugal, Serbia, Switzerland and the UK.

⁹ See Table 15.1 SPACE I 2010 at 123.

¹⁰ See Table 13 SPACE I 2014 at 121.

 $^{^{\}rm 11}$ UNOHCHR, A Human Rights-Based Approach to Data (Geneva, 2018) at 7-8.

¹² See Table 15.1 SPACE I 2011 at 134-5.

¹³ See Table 13 SPACE 1 2016 at 115.

¹⁴ See Róisín Mulgrew, '<u>Prisoners Lives Cut Short: The Need to Address Structural, Societal and Environmental Factors to Reduce Preventable Prisoner Deaths</u>' (2023) 23 *Human Law Review* 1-25.





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