

Women in prison

by HM Inspectorate of Prisons

2005

A literature review

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Section 1

Literature review

- 1.1 Research has highlighted criminal justice and prison system inadequacies with regard to handling women offenders (Her Majesty's Inspectorate of Prisons (HMIP), 1997, 2000; Prison Reform Trust, 2000, 2003a; Fawcett Society, 2004). A cross-governmental initiative (the Women's Reoffending Reduction Programme 2002-5) was developed in response to the increased focus on women's offending and the research findings that consistently pointed to the need for distinct responses that take account of the social costs and implications of women's offending.
- 1.2 The initiative's aim was to strengthen the links between the departments and agencies working on the unique issues experienced by female offenders in order to develop integrated policies, programmes and spending partnerships to reduce women's offending. The programme includes on-going assessments of women prisoners' needs, which feed directly into policy and operational planning across the women's estate. An example of joint working is the backing of the Fawcett Society's Gender and Justice Policy Network, whose aim is to provide independent expert advice on, and input into, solutions that are developed in response to women's offending.
- 1.3 The Government's Strategy for Women Offenders (Home Office, 2001) stated that efforts to reduce women's offending were increasingly being linked to work in the areas of family support, violence prevention, children's services, as well as to drug strategy, arrest-referral and mental health initiatives. There has been strong support for placing women's offending within a wider context of social deprivation and discrimination, as well as increasing the availability of services for women in custody – particularly in relation to drug treatment. In 2005, the Home Secretary announced an injection of £9.15 million to develop 'radical new approaches to help reduce women's offending'. The initiative will involve setting up community supervision and support centres, where women can access help and support for a wide range of issues, such as drug abuse, mental health problems, housing, childcare and domestic violence. Pilot projects are expected to begin in the north-west and in Yorkshire and Humberside.
- 1.4 This report highlights the main findings from recent research into women prisoners' needs. It identifies where changes have occurred as a result of the pressure placed on government, following the review of the female estate, by HM Inspectorate of Prisons, the Prison Reform Trust and the Fawcett Society. The report also identifies areas which are still causing concern, and indicates, where applicable, the strategies that have been suggested to try and alleviate these problems.

Women's prison population

- 1.5 On 31 October 2005, the women's prison population stood at 4,596. Women were held in 16 women's prisons (Buckley Hall having been re-roled to accommodate men earlier in 2005). Women held in the women's unit at Durham had all been moved out to other women's prisons by October 2005. The number of women in prison levelled off at around 4,200 throughout

2005, although further increases are projected in 2006/7 as a result of changes in the administration of community sentences and in sentencing guidelines.

- 1.6 There was a 66% increase in the overall prison population in the 10-year period between 1993 and 2003, with a marked increase in the female prison population by 191% over this period. 13,380 women were received into prison in 2002, an increase of almost 3,000 since 1999 (www.howardleague.org). The population remained reasonably static in the early part of 2004, but between October 2004 and October 2005, the number of women prisoners increased by 7%.

Sentences

- 1.7 Within the period 1993-2003:
- There was a 196% increase in the number of women remanded into custody between 1992 and 2002 compared to a 52% increase for men. Between October 2004-October 2005), receptions of female remands increased by 21%, and remanded prisoners made up 17% of the female prison population
 - The number of convicted unsentenced women prisoners increased by 32% over the same period (the number of male prisoners in this category increased by 9%)
 - Over the 2004-2005 period, there was an increase of 3% in the sentenced female population: 3,439 in October 2004 to 3,545 in October 2005.
- 1.8 Statistical analysis by the Home Office (1998) of the growth in the female prison population between 1992 and 1996 suggested that it was a result of the interaction of three factors:
- an increase in the number of women appearing before the courts
 - an increase in the proportion of those women receiving a custodial sentence
 - an increase in the length of prison sentences being imposed.
- 1.9 Much of the literature surrounding the sentencing of women stresses concern about the over-use of custodial sentences for female offenders. A woman convicted of theft or handling at Crown Court is now twice as likely to go to prison as in 1991. At the Magistrates' Court, custodial sentencing of women has increased seven-fold since 1991 (Carter, 2004).
- 1.10 Research into the increase in the number of women receiving custodial sentences has pointed to sentencers' lack of awareness about the availability and effectiveness of non-custodial penalties. Some research also found that magistrates didn't impose fines on women because they were reluctant to penalise them financially. Not fining women on their first court appearance risks more severe penalties being imposed in the event of subsequent convictions (Hedderman, & Gelsthorpe, 1997).
- 1.11 Alternatively, it has been argued that, following the Court of Appeal ruling that sentencing must to some extent reflect public opinion, harsher sentencing has occurred in response to what is perceived as public demand. In the words of Lord Bingham:
'The increase in the prison population is not explained by any increase in sentencing powers, and I have no doubt that it is related to the pressure of public opinion.' (Evidence to the Home Affairs Select Committee inquiry into alternatives to prison 1998)
- 1.12 The Coulsfield Inquiry into Alternatives to Custody (2004) also reported that while most crimes have significantly decreased in recent years, the public thinks that crime has increased, which has led to greater pressure for more severe sentences.

- 1.13 It is thought that the elaboration of sentencing guidelines for the use of community penalties will help to solve this problem and bring about greater fairness and justice in both the sentencing and treatment of women offenders (Prison Reform Trust, 2000). The Judicial Studies Board, responsible for training judges and magistrates, recently updated its training manual to include a specific chapter regarding gender issues within its Equal Treatment Bench Book (Women's Offending Reduction Programme, annual review 2004-2005).
- 1.14 It should be remembered that magistrates can divert women to an NHS facility on mental health grounds. The prevalence of mental health issues among women prisoners is discussed at greater length on page 9, but the fact that one in five women on remand in 2003 were identified as suffering from psychosis highlights the extent to which the 150 court diversion schemes are being underused (Kimmitt Edgar, 2004). A study conducted by James et al (2002) found that 28% of patients diverted into treatment from the courts were reconvicted within two years of discharge.

Offence types

- Theft and handling charges accounted for 30% of the untried female population and 38% of all sentenced female receptions in 2003.
 - Among the population of sentenced female offenders, the main offence groups tended to be drug offences (41% at the end of June 2002) followed by theft and handling (18%).
- 1.15 Home Office research showed that 50% of the increase in the female prison population could be explained by an increase in the number of convictions for drug offences (Woodbridge and Frosztega, 1998). This was felt to be due in part to the Crime (Sentences) Act of 1997, in which the extension of mandatory minimum sentences for drug offending has had a major impact on the treatment of women offenders.
- 1.16 By the end of September 2004, remand prisoners made up over 20% of the female prisoner population. Of these, 59% did not go on to receive a custodial sentence and one in five was acquitted altogether. In 2002 the average time that women spent on remand was 37 days, compared with 49 days for male prisoners. In 2002, 1,390 prisoners (male and female) spent over six months on remand (Prison Reform Trust, 2004c).
- 1.17 Statistics from a Home Office survey in 1999 showed that 37% of all sentenced women had no previous convictions, compared with 15% of the male prison population. Twenty-four per cent had seven or more convictions, compared to 48% of the male population. When looking at the 11 women's establishments surveyed between 2003-2004 as part of HMIP inspections, 50% of the women surveyed said that they had never been to prison before. This is a significant change from our 1997 thematic review findings in which 71% of prisoners surveyed claimed that they had never been in prison before, and 46% claimed that they had no previous convictions.

Age

- 1.18 In 2003, most women (45%) entering custody were aged between 21 and 29 (compared to 40% of men). Only 2% of the female prison population were under the age of 18 (compared to 6% of men) and 29% were in the age range 30-39 (compared to 27% of men). These figures support the survey results carried out as part of our inspections, with 39% of women surveyed being in the 21-29 age bracket, and 29% in the 30-39 bracket. Interestingly, foreign national

women tended to be older than their British counterparts, with 57% of foreign national women being over the age of 30 compared with 46% of British nationals.

Black and minority ethnic prisoners and foreign nationals

- 1.19 In 2002, Home Office statistics recorded that 29% of women prisoners were from black and minority ethnic backgrounds, compared to 22% of men.
- 1.20 There was a slight drop in the number of foreign national women received into custody in 2004 compared with 2002. Foreign national women accounted for 20% of the female prison population in 2002, compared with 18% in 2004. The highest percentage of foreign national women in prison was in June 2004, when they comprised 25% of the female prisoner population.
- 1.21 The women's operational group policy was to concentrate foreign national prisoners in a small number of prisons, so that skilled staff could offer the highest levels of support and try and meet the specific needs of this population. Over 50% of women foreign national prisoners are from Jamaica, with over 90% receiving custodial sentences for drug importation, and the majority therefore serving long sentences. Interestingly, our survey results show that 83% of foreign national women had never been into prison before, compared with 47% of British nationals. The older prisoners' thematic carried out by this inspectorate also showed that a much larger proportion of foreign national than British women are over 50. Little account is taken of foreign national women's individual circumstances or the impact that imprisonment will have on their dependants. Over a thousand children from outside the UK are kept apart from their mother because of her imprisonment (Esmée Fairburn Foundation, 2004).
- 1.22 Our thematic review (1997) pointed to the fact that foreign nationals were excluded from open prisons for the whole of their sentence. Since then some foreign national women have been given opportunities in open conditions, although the criteria and eligibility have still not been formally agreed with the Immigration and Nationality Directorate. This makes it difficult for women to plan their sentences. Morton Hall was designated as a foreign national centre in 2005, holding 200 foreign national women (80% of the population) from 52 different countries. The high number of foreign national women in prison is not a sensible use of the prison estate, and further compounds the harshness of imprisonment for individuals who are far from home and family. In fiscal terms, the cost of keeping foreign national women drug couriers in prison for a year stood at £25 million in 2004 (Esmée Fairburn Foundation, 2004). This strongly suggests the need to find alternative approaches for this group of women.

Distance from home

- 1.23 One of the main concerns to arise from research into women in custody is the distance between where a woman is imprisoned and her home area. In 2005, there were improvements in imprisoning women closer to their homes. By December 2005 approximately 60% of women were held within 50 miles of their home (compared to 50% at the beginning of the year), and 83% were held within 100 miles of their home (Women's Estate Policy Team).
- 1.24 The importance of close proximity to family is illustrated in the Prison Service's evidence to the Woolf Inquiry which stated that:
'disruption of the inmate's position within the family unit represents one of the most distressing aspects of imprisonment...the nature of a prisoner's relationship with his/her family will be an important factor in determining whether s/he will succeed in leading a useful and law-abiding life on return to the community' (Woolf and Tumin (1991) paragraph 14.223).

- 1.25 It is welcome that Holloway's catchment area has been reduced as a result of the opening of Bronzefield and Peterborough. However, the re-role of Buckley Hall has led to women from the North West being allocated further from home than before.

Children

- 1.26 Although there are no definitive statistics on the number of prisoners who are parents, it is calculated that over 17,700 children each year are separated from their mothers by imprisonment (Prison Reform Trust, 2003). Women in prison tend to be the primary carers and are often single parents. Home Office research has estimated that two-thirds of women prisoners are mothers, and, perhaps more notably, it is estimated that 39% of female young offenders are mothers. In a research study conducted by the Department of Public Health at Oxford University, 69% of the 400 women interviewed in prison custody had children (unpublished article, 2005).
- 1.27 An inspectorate study found that only a quarter of children whose mothers were in prison were being cared for by either their biological or current father (HMIP, 1997). In contrast, a survey of the male prisoner population established that 90% of children were being looked after by their mother or current mother (Dodd and Hunter, 1992). Unfortunately, there are no recent statistics to allow us to see whether this pattern continues, as information regarding dependants is not routinely recorded within the Prison Service. However, the Revolving Doors Agency at Holloway has reported that 42 of the women being held there (3%) had no idea who was looking after their children and that 19 children under the age of 16 were looking after themselves (www.revolving-doors.co.uk).
- 1.28 Interestingly, just 5% of women prisoners' children remain in their own home once their mother has been sentenced. In a Home Office study, 10% of women prisoners who were interviewed and who had lived with their children before going to prison did not expect to do so after release (Caddle and Crisp, 1997). The same study revealed that almost a third of women prisoners' children were under five years of age, and two-thirds were under 10.
- 1.29 For 85% of mothers in prison, imprisonment was their first significant separation from their children (Caddle and Crisp, 1997). On release, they are unable to focus on education, employment or training until they have been successfully reunited with their children. A common theme arising in our inspections is the lack of support for women with children, particularly with regard to adoption and care proceedings. Our inspection reports regularly recommend that there should be a family support worker in all women's establishments, with particular expertise in family care proceedings.
- 1.30 UNICEF Convention on the Rights of the Child Implementation Handbook (2002) states:
Article: Parents in prisons
The imprisonment of parents, particularly of mothers of dependant young children, is deeply problematic, because the child is being punished along with the parent. While it is argued that the punishment of offenders always has repercussions on innocent relatives, where young children are concerned the effects can be particularly catastrophic to the children and costly to the State (both immediately, in terms of providing for the children's care, and long term, in terms of the social problems arising from early separation).
- 1.31 One solution is to accommodate infants together with their mothers in prison; the other is to find more constructive sanctions. In February 2000, the Prison Service implemented a new Prison Service Order covering the management of mother and baby units and the application process. There are a maximum of 115 places in mother and baby units, although the

temporary closure of one of the two houses at Styal reduced this to approximately 100 places. At the end of 2005, the number of imprisoned mothers with babies was 65, a figure that had remained constant throughout the previous two years.

- 1.32 With regard to more constructive sanctions, we, along with the Prison Reform Trust, among others, have suggested increased use of community penalties for women to help alleviate the disruption to their family, as well as the introduction of transitional prisons (HMIP, 1997) or smaller and less secure women's supervision, rehabilitation and support centres (Prison Reform Trust, 2000).
- 1.33 The first intermittent custody centre (ICC) for women was opened in April 2004 at Morton Hall, one of two national pilot studies. The intermittent custody (IC) sentence enables prisoners to maintain their employment, family and community links while serving their sentence. However, few orders have been made. Of the 75 women made subject to IC, 62 had served their custodial period at the weekend and 13 had served their custodial period on weekdays. The low numbers sentenced to IC led to many of the programmes and work opportunities originally planned as part of the custody period not being provided.
- 1.34 In our 1997 thematic review, reference was made to an 'urban prison' in the USA, which housed women sentenced to custody as well as those serving probation orders in a centre from where they could attend community facilities, seek employment and attend offending behaviour programmes. A pathfinder project initiated by the Hereford and Worcester probation service (the ASHA centre) has developed a programme that focuses on the specific needs of women offenders in England. It is a community resource centre, providing counselling, group work led by probation officers, and education facilities. Over a third of women using the centre are offenders on community rehabilitation orders, many of whom have mental health problems. Childcare and transport are available to enable women to attend.
- 1.35 On 29 March 2005, the Home Secretary announced a £9.15million injection for radical approaches to reduce women's offending. The impetus for the new initiative stemmed from the success of the ASHA centre and a similar project in Glasgow (128 project). The funding will be spread over four years, with plans for the new pilots in the North West, Yorkshire and Humberside agreed to start in 2006, according to the Women's Offending Reduction Programme's annual review.
- 1.36 International examples of alternatives range from giving women suspended sentences until their child reaches 14 years of age (Russia) and curfew units outside the prison gate where women are housed with their children (Germany).

Mental health

- 1.37 Women prisoners often suffer from particularly poor physical and mental health. The Institute of Psychiatry conducted studies in 1990 and 1995 which showed that 76% of women on remand and 56% of sentenced women could be diagnosed as suffering from mental illness. The Office for National Statistics Survey on 'Psychiatric Morbidity among Prisoners' (Singleton, et al, 1998), found that the prevalence of any personality disorder was 50% for women prisoners.
- 1.38 The Department of Health report (Brooker et al, 2003) on women's mental health needs stated that women were twice as likely as men to have received help for a mental/emotional problem in the 12 months prior to custody. It also found that women had symptoms associated with post-traumatic stress disorder and were more likely than their male counterparts to have a

serious mental illness. Research conducted by the Social Exclusion Unit (2002) reported that 15% of sentenced women prisoners had previously been admitted to a psychiatric hospital and 37% had previously attempted suicide.

- 1.39 Remand prisoners continue to be a particularly vulnerable group as they are more likely to suffer from personality and neurotic disorders and to have had contact with mental health services before entering custody than their sentenced counterparts (Social Exclusion Unit, 2002). Remand prisoners also show a higher incidence of suicide than the prison population as a whole (Grindrod and Black, 1989), with the greatest number of suicides occurring within the first four weeks of custody (HMIP, 1990). In our thematic review, one in three women surveyed had reportedly attempted suicide and 11% had harmed themselves.
- 1.40 In a number of studies, as many as half of the women in custody reported that they had experienced domestic violence (Hooper, 2003; Runggay, 2003) and up to a third had been victims of sexual assault (Social Exclusion Unit, 2002; Runggay, 2003). The Women's Policy Unit recently published research which also concluded that the majority of women in prison have experienced some form of abuse, and that this abuse contributes to the risk of offending as well as to drug and alcohol problems, mental health problems and self-harm (Hooper, 2003). The psychological legacy of victimisation experienced by women offenders presents a significant problem for prisons. Morris et al (1995) observed that all women who admitted to self-harming before or after their sentence had experienced abuse in their past, with a large proportion having experienced both physical and sexual victimisation. Between September 2004 and July 2005, 56% of reported self-harm incidents involved women.
- 1.41 The Government's Strategy for Women Offenders (Home Office, 2001) failed to address as an action point the needs of women prisoners with mental health problems. As part of the transfer of responsibility for prison health from the Prison Service to the Department of Health, there is a three month target for transferring patients assessed as requiring NHS secure care. Though this target is in general being met, our inspections have found that in some areas the assessment itself is delayed until there is a reasonable prospect of finding a mental health bed within three months.
- 1.42 Between July 2004 and September 2005, 99 women were referred for assessment for possible mental health transfer. Of these women, 34% were assessed and accepted by the mental health professional and 91% were transferred during the quarter. Six women had been waiting more than three months for a transfer to a secure hospital from the date of acceptance. Comparing these statistics to the previous quarter (April-June), 50 women were referred for assessment for possible mental health transfer, of whom 64% were assessed and accepted by the mental health professional and 88% were actually transferred. Four women had been waiting over three months to be transferred to secure accommodation in this quarter.
- 1.43 Keeping a woman patient with mental health needs in prison accommodation costs approximately £36,000 per annum, compared with £163,000 in an NHS facility (2003/4 statistics).
- 1.44 Primary care trusts now have a line of accountability for women's mental healthcare while in prison, and a duty of care to meet their needs in the community following release. The Women's Mental Health Strategy Implementation Guidance (2003) includes specific targets and objectives for providing tailored support for women prisoners on release to ensure their resettlement needs are met in their home areas. By the end of 2003/beginning of 2004, mental health in-reach teams were operational in all women's prisons (Hansard, 2004b). However, our inspection reports have highlighted that in-reach teams only touch people at the very high end of need with 'severe and enduring' illness. We have found that there is very little specialist

counselling available for women who have been subject to sexual abuse and staff are not generally trained in how to deal with disclosure of such abuse.

- 1.45 A study conducted in the USA (Browne et al, 1997) on women offenders found that those participating in a programme for survivors of abuse over a period of 6-12 months had less than half the recidivism rate at a 21-month follow-up period than individuals who had not taken part. In Canada, Survivors of Abuse and Trauma Programs are offered as an (optional) part of the core programmes for all women offenders to help them deal with and work through their violent experiences. The positive reports we receive from women during inspections in relation to the availability of independent confidential services from external agencies highlights the need for greater availability of services within the women's estate.
- 1.46 In 2003, we pointed to the counselling services at Bullwood Hall as an example of good practice. There was a counsellor designated specifically to provide services for women who had suffered sexual violence in the past. Crisis counselling was offered to each prisoner placed on a F2052SH (suicide and self-harm monitoring form). From the prison's records, 98% of all individuals placed on F2052SHs were seen within 48 hours. Individuals could receive up to three crisis intervention sessions and all were offered ongoing counselling.

Suicide and self-harm

- 1.47 The number of self-inflicted deaths in the women's estate increased from one in 1993 to 15 in 2003 and fell to four in 2005. A study conducted by the Office for National Statistics calculated that four in 10 women in prison have previously attempted suicide. Community-based studies have consistently shown that women are far less likely than men to die by suicide (a ratio of about 1:3). However, within a prison environment, women are at least at a comparable risk. During 2000 and 2001, women accounted for 10% and 8% of all deaths in custody respectively, although they only made up 6% of the prison population (Snow et al, 2002). In 2004, there were 1,331 cases of women and girls intentionally self-injuring or self-poisoning in prison, with women accounting for 49% of all self-harm incidents even though they made up only 6% of the population (Sedenu, 2005).
- 1.48 In the year between September 2004 and August 2005, women accounted for 56% of self-harm incidents while comprising only about 5% of the prison population. A study conducted by the Prison Reform Trust in 2003 found that of the 30% of women who reported to have self-harmed in custody, on average, each woman injured herself five times. Women are 14 times more likely than men to self-injure in prison (Prison Service, 2004). In our thematic review (1997), one in three women surveyed had reportedly attempted suicide and 11% had harmed themselves.
- 1.49 Analysis of the Prison Service data available from 1998 to 2003 (Women's Estate Policy Unit, 2003) identified the following characteristics among women who kill themselves in prison compared to men who kill themselves in prison:
- Women tend to be younger: 33% are under 21 compared to 16% of men
 - Women tend to be later in their period of custody
 - Women suicides are more likely to be sentenced for violence against the person (33%), compared to 15% of male suicides
 - Half of the women were subject to F2052SH (self-harm) monitoring, a higher proportion than the men.
- 1.50 The number of suicides in women's prisons reduced significantly in 2005. This coincided with a reduction in overcrowding across the women's estate. It is hoped that a new suicide and self-

harm review process, ACCT (assessment, care in custody and teamwork) will be more interactive and will focus on prisoners' needs and concerns, as well as creating a culture of ownership in all staff. It is imperative that adequate provisions are in place during the first few nights in custody, including a strong support structure, good detoxification procedures and regular assessments. We repeatedly recommended the need for structured, formal first night in custody procedures throughout 2003-2005.

- 1.51 Our inspections throughout 2003-2005 still uncovered instances of suicidal and self-harming women being placed in segregation or special cells, despite guidance from the operational manager that this should be an exceptional measure. There was also evidence of women being charged and punished for self-harming behaviour. In one case a detoxifying woman who had been recognised as being at risk of suicide or self-harm was forcibly moved from a shared cell and placed in cellular confinement as a punishment, contrary to all advice and instructions, and killed herself.
- 1.52 A number of progressive programmes have been developed with women specifically in mind. The alternative to self-injury programme (ASH) was originally developed at Holloway but has subsequently been amended and adapted at New Hall, as a short-term programme specifically for women. The programme is currently being used at Eastwood Park, New Hall and Buckley Hall. Holloway is hoping to introduce an ASH-plus programme which also incorporates motivational, PE and art sessions into its programme, making it more akin to Carousel. Carousel is an eight-week programme developed at Brockhill which provides longer-term support for women prisoners. Although it is a more holistic package, it is also very costly, which, added to its length, makes it less appealing to some women's establishments.
- 1.53 It is imperative that programmes are developed with women in mind, as women have higher levels of vulnerability than their male counterparts, more mental health problems and have had more negative life experiences. These factors require specific treatment, processes and procedures to ensure effective services for vulnerable women.
- 1.54 In addition, skin camouflage sessions are planned at Holloway, and are already taking place at Bullwood Hall, in which volunteers from the Red Cross Skin Camouflage Service will attend the prison on a fortnightly basis in order to deliver therapeutic sessions to self-harming women.

Re-victimisation

- 1.55 There is a risk of re-victimisation in prison, for example, by bullying or sexual assault from other prisoners and/or staff. While some women may be re-traumatised by the lack of privacy and autonomy in prison, others may see it as an opportunity to break away from situations of domestic violence and receive therapeutic intervention (Fawcett Society, 2003). Our thematic review (1997) suggested that the best hope for those with personality disorder lay in a therapeutic approach. Many organisations have stipulated that any intervention must be part of a resettlement package in the community for any long-term benefits to accrue.
- 1.56 The Prison Service recognises that bullying is a problem in women's prisons, and has highlighted the need for a published anti-bullying strategy tailored individually for each establishment.
- 1.57 Our survey of 11 women's establishments from April 2003 – November 2004 showed that a quarter of women had been victimised by other prisoners, with the most common methods of victimisation being verbal. A fifth of respondents also claimed victimisation from staff, with insulting remarks being the most common method.

Substance misuse

- 1.58 A Home Office study (Borrill et al, 2003) found that 66% of women prisoners were either drug dependent or reported harmful or hazardous levels of drinking in the year prior to custody. Studies conducted by Maden et al (1994; 1996) have highlighted that one in four women were dependent on drugs in the six months leading up to arrest, with 11% of women prisoners meeting the criteria for drug dependency, and one in five meeting the criteria for multiple dependency. In another study conducted on 400 imprisoned women in 2004-2005, 75% had taken at least one illegal drug in the six months prior to being interviewed with 38% having injected their drugs (Department of Public Health, unpublished report 2005).
- 1.59 The Office for National Statistics Study 'Substance Misuse among Prisoners in England and Wales' (1999) showed that 34% of sentenced women and 47% of those on remand were dependent on drugs.
- 1.60 Our 1997 thematic review pointed to the absence of an overall detoxification strategy that was systematically and consistently applied across the female estate. In the survey conducted as part of the thematic, three quarters of self-confessed drug users said that they had received no help other than minor medication while in custody. Only one in 10 had received any drug counselling.
- 1.61 In our recent survey of 11 women's establishments (2003-2004), 35% of women admitted to having drug problems on arrival in custody and 11% admitted to alcohol problems. Twenty-three per cent of respondents thought that they would have a problem with drugs on release, and 13% thought they would have problems with alcohol. Overall, 58% of respondents had attended alcohol or drug programmes, and of this number, 58% thought that the programme would help them on release.
- 1.62 Women's prisons were allocated £22.57 million for drug treatment. In the women's estate, a drugs coordinator and a detoxification adviser were appointed, as well as an area healthcare adviser. They worked closely together across the estate to promote the best treatments for medical, mental health and drugs treatment. Therapeutic communities have been established in two women's prisons, residential rehabilitation units have been built in a further two and voluntary drug testing units have been introduced in all women's prisons, along with CARAT teams, which seek to ensure follow-up support and treatment in the community. Considerable progress has been made across the women's estate in tackling substance use problems. In fact, clinical management in the women's estate is now considered to be better than in male local establishments.
- 1.63 It is worth highlighting, however, that the introduction of a detoxification regime in Styal women's prison was much delayed. It was only following a number of deaths that the regime was implemented, even though our inspection reports had recommended this on a number of occasions.

Resettlement

- 1.64 Research has shown that for men leaving prison, the first priority is generally employment; for women it is accommodation. Singleton et al (1998) found that about one-third of women prisoners lose their homes, and often their possessions, while in prison. The loss of children has a negative impact on women prisoners' resettlement into the community, with many women facing the prospect of not being able to get their children back until they have a home,

combined with struggling to find a home when they are not caring for any children (Social Exclusion Unit, 2002).

- 1.65 Liaison between prisons and local housing departments needs to be effective because of the number of women in prison serving short sentences. This is a real issue for women's prisons; because they are dealing with a much larger catchment area they have to establish links with many more housing authorities. The Home Office found that only 59% of women imprisoned in 2000-2001 had accommodation arranged for them on release.
- 1.66 An additional £670,000 a year from 2003-04 was allocated to women's prisons to help strengthen housing and other advice services. A particular focus was placed on establishments which took remands, so that early assessment could be made of women's needs. A full-time resettlement coordinator and a deputy were appointed in 2002 to oversee the delivery of resettlement across the women's estate, and a housing coordinator was to be seconded from the voluntary sector to support the work of housing advice schemes in prisons and develop more strategic relations with local authorities and other housing providers. However, since the disbandment of the women's estate in 2004, these roles have been dissolved. Individual establishments currently employ housing advisers, but their role varies from establishment to establishment with some (Holloway) having a full-time adviser and housing assistant, while in others advice is provided by serving prisoners (Foston Hall). Our inspections last year found that resettlement policies were under-developed in all establishments we visited.
- 1.67 In our recent survey of 11 women's establishments (2003-2004), under half of all respondents knew who to contact within their establishment about jobs, finances, educational courses or healthcare. Only 56% knew who to contact with regard to accommodation and 53% with regard to getting help with claiming benefits. Once again, this points to the need for regular evaluation and monitoring procedures to ensure that strategies are effective and have a positive impact on the lives of those they are designed for.
- 1.68 A resettlement strategy for women exists, which is designed to ensure that women offenders are matched to the prison with the most appropriate facilities for their particular needs. The women's team developed a women's resettlement plan in 2004 in order to provide greater support and consistent advice to the area resettlement coordinators. The success of this plan is yet to be assessed. As stated above, recent inspections in the women's estate have regularly found under-developed policies. The women's team also proposed to refine the allocation strategy for women with an emphasis on developing opportunities for women to return to a local prison near the end of their sentence for resettlement purposes (Women's Team Business Plan, 2004-2005).

Work experience

- 1.69 A Home Office research study conducted in 2000 found that of the 567 women prisoners interviewed, three in 10 were working in the period before imprisonment (most often in low-skilled and short-term work). Fourteen per cent lacked both work skills and qualifications before beginning their sentence, with these women mainly having dependant children (Hamlyn and Lewis, 2000). A report by the Office of the Deputy Prime Minister estimated that a staggering 67% of men and women were unemployed before they were imprisoned (ODPM, 2002).
- 1.70 A 1999 survey found that 90% of women prisoners had at least one job during their sentence, but only 30% of these women thought that these jobs would help them on release (Social

Exclusion Unit, 1999). Research conducted on a small representative sample of women prisoners (Hamlyn and Lewis, 2000); found that only 16% of women had been involved in a job that led to a vocational qualification, with few women with any prior skills being able to put these to use in their prison jobs. Of the 60% of women in this study who did not think that their prison jobs would help them on release, the most commonly cited reasons were that the work undertaken in prison was too menial, or they had no interest in that line of work. The major problem for all women surveyed upon release was that their criminal record was a principal barrier to finding work (74% of all job-seekers). These results point to a need for training in job-seeking, interview and application techniques. Courses should be made available to all women, regardless of age, prior work experience or qualifications. According to a Home Office study conducted in 2001, only 18% of women had employment or a training course arranged for their release compared with 30% of adult men (Niven & Olagundoye, 2002).

- 1.71 A key performance indicator (KPI) introduced in April 2002 was designed to double the proportion of prisoners getting jobs on release; but there is little evidence to suggest that this has been achieved. A further KPI was introduced to increase the number of prisoners obtaining accommodation on release, which is most women's first priority.

Education

- 1.72 Research carried out by the Social Exclusion Unit (2002) found that 33% of the sentenced female population had been excluded from school, with 71% of imprisoned women claiming to have no educational qualifications. Over the 2002/2003 period, 52% of imprisoned women had reading proficiency at level one and below, 71% had spelling proficiency at level one or below and 76% had numeracy levels at level one or below (level one is the expected level of an average 11-year old). Seventeen per cent of women had received a qualification while in custody, compared to 22% of men.
- 1.73 A Home Office research study (Hamlyn & Lewis, 2000) into the training and educational experiences of women prisoners found that of the 569 women studied, just over half (54%) had taken at least one educational/vocational course. Of those who had not attended courses, the majority said that it was because their sentence was too short to get involved in courses (22%), or that they were not interested in the courses on offer (20%). When asked whether there were courses they would have liked to have attended, individuals with literacy and numeracy problems expressed a greater level of unmet need (61% compared with 50% of those without these problems). This study also revealed that training which led on to qualifications was more likely to be given to women prisoners who already had at least one qualification, resulting in the majority leaving prison without any qualifications.
- 1.74 Our analysis of women prisoners surveyed over the last annual reporting year, revealed that 76% of respondents claimed to have been to education, and 69% felt that the courses they had attended would help them on release. With regard to vocational training, 65% had been on such courses, and 58% felt that this would benefit them on release.
- 1.75 Although much work has been undertaken in women's prisons in relation to education, training and employment opportunities, the importance of equipping women with the skills needed for employment on release should not be understated. This is particularly pertinent when considering research findings that show that prisoners who do not take part in education or training are more than three times more likely to be reconvicted, and that basic skills learning can contribute to a reduction in reoffending of around 12% (Social Exclusion Unit, 2002).

Offending behaviour programmes

- 1.76 Since 2002, one of the priorities for the Prison Service has been to increase the range of offending behaviour programmes available to women. Until recently, women have undertaken offending behaviour programmes which were initially designed for men (the enhanced thinking skills programme and the cognitive skills booster programme), and their transferability to women offenders was questionable. Although some interventions may work well for both sexes, there are significant differences in offending behaviour, underlying circumstances to offending, and personal circumstances, which call for a different and distinct approach for women.
- 1.77 The Prison Service has developed four programmes and one integrated system specifically for women. These target violent offenders, including those with borderline personality disorder (dialectical behaviour therapy), substance users (RAPt and P-ASRO), resettlement and people serving short-term prison sentences. An offending behaviour programme is currently being developed for women serving longer sentences: 'choices, actions, relationships and emotions' (CARE). Focus on resettlement (FOR), a short motivational programme for short-term offenders, was originally written for men but is undergoing some changes to reflect the needs of women offenders following advice from the Correctional Services Accreditation Panel.

Young adult women and girls

- 1.78 Young adult women were held in four establishments (Bullwood Hall, New Hall, Eastwood Park and Brockhill) as well as being remanded in a further three establishments (Styal, Low Newton and Holloway).
- 1.79 The Children's Society National Remand Review Initiative highlighted the acute needs of the young female prison population, specifically in relation to substance misuse and mental health. Self-harm, victimisation from peers and child protection needs are also prevalent among this group (Children's Society, 2003; HMIP, 1997; Howard League, 1997) and there is a real need to address these areas in a manner specific to children.
- 1.80 These needs and vulnerabilities are made clear by the fact that five of the 14 self-inflicted deaths in the women's estate in 2003 involved young women under 21. Two-thirds of young women harmed themselves while in custody, compared with 30% in the women's estate as a whole and 6% in the male estate (HMPS, 2004). Two thirds of girls aged 17 and under also reported violence at home, with over half having had a history of care or involvement with the social services (Children's Rights Alliance, 2002).
- 1.81 With regard to educational achievement, the majority of girls under 18 in prison were low achievers, often having truanted or been expelled from school. Our survey results showed that 44% of respondents in 2003-2004 were aged 14 or younger when they were last in school. Furthermore, 67% of all respondents had been excluded from school at some time in their past and 78% of respondents admitted to having played truant. Just under a third of respondents (31%) felt they needed help with reading, writing or maths. A research study conducted by this inspectorate and Ofsted concluded that although attendance at education was regarded positively by young women, the level and type of study was often pitched at too low a level, and offered little chance of gaining any type of formal accreditation (Ofsted and HMIP, 2004).
- 1.82 Since April 2004, almost all under-17s have been removed from Prison Service accommodation and placed in secure training colleges or local authority secure homes. Five

units within the prison estate are now being opened specifically for girls aged under 18; they have been designed to allow the delivery of best practice and, to encourage knowledge-sharing to achieve excellence in the care of girls (Women's Team Business Plan, 2004-2005). The first units opened at Downview and Cookham Wood. Our report *Juveniles in Custody: 2003-2004* provides in-depth and disturbing insight into 16 to 18 year old girls' experiences (Eves, 2005).

Conclusion

- 1.83 Progress has been made in commissioning research into the criminogenic factors of women's offending, into the employment and training needs of female offenders, and into case management in the community. The assignment of a single operational manager to manage women's prisons in 2000 brought about greater consistency and more sharing of best practice. A women's steering group, chaired by the women's policy group, oversaw the roll-out of OASys and the delivery of general behaviour and substance misuse programmes for women offenders as well as accredited offending behaviour programmes.
- 1.84 However, during 2004, the women's estate was disbanded and the management of women's prisons reverted to local areas. This has raised significant concerns that women-specific policies and procedures may be diluted or lost; particularly as there is now no specific policy lead for women within the National Offender Management Service. It is imperative that finances are ring-fenced for the women's estate, as well as pressure applied to ensure that these policies and procedures are fully implemented. It is also of utmost importance that these policies and procedures are constantly evaluated and monitored to ensure that the women's estate is delivering best practice as well as searching for alternatives to custody.

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Section 2

The imprisonment of women: reflections from the UK ¹

2.1 This paper draws upon three things: our inspections of 18 women's prisons in England, Wales and Northern Ireland; the confidential surveys we carry out into the experiences and perceptions of women in each prison we inspect; and a review of the literature and recent developments in women's imprisonment in the UK. It relies heavily on research work done by Dr Julia Fossi.

2.2 There are three key factors about women in prison in the UK. First, we are imprisoning more women (nearly three times as many as 10 years ago), mostly for non-violent offences. Second, many of those women arrive with identifiable vulnerabilities. Third, the experience of imprisonment often adds to that vulnerability – not least because of separation from children – in spite of recent improvements to the treatment and support of imprisoned women.

2.3 I want to start with the words of a woman in prison:

*No one knows how I really feel
Is this a nightmare or is it real?
The tears I cry, the tears I shed, praying each day that I was dead
Everything I do seems to be or go wrong
I feel no reason for my life to carry on
Why won't God just take me away?
I don't want to feel like this every day
I can't handle no more, sorrow and tears
I'm full of mixed feelings, confusion and hate
I just want to walk through heaven's gate
I'm a lost and lonely fucked up girl
This ain' no life
This is hell*

2.4 This was found in Jane's diary the day after she killed herself in prison. She was 25, serving a two-year prison sentence for robbery. She had been in care. By the time of her prison sentence, she was using crack cocaine, heroin and speed, and abusing alcohol. She said she had been sexually abused. She was epileptic and asthmatic. She had been treated for depression and paranoia earlier in her sentence, though this information was not passed on to the prison.

2.5 Jane is typical of many of the 4,500 women and girls in prison in the UK, and even more typical of the 29 who killed themselves in our prisons over the last three years (2003-2005). A majority will have been using a cocktail of drugs, often to mask abuse of various kinds: with mental health problems that are both associated with drug-taking and exacerbated when the

¹ Speech given by Anne Owers, HM Chief Inspector of Prisons, at the 'What works with women offenders?' conference, Prato University Centre, Italy, June 2005

drugs stop dulling other pains. Most will be serving short sentences, for non-violent offences – indeed one in five will not even be convicted. Nearly half, according to our prison surveys, will be new to prison; and that rises to 83% of those who are foreign nationals.

- 2.6 Undoubtedly, the rise in the women's prison population is fuelled by drugs – not only drug-taking, stealing or dealing to finance drug-taking, but also much stiffer sentences for drug-related offences, including drug importation – which accounts significantly for the 21% of women in UK prisons who are foreign nationals; drug 'mules'. But it is also a function of an increased use of prison generally – for lesser offences, and for longer periods – that is part of the Anglo-American 'love affair with incarceration'.
- 2.7 Along with a rise in numbers has gone a rise in suicides and self-harm. More than one woman a month killed herself in prison in 2003 and 2004. Out in the community, men are three times more likely than women to commit suicide: in prison, during those years, the statistics almost reversed, with women being around two and a half times more likely to kill themselves. Self-harm among women is also prolific – 14 times the rate of men. Classically, men under pressure hurt each other; women hurt themselves.
- 2.8 Our inspection reports reveal a great deal about the vulnerability of women and the pressure this puts upon prison staff. In a woman's local prison in Yorkshire

'There had been four self-inflicted deaths in 2002-3, but there were many more occasions, as witnessed during this inspection, where staff vigilance had saved lives. An average of 75 suicide watch forms were opened each month; there had been 124 incidents of self-harm in the month before the inspection; all inpatients in the healthcare centre were seriously mentally ill.'

- 2.9 One prison we inspected, holding only 100 women, had had five suicides in 18 months. In another, we recommended that proper detoxification processes should urgently be put in place, as women were fitting and vomiting in their cells. Eighteen months later, effective detoxification was introduced: in the interim, six women had killed themselves, all withdrawing from drugs, all in the early days of custody. In another, in the healthcare unit, I saw three nurses, simply sitting outside the cells of three seriously mentally ill and self-harming women. One had already tied four ligatures round her neck that morning, because her 'voices' told her to. That is reflective of a general issue in our prison system: the fact that we closed our large mental hospitals some time ago, on a promise of providing 'care in the community' instead. In fact, there is very little such care available. The alternative, for many mentally ill people, is 'care in custody': but in a coercive rather than therapeutic environment, without the ability to compulsorily treat.
- 2.10 It is clear that women in prison bring with them a considerable amount of vulnerability: one in 10 will have attempted suicide, half say they have experienced domestic violence and a third sexual assault; two-thirds will be drug dependent or with hazardous levels of drinking; 15% have been so seriously mentally ill that they have previously been in a psychiatric hospital and 80% have had diagnosable mental health problems. A very recent survey of the health of women in prison (carried out in 2004-5) shows that 91% had some form of psychiatric disturbance on reception (compared to around 10% in the general population).
- 2.11 It is also clear that prison exacerbates that vulnerability. Two-thirds of women in prison are mothers, and 50% are primary carers of children under 16. For eight out of 10 women this is their first serious separation from their children. They will be affected by anxiety about their children: only a quarter of children will be looked after by their biological father (whereas 90% of men in prison can expect their partner to continue to care for their children), and only 5% will

remain in their own home. Yet around half of the women in prison will be more than 50 miles from their home, and nearly a quarter more than 100 miles away.

- 2.12 Our surveys consistently show that women arrive in prison with considerable worries and problems. Eighty per cent of women in our surveys reported problems on arrival, and this reached 90% in prisons receiving women directly from court. Drugs, health, depression, problems in contacting families, and housing were the five greatest areas of concern. In one prison, over a third of women had difficulty contacting their families, and nearly half said they felt depressed: the two are likely to be connected.
- 2.13 These practical problems are likely to increase with imprisonment. A third of women will lose their homes (and therefore often their children and their possessions), and 80% lose the support of partners. A prison governor who had moved from men's prisons to a woman's prison described graphically the difference he observed when prisoners were discharged. Most men were met at the gate by a welcoming party: partner, friends, drink. Almost all women walked alone from the prison gate. Only around half the women we surveyed knew where to get help in finding jobs, housing, claiming benefits or arranging continuity of healthcare on release.
- 2.14 However, paradoxically, it is also clear that many women in prison, particularly those with serious substance abuse or psychiatric problems, are able to access support, treatment and medical care that they lacked in the community: indicators for mental health problems in the health survey showed improvement over the first three months of custody. In any local prison, there is a visible difference between the women who have just arrived, and those who have been properly detoxed and looked after six weeks later. What women do not get, however, is the coping skills to carry that on; or, crucially, the availability of continued treatment or support in the community when they leave.
- 2.15 We have a particular concern about girls in prison. Our system allows children over the age of 15 to be held in prison establishments: separate from adults, but run within the prison system. Younger children, and those considered vulnerable, can be held in custodial settings run by local authorities or so-called secure training centres. The number of girls held in prisons has always been small – fewer than 30 – but because of that they are always held in adult women's prisons, sometimes in the same accommodation as 18 to 21 year olds. For some time, it has been the aim to remove girls from prisons altogether, and it is very rare to find under-17s in prison. But the girls who are there are often the most disturbed young people, whom the secure homes say they cannot contain, and who then find themselves in the prison's healthcare wing, with even more seriously mentally ill women.

A girl of 17 in a women's local prison had been diagnosed as autistic, with Asperger's syndrome. She had been remanded in custody for assaulting two care workers at her previous care home. She was held in the healthcare centre, with women who were continually self-harming. She began to do so as well, as her condition meant that she tended to copy other people. She needed protection from the adults, and they also on occasion needed protection from her violent behaviour. The healthcare centre did not have the resources to provide the nursing care she needed.

- 2.16 In this and other cases we have seen, we have considered that girls in prison are, in the words of our Children Act, 'at risk of significant harm'. In the outside world, this would require a local authority to convene a multi-disciplinary review to draw up a care plan. Child protection arrangements in prison, and the willingness of local authorities to engage with those held there, have been weak: though they have now been strengthened, partly as a result of a court judgment that children in prison are entitled to the protection of the Children Act, even though

the Prison Service itself is not bound by the Act. This has brought often reluctant social service departments – and their area child protection committees that exist to safeguard vulnerable children – into the arena.

- 2.17 I have set out some of the problems and concerns in relation to women in prison in the UK. There have, however, been some developments and improvements over recent years, partly at least stimulated by this Inspectorate's thematic reports on women in prison, and our often-repeated recommendations for change in inspections of individual women's prisons. We now have a dedicated women's inspection team (whose team leader is here at the conference) and which has by now inspected every women's prison in England, Wales and Northern Ireland (and is about to inspect two Canadian women's prisons, on the invitation of the Correctional Services of Canada).
- 2.18 A few words about our inspectorate and its methodology. We are set up in statute, independent of the Prison Service, and of direct control by Government departments, to report on the conditions in prisons (both public and private) and the conditions for prisoners. We have the right to go into any prison, at any time, with or without warning, and to have free access (with our own keys) to all prisoners, staff and documents. As I have said, we carry out confidential surveys of prisoners, and can now benchmark those against responses from other similar prisons over a three-year period. We produce and publish inspection reports on each individual prison (around 60 a year), with recommendations for change. We return (always unannounced) to check whether those recommendations have been progressed; and find that around 70% have been. We inspect by our own detailed criteria, *Expectations*, covering all aspects of prison life from reception to resettlement, and everything in between. Those criteria are referenced against international standards: and we will shortly be publishing separate criteria for juveniles, and supplementary criteria for women. In addition to individual inspections, we also carry out thematic inspections on issues of general concern throughout the prison system. That has included two reports on women in prison, one on juveniles and one on suicide. We are currently working on a report on race.
- 2.19 Various non-governmental organisations have produced influential reports on women in prison: including the Prison Reform Trust's Wedderburn report in 2000, and a recent report on women in criminal justice from the Fawcett Society. And it is welcome that there has been a general concern, including among Ministers, senior judges and officials, about the rise in the prison population in general, and the women's prison population in particular.
- 2.20 This activity, and level of concern, has certainly stimulated debate and movement in the approach to women in prison. One of the earliest consequences was the setting up of a separate and specific management system for women's prisons, which for a time were run as a discrete part of the prison estate. That had a number of consequences. First, rather than being a very small part of each geographical area, women's prisons were managed as a unit and had a voice. Second, policy proposals developed to identify and respond to the specific needs of women – in relation to detoxification, suicide prevention and resettlement, for example – could be directly translated into operational practice. Third, there was a separate budget, which could not be raided by other parts of the system. That has undoubtedly had an impact; though the impact was dulled by the fact that it coincided with a sharp increase in the female population, so that population management and stabilisation, and the re-rolling of prisons from men to women, took up an inordinate amount of energy.
- 2.21 The women's estate has now been disbanded, and women's prisons returned to their geographical areas, on a promise that effective resettlement will be easier to ensure locally, rather than nationally. It remains to be seen whether this is the case – and whether the

lessons learnt about women in prison are retained and acted upon without the specific impetus, and budget, of a separate prison estate.

- 2.22 We examine women's prisons, as we do all prisons and places of detention, under four tests: whether prisoners are held safely, whether they are treated with respect, whether they are able to engage in purposeful activity and whether they are prepared for resettlement back into the community. I will say a little about developments within women's prisons in the UK under each of those headings.
- 2.23 First, safety. As I have said, the rate of self-harm and suicide among women in prison has been high. This year, so far, only two women have committed suicide in our prisons. It is difficult to isolate any single factor, and too soon to detect whether this is a trend, or a blip. But it has coincided with four other factors that have come into play. One is the levelling off, and indeed slight decline, of the number of women in prison, particularly the number of remanded women. This has reduced the instability caused by constantly re-rolling prisons, and constantly moving prisoners around.
- 2.24 Second, detoxification in women's prisons has significantly improved and has specifically been targeted at the needs of women; and it is in the early days of prison when women, particularly those withdrawing from drugs, are most vulnerable.
- 2.25 Third, healthcare in prison, and mental healthcare in particular, has improved, as it is being taken over by the National Health Service. That has undoubtedly improved the professionalism and standard of prison healthcare – from a very low base. It has made it slightly easier to transfer acutely mentally ill women to mental hospitals, and has also allowed the development of mental health in-reach teams in all our local prisons, to work with the most seriously ill women.
- 2.26 Fourth, the Safer Custody Group within the Prison Service (now the National Offender Management Service) has been monitoring and developing best practice in safety in prisons generally: with the women's policy group developing practice that specifically relates to women's needs and patterns of self-harm (for example, seeking to ensure that women are not punished, or segregated, for acts of self-harm – which we have sometimes found). This involves not only procedures for managing prisoners at risk, but also taking a holistic approach: identifying that it is the overall culture in prisons, and a multi-disciplinary approach to caring for vulnerable prisoners, that is important in creating a safe environment. This was echoed in the recent report of our Parliamentary Human Rights Committee on deaths in custody. In a recent inspection of the newest women's prison, Bronzefield, it was clear that a more appropriate physical environment and the supportive staff culture that was aimed for were key components of a safer custody strategy for dealing with some extremely damaged and self-harming women.
- 2.27 An approach that stresses interaction, and attempts to deal with the root causes of self-harm and suicide, must be the right one. There are some examples of good practice. In one prison we have seen how effective one-to-one counselling can be particularly for survivors of abuse: and in the same prison, the self-worth of women who had repeatedly self-harmed by cutting was greatly increased by sessions with a make-up specialist who had developed camouflage techniques for use on war victims, which disguised heavily scarred arms.
- 2.28 Preserving life must go together with respect for the human dignity of those imprisoned. If the aim is solely to prevent suicides, we can do that by using, or abusing, the power we have over prisoners and detainees. I saw an example of that in Riker's Island in New York earlier this month. They had not had a suicide there since 2003, and then only one. But every time a

woman self-harmed, she was placed into a mental health wing, on a dormitory where she was constantly watched: not interacted with; though the mental health team saw her regularly. If she persisted, she was moved to another dormitory in strip-clothing: a quilted 'suicide suit'; again constantly watched by prison guards. This, it was said, also discouraged others from 'acting out'. If nothing got better, after 12 days she was sent to the secure ward of a hospital for treatment. It is possible that this 'treatment' helped. But more likely the fundamental causes of distress, previously masked by illicit drugs, were now masked by prescription drugs and tear-proof clothing. The prison authorities had made sure that women did not kill themselves on their watch: what they did afterwards – whether that was to return to the comfort of heroin, or to complete a suicide attempt – was not their problem. I have seen a couple of prisons and detention centres in England where 'not on my watch' rather than engagement was the prime concern. There is and must be a balance to be struck between the duty of care that a custodial setting acquires, and the individual's right to respect for her own person and dignity. Striking that balance, without succumbing to the emotional strain, or switching off, is a hard one in our prisons.

- 2.29 The issue of safe and respectful environments for women and girls is also about the placing, size and kind of establishments where they are held. Establishments that hold women by and large need to be less secure than those for men; they also need to be more permeable – to allow and encourage family contact and good parenting. And ideally they need to be smaller and closer to home. We have seen developments in both good and bad directions. First, the explosion in the women's prison population created a crisis response: building two more large prisons for women (holding 450 and 360) rather than planning the smaller, less secure units that government and non-government research showed were needed. It also led to the swift re-rolling of two men's prisons to hold women – without proper planning, staff training, or putting in place the relevant support systems.
- 2.30 However, there have recently been more interesting developments. First, the notion of intermittent custody is being piloted in one women's prison, so that women can retain home and family links while serving either weekday or weekend prison. However, the number of women who have been sentenced in this way is tiny: 94 in two years; and it does raise the prior question of whether women who can be allowed out all week or all weekend need to be in prison at all.
- 2.31 Second, we have begun to build small, dedicated units for girls, with a multi-disciplinary staff complement. Third, £9.15 million has recently been allocated towards 'radical new approaches to help reduce women's offending'. This will involve setting up community supervision and support centres, modelled on pathfinder community resource centres in operation in Hereford and Glasgow, where women can access help and support for problems such as substance abuse, mental health, housing, childcare and domestic violence. These are as yet small and unevaluated initiatives. But they are moving in the right direction – as long as they are not again blown off course by a new surge in numbers, a requirement for instant results, or a change of political or resource priority – and provided that they do not simply widen the net, to take in women who would previously have been considered suitable for community sentences alone.
- 2.32 Under our test of respect, we also look at the relationships and environment in a prison. Relationships between staff and prisoners are usually better in women's prisons than in men's: indeed often we will find women excusing the lack of proper facilities and over-identifying with the problems of staff: the Stockholm syndrome. Sometimes that involvement can get in the way of change: with staff who are so emotionally drained that they cease to be able to see beyond the distress of the women and focus on the systems they need to create to make a difference. Over-familiarity carries other risks: we have a particular aversion to women in

prison being called 'girls' by prison staff who have a relationship of power over them; and the risk of sexual abuse by male staff with power over women who are both needy and vulnerable is always present, and has been evident in at least two prisons in the UK lately.

2.33 We are also highly critical of prisons where women are locked up without integral sanitation, and have to use unreliable electronic unlocking devices if they wish to use the lavatory at night. In one prison, we found a heavily pregnant woman being regularly sick into a bucket; in another, women were reduced to throwing 'pooh parcels' out of their cell windows – and one of the jobs set for newly arriving girls was to go out and retrieve them. Such systems, where women may be released on to locked-down units in order to use sanitary facilities, also have implications for safety: allowing unobserved bullying and preventing staff access to at-risk prisoners.

2.34 Losing responsibility and choice over environment, food and clothing has particular resonance for women: in inspections of our largest women's prison, Holloway, we have continued to find unacceptable standards of cleanliness, vermin infestation and rubbish.

We found serious infestations of mice, pigeons and insects, filthy toilets – most of which had no seats or lids. We were shown some rooms that staff thought were ready to occupy which were unacceptably dirty. There were serious problems with prisoners' lack of access to cleaning materials. Many prisoners used sanitary towels stuck to the toilet as a seat, and some stuck sanitary towels to the bottom of their door to keep out mice or used them to fill gaps in windows.

2.35 We also look specifically at the experience of black and minority ethnic prisoners. In all the questions in our survey, which, except for one, are race-neutral, we find that the responses from black and minority ethnic prisoners, throughout the prison estate, are more negative than those from white prisoners. This is also true of women, around 30% of whom are from black or minority ethnic backgrounds. Black and minority ethnic women were less likely to report feeling safe, or well treated on their arrival in prison; they were also much more likely to report being victimised by staff (29% of them asserted this), or by other prisoners (18% said this). The same significant differences occur when comparing the survey results for foreign national prisoners with those for British women.

2.36 Our third test is the availability of sufficient purposeful activity. We find that women in prison like to be active: at least, once they have come through detoxification. Inactivity for all prisoners feeds depression and anxiety; this is particularly true for women. I remember one prison where women talked movingly about the physical release they felt when the door opened and there was something, however menial, to do. But that is not enough.

2.37 The majority of prisoners in our prisons in general have avoided, or been avoided by, education for most of their lives – around 70% have not reached the basic standards of literacy and numeracy that would make them employable. Nearly half of the women in prison have been unemployed for the previous five years; and a quarter have been in care and so are likely to have little experience of good parenting. Providing work and parenting skills, education and training, can provide both self-esteem and opportunity. Nevertheless, a study by the Home Office found that only 16% of women in prison had been involved in a job that led to a vocational qualification: 60% of women surveyed did not think that their jobs would assist them on release, mainly because they were too menial.

2.38 There has been a tendency, though, to focus too strongly on employability. This may not be the immediate, or a realistic, goal for women, particularly those with small children. Providing other activities – dance, pottery, cooking, drama – can both provide entry points to more formal

education to those who have spent their lives avoiding it, and provide the self-worth or relaxation that women need to deal with their problematic lives.

- 2.39 Finally, resettlement. This would be much more achievable if women were held closer to home; and if the ties that they had had were not so likely to be broken by imprisonment. One of our regular recommendations is that women's prisons, in particular, should have family liaison officers: able to link in and deal with family concerns, such as care proceedings, or children's welfare. This is the case in the Scottish Prison Service, but not so far in England and Wales. We also look, in all prisons, for opportunities for children and parents to meet in a relaxed and extended session: at our two largest women's prisons, these were suspended for a time, because it was not a priority at a time of staffing shortages. They have since been reinstated, but at Holloway began at 8.30am on a Saturday – and over half the women there came from outside London, some as far as 100 miles away.
- 2.40 There have been some improvements in resettlement provision in our prisons generally: with non-governmental organisations, and some statutory bodies responsible for employment, coming into prisons to provide advice and assistance. An additional £670,000 a year from 2003-4 was allocated specifically to women's prisons to help strengthen housing and advice services. Nevertheless, our reports consistently find that resettlement services are under-developed in most prisons: only around half of the women in our surveys knew who to contact about accommodation or employment; and this dropped to only between a quarter and a third in some local prisons, for remanded and short-sentenced women. And it is particularly important to ensure links with drug workers in the community, to provide immediate support and continued treatment for women in prison.
- 2.41 Women's resettlement needs are also different from men's. They focus on family reunion and therefore housing. The Prison Service recently set a key performance target for prisons on resettlement: requiring them to ensure that a certain number of prisoners went into employment (or rather attended a job interview) on release. This, however, is for many women a secondary consideration. There will now be a target for accommodation. But women's resettlement is not only about practicalities. Women's offending behaviour is much more relationship-based than men's; and there is a need to strengthen positive relationships and give women the capacity to tackle the emotional, abuse and dependency needs that got them into prison in the first place.
- 2.42 There are then some changes, some hopes (particularly around population) and some good practice. But I would end with three important provisos. The first is that we still have a prison system which is primarily geared towards young adult men; it moves only slowly, and inconsistently, to recognise the needs of minorities, including women. The abandonment of a separately managed women's estate will be a test for such a system.
- 2.43 Second, the progress that we have recorded in prisons is most noticeable when outside agencies are able to enter and deliver services in prisons to the same standards as they would outside. Prisons easily become self-referential; and communities readily want to absolve themselves from responsibility for those they have incarcerated. Service delivery from outside breaks down that insularity and shares that responsibility. On both sides, it helps in establishing that these are citizens and people, not just offenders and criminals (not least in naming: some prison staff are still visibly shocked to hear their charges referred to as patients or learners).
- 2.44 Finally, and as a corollary of that, we must not allow improvements in prison to let wider society off the hook. For example, the fact that mental healthcare is improving in prisons does not mean that prisons are the right place for the mentally ill; the fact that education is

increasing does not make them the places to teach our children; the fact that drug treatment is still more readily available in our prisons than in our communities is wrong in principle and in practice. Prisons have become society's 'too difficult' tray. They are not primarily agents of social welfare, though they can provide space for offering support to some of those who have previously been excluded from it.

- 2.45 The paradox of improving the conditions and treatment of women in prisons, while making imprisonment a less attractive option for sentencers, politicians and the public is one that we continually face in our Inspectorate. It is key to finding out what works for women offenders.