



What happens to prisoners in a pandemic?

A thematic review

by HM Inspectorate of Prisons

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Introduction

In April 2020, modelling conducted by HM Prison and Probation Service (HMPPS) and Public Health England (PHE) suggested that over 2,000 prisoners might die as a result of COVID-19 if no action was taken to reduce contact in prisons. This was of serious concern to everyone living and working in prisons and to their families and friends. In response to this threat, severe restrictions on daily life were imposed that had not been seen in prisons in England and Wales for many years. At the time of writing, these restrictions had been largely effective in limiting the spread of COVID-19 in prisons.

This thematic review set out to understand the effects of the COVID-19 restrictions by speaking to women, children and men held in prison. Fieldwork consisted entirely of in-depth interviews with these women, children and men, which took place in autumn 2020 and were completed by early November.

We interviewed prisoners living on standard residential units who had not been able to attend work or education and had typically spent more than 22 hours a day in their cells. We spoke to men, women and children to explore differences in views. We included unconvicted prisoners, sentenced prisoners and some who were due for release.

Prisoners felt that the initial lockdown rules in prisons, imposed at the end of March 2020, were necessary. However, many months after the introduction of these restrictions, most adult prisoners were still locked in their cell for an average of 22.5 hours a day, seven days a week. In our interviews, prisoners questioned the legitimacy and fairness of the continuing regimes.

We have heard suggestions that the restrictions, and a subsequent reduction in recorded violent incidents, have made prisons safer. Clearly, with so little time out of cell prisoners had less opportunity to be violent or fight, but this was not the full picture according to those we interviewed. Prisoners said that violence, intimidation and bullying had not stopped, but had instead taken other forms. The accrual of debt persisted, and some had turned to using drugs as a way of managing their isolation and boredom.

No prisoners wanted a return to the high levels of violence seen in some prisons before the pandemic. However, they did not believe that the answer was simply to lock people away. The challenge for HMPPS is how to manage prisoners' behaviour effectively when restrictions are eventually lifted and find ways to safely give them access to meaningful activity.

As the Chief Inspector, I frequently comment on living conditions in prisons. Cramped cells, often shared by two people, sometimes with an unscreened toilet and poor ventilation, predate the pandemic. The difference now was that prisoners who shared had virtually no privacy, while those in single cells suffered from prolonged isolation and a craving for social interaction. Not having enough time to complete basic daily tasks when they were unlocked added to the pressure and frustration.

During the pandemic, prisoners lacked enough day-to-day interaction and support from other prisoners, staff and their family and friends. However, the introduction of free video calling, and the continuing installation of in-cell phones, were valued by prisoners, and we look forward to seeing their continued rollout once the pandemic subsides.

Some of the main functions of prisons are to rehabilitate, reduce reoffending and help prisoners to build productive and meaningful lives. Opportunities for this work had dramatically reduced due to the restrictions and prisoners we spoke to said they would be released without having had help to change their attitudes, thinking and behaviour. It is likely that prisoners who are released with no support to address their offending behaviour and no access to education or work will struggle to cope, potentially leading to further offending and greater strain on public services. We also heard

about the anxiety experienced by unconvicted prisoners, some of whom, including children, had spent longer than a year in prison waiting for their trials.

The most disturbing effect of the restrictions was the decline in prisoners' emotional, psychological and physical well-being. They were chronically bored and exhausted by spending hours locked in their cells. They described being drained, depleted, lacking in purpose and sometimes resigned to their situation. Some said they were using unhealthy coping strategies, including self-harm and drugs, while others reported using mundane routines to pass the time and cope with their confinement and associated anxieties. They frequently compared themselves to caged animals. As one prisoner said:

'It's being imprisoned while you're in prison'.

During my own visits to prisons I have seen the malaise among prisoners that is borne out so strongly in these interviews. In order to lead successful, crime-free lives when they leave custody, prisoners must change the way they feel about themselves and develop a belief that they can take control of their future. In our fieldwork we saw a sense of hopelessness and helplessness becoming engrained.

The cumulative effect of such prolonged and severe restrictions on prisoners' mental health and well-being is profound. The lack of support to reduce reoffending and help prisoners address their risk of serious harm to the public does not fill me with hope for the longer term. Action is needed to maintain the few positives derived from the pandemic, such as video calling, and to make sure that prisons are prepared to restore activity as soon as it is safe. Locking prisoners up in prolonged isolation has never been a feature of a healthy prison.

Charlie Taylor

HM Chief Inspector of Prisons
February 2021

Section 1. Background to the report

- 1.1** Adult prisoners tend to be at greater risk from COVID-19 due to pre-existing poor health. In the last two decades, the proportion of older prisoners has increased significantly. For these reasons, there were, and still are, serious concerns about the spread of the virus in prisons. At the start of the pandemic, modelling conducted by HM Prison and Probation Service (HMPPS) and Public Health England (PHE) suggested that over 2,000 prisoners might die as a result of COVID-19 if no action was taken to reduce contact in prisons. The immediate and decisive steps taken by HMPPS effectively controlled the spread of COVID-19 in prisons in the first six months of the pandemic. Although 26 prisoners died as a result of the virus between March and September 2020, without the actions that were taken the outcome would no doubt have been far worse.
- 1.2** Since the end of March 2020, the majority of prisoners have been locked in their cells for most of the day every day, to minimise the amount of contact they have with others and prevent the spread of COVID-19. At the start of the pandemic, many prisoners spent as little as 45 minutes out of their cells each day. In summer 2020, time out of cell improved for children when some classroom education was reintroduced. But most adult prisoners have been prevented from attending their activities, including workshops and classrooms, and have only been unlocked in small groups to shower, exercise and complete other tasks. At the start of the pandemic, many prisoners spent as little as 45 minutes out of their cells each day. While restrictions were relaxed in the community during the summer, most restrictions remained in prisons, with only minor relaxations or mitigations. Our more recent visits to prisons between July and October found that the average daily amount of time out of cell for adult prisoners was 90 minutes.
- 1.3** Since restrictions were imposed, face-to-face visits from family and friends have either been stopped altogether or restricted. Prison gyms were closed at the end of March for several months. Most gradually reopened before further restrictions forced them to close again. When the weather was good, PE staff sometimes offered outdoor exercise sessions. Libraries were closed, often replaced by a smaller selection of books on each wing. Religious services stopped. Many health care services were suspended or severely limited at the start of the pandemic and a full service has often not resumed in adult prisons. Work to assist prisoners' rehabilitation was typically suspended and has yet to resume fully. Agencies providing services such as family engagement and release planning typically stopped coming into prisons and provision has been slow to return.
- 1.4** To place the current restrictions in context, even before the pandemic most prisons did not meet our expectation that prisoners should have 10 hours out of their cells on weekdays. For example, in our most recent annual report, we described how a third of men were locked up during the working day at local prisons where prisoners were brought directly from court. Although time out of cell was somewhat better at prisons where prisoners were supposed to work, learn and complete rehabilitation courses, less than a quarter said that they received 10 hours a day out of their cells.
- 1.5** Despite some poor outcomes for prisoners before the pandemic, there has never been a time in recent history when the entire prison population had such little time unlocked. The current scale of restrictions on prisoners' lives is unprecedented and the effects on prisoners are unclear. We therefore established this thematic review with the aim of examining how such prolonged periods of time locked in cell have affected individual prisoners, and to outline prisoners' experiences of the COVID-19 restrictions in their own words.
- 1.6** This report draws on in-depth interviews with 72 prisoners (men, women and children) across six prisons about their experiences of the prolonged restrictions implemented as a

result of the COVID-19 pandemic. We selected a variety of prisons and prisoners to make sure we included a broad range of different views and experiences. We took a qualitative approach as it gave us the opportunity to explore in detail the individual lived experiences of prisoners during the pandemic. It also allowed prisoners to tell us their own stories, in their own words. See Appendix I for more information on the methodology used for this thematic.

Section 2. Findings

2.1 We interviewed men, women and children at six prisons between 30 September and 5 November 2020. Their views, and our findings, are set out under the following themes:

- prisoners' views of the COVID-19 restrictions in prisons
- the effect of the restrictions on daily life in prisons
- how the restrictions affected the support prisoners received
- the effect of the restrictions on prisoners' rehabilitation
- what effect the restrictions had on prisoners' well-being.

Prisoners' views of COVID-19 restrictions in prisons

Prisoners thought that the initial response to protect them from COVID-19 was largely well managed.

2.2 In March 2020, almost all communal activity in prisons stopped. Prisoners were placed in isolation when necessary and the vast majority were locked in their cells almost all day. Prisoners believed that this initial response had been necessary and effective in keeping them safe from COVID-19 at the start of the pandemic. They recognised the seriousness of the situation and largely understood why such severe restrictions had been placed on their time out of cell and activities. This was partly because they understood that the community was subject to similar restrictions. Those in single cells welcomed the protection this gave them, where they sometimes felt better shielded from the pandemic than they might have done in the community.

When restrictions in the community were eased, the amount of time locked in cell no longer felt legitimate or fair.

2.3 Since the end of March 2020, most adult prisoners have had, on average, only 90 minutes out of their cell each day. The sheer length of time locked in their cells without a break was a serious concern for prisoners. One said:

'At the beginning you could put up with it because you had the mental strength... you wonder how much more you can actually tolerate.'

2.4 Prisoners' expectations did not seem overly demanding; they wanted more frequent periods unlocked and some form of purposeful activity to make their daily lives more bearable. Weekends were especially difficult because they often faced a continuous period of up to 30 hours in their cell between Friday lunchtime and Saturday afternoon. While this had been a typical feature of life in many prisons before the emergence of COVID-19, adult prisoners no longer had any work or education during the rest of the week to offset the worst effects of such extended periods in their cells. By autumn 2020, prisoners had seen the relaxation of restrictions in the community and were questioning the legitimacy of ongoing restrictions in prisons. One woman remarked:

'When it got good outside, it didn't change in here.'

2.5 Prisons for women tend to be smaller and hold fewer people. Because of this, women we spoke to felt that they could have been offered more time out of cell for work, education or exercising which, in their view, could be delivered safely without increasing the risk of infection. They thought that this would be a reasonable step, given that the main risk of

transmission lay with the staff who came into the prison from the community each day. They had also seen that restrictions in the community had been relaxed, with people returning to work and education, and able to undertake other daily activities.

- 2.6** Women did not feel that they had been given a clear plan for increasing their amount of time out of cell. It was important to them that prisons achieved a better balance between providing fulfilling daily routines and managing the risks presented by COVID-19. Much of their very limited time out of cell was spent walking round the exercise yard. This was a far less appealing prospect as winter approached and the idea of Christmas under the same restrictions worried them greatly. One woman told us:

‘Every day, with the 23 hours behind the door, it’s still a lot, I just think we need to find a way around it because in my point of view this virus is not going to go away that easily, we’re probably going to live with it for years to come.’

- 2.7** Men voiced their frustration that small improvements to their daily lives, such as being able to order and receive CDs to listen to during the long periods in cell, would sometimes be suggested by prison staff, but then not implemented. Children were less frustrated with the restrictions, having benefited from the return of part-time education in July 2020, which gave them about five hours out of their cells each day.
- 2.8** Prisoners, particularly women, had begun to regard the amount of time locked in their cells as a punishment. Some suggested that some staff might be starting to see locking prisoners up for such extended periods as normal, even preferable, practice. This perception was compounded by a view among some prisoners that staff found the restricted daily routines easier to deliver.
- 2.9** Prisoners also experienced different interpretations of COVID-19 restrictions when they transferred from one prison to another, which confused them. For example, the ban on any physical contact during visits from family and friends to prevent infection was not implemented consistently at all prisons.
- 2.10** Prisoners living on enhanced units because of their good behaviour before the pandemic were sometimes allowed out of their cells for longer. Prisoners on other units resented this differential treatment. They were frustrated that their limited time out of cell prevented them from demonstrating good behaviour and gaining these additional privileges.
- 2.11** Allocation to the few prison jobs that remained during the pandemic was seen as unfair. Prisoners suggested that the same small group of their peers was being allowed to monopolise the very limited number of wing cleaning or kitchen jobs. This was resented especially because the few prisoners with jobs typically had far longer out of their cells to socialise and undertake basic daily tasks, and they received more money than the rest of the population, who relied on a basic weekly income. Prisoners wanted the small amount of work available to be spread more fairly across the population, so more people got at least some additional time out of cell.

Day-to-day safety measures to protect prisoners from COVID-19 were inadequate.

- 2.12** Adult prisoners felt very strongly that staff were the main transmission risk of COVID-19 within the prison as they came into work from the community each day. Prisoners were clear that social distancing was not consistently applied by staff, and they gave examples of them frequently gathering in wing offices. Prisoners also recognised that they themselves frequently failed to maintain a safe distance from staff or each other.
- 2.13** Prisoners believed that staff should have been required to wear face coverings from the outset, rather than from October 2020, seven months after the restrictions started. When

we conducted our final interviews in early November, prisoners expressed considerable annoyance that some staff were still unwilling to wear the face coverings. One prisoner told us:

'The virus... I don't feel safe at all because the only way we can catch it is if these officers bring it in to us. They are sat in the office together with no masks on. They are walking round the wing with their masks hanging off their belt...'

- 2.14** Adult prisoners were each issued with two washable face coverings in October 2020, but they felt that this had also taken too long. Adult prisoners wanted more opportunities to protect themselves from the virus, for example supplies of hand sanitiser, the chance to shield or a move to a single cell if they shared. None of these were readily available to most prisoners. Sharing a cell at close quarters with another person had caused some prisoners to become very anxious about the risk of infection.

Case study 1

B had been recalled to prison in February 2020. After his arrival, he described sharing a cell with a succession of nine different cellmates during the period when the pandemic started and restrictions were introduced. He told us how anxious it made him feel to share his cell with so many different people in a short space of time, before later being allocated a single cell. 'I was getting padmates, if they just sneezed, my paranoia would be like, what have you got? If they'd cough I'd think they'd got something, do you know what I mean? ... you're getting people who are in here and out, sniffing and coughing, in, out, on the street and it got to a stage when I was getting angry about it... At the same time, I'm watching on the news MPs and all that talking about if we don't get a grip of this thing it could rise in prisons and ethnic minorities are more susceptible to it, I'm seeing all this going on at the same time thinking well bloody hell... I'm in a double cell, I've had nine padmates, do you know what I mean, what if I catch something, do you know what I mean, what's going to happen to me, am I going to get ill?'

Prisoners did not have enough information about protective measures to feel safe.

- 2.15** Prisoners sometimes wanted to know more about the prison's decision-making to help them both understand the level of threat and feel safer. For example, they wanted to know how many prisoners were testing positive for COVID-19 each week and whether staff were being regularly tested. Some also wondered whether the sudden introduction of face coverings for staff and prisoners seven months into restrictions indicated an increase in the level of risk they faced. Without this understanding, they lacked confidence in the measures designed to protect them.
- 2.16** Some prisoners had other concerns about the way in which COVID-19 could be spread and lacked faith in some prison systems. They were anxious about the integrity of the quarantining process for new arrivals from court and transfers in from other prisons. They also worried about staff spreading COVID-19 when they moved from cell to cell to perform routine security checks.
- 2.17** There were other challenges for prisoners seeking information and reassurance about COVID-19. It was more challenging for those who had difficulties reading or writing, or who spoke little English, to keep up to date with developments (see case study 2). They had the same, very limited, time out of cell as the rest of the population and found themselves using up time intended for exercise and showers to gather information from staff.

Case study 2

C arrived in a men's training prison in July 2020. He could not read or write. He had to use some of his very limited time out of cell queuing to ask staff for help completing applications. He told us that this meant he sometimes didn't have time for a shower. His ability to keep busy while locked in his cell was very limited because books, newsletters and in-cell distraction packs were of little use to him. He smoked Spice (a banned psychoactive substance, see Glossary of terms) to pass the time.

The effect of COVID-19 restrictions on daily life in prisons**Violence, bullying and intimidation had not gone away, but manifested differently.**

- 2.18** With very limited movement around the prison and little time out of cell, there was less opportunity for prisoners to physically assault each other. Since the end of March, except for a small minority working in jobs such as cleaning or food preparation, prisoners had been unlocked in the same small groups. The vast majority had not left their wings to go to work, education or other activities. One child commented:

'We've killed two birds with one stone here because the violence has almost completely stopped.'

- 2.19** Prisoners noted that the environment generally felt calmer. Children, in particular, thought that being unlocked in smaller groups had been effective. Women, who had previously endured bullying when they attended activities and moved around the prison, expressed relief at the protection created by such restrictive daily routines. They thought that violence and bullying had not been dealt with effectively by staff before the pandemic and they therefore welcomed the time spent away from other prisoners in their cell. They were positive about the constant presence of staff while they were unlocked. They also appreciated the end of unstructured association periods on wings which they said had usually resulted in tensions and arguments.

Case study 3

D had been in her current prison for almost a year before the pandemic. Prior to COVID-19 restrictions, she said she had been constantly bullied by women from other wings on her way to collect medication, in the kitchens and at classes. She was 'glad' she no longer had to go to work and education because it had been 'like being back in the school playground'. She said that staff had not picked up on this bullying and it had been an uncomfortable environment for her. She told us: 'They made my life a living hell in the kitchens... every day in the kitchens was terrible, it was horrible.' She currently felt much safer because, 'wherever we go there's an officer with us.' She wanted to eventually go back to education but was worried that her bullies would not be dealt with. She had 'severe anxiety' about education restarting.

- 2.20** However, some prisoners felt that any recorded reduction in violence was probably artificial and temporary because it had only been achieved due to the amount of time they were locked in their cells. They believed the current restrictions could not last indefinitely and were therefore worried about a future resurgence in physical assaults. Prisoners wanted fulfilling daily lives which included meaningful activity but were also free of the previously high levels of violence.

- 2.21** Children were concerned that the lack of opportunities to mix with their peers was preventing them from developing coping skills that would help them to manage conflict when they moved to an adult prison or were released into the community. One commented:

'... you're not developing those social skills, and you're not developing those skills how to interact with different sorts of people... If you go to the adult estate you don't know how to deal with somebody who's volatile, and you don't know how to... stay out of their way... The point of a young offenders' institute for young people is to ready them for the adult estate.'

- 2.22** Although they said they saw fewer incidents of violence, prisoners continued to feel unsafe. For example, women had started to see more tension, anger and behavioural problems emerge as restrictions had continued. The level of boredom and the empty days had led to some women scrutinising the behaviour of others and picking on them as a way of passing the time. The lack of any other distraction amplified trivial, minor incidents that would otherwise have quickly passed without comment. One woman told us:

'Everything becomes microscopic under lockdown.'

- 2.23** Men described grudges brewing behind their cell doors. When prisoners were eventually unlocked for short periods, they said violence would often occur out of the sight of staff, in shower areas or in cells. Sometimes violence would still take place in front of staff, as prisoners seized what might be their only opportunity to encounter and attack their victim. Men also reported heightened aggression towards staff. They described other prisoners taking out their frustrations on staff when they were eventually unlocked after prolonged periods locked in their cells. Children similarly described violence starting to take place in different locations, typically classrooms. This violence, though less frequent, was sometimes more extreme.

- 2.24** Children also reported an increase in the levels of verbal abuse and intimidation at cell doors during the day and from windows and across landings at night-time. Although this type of bullying has always been common in children's prisons, the sheer length of time children were alone in their cells listening to threats meant that the effect on them was more pronounced. Those making the threats felt at liberty to escalate their abuse because they were unlikely to ever be unlocked at the same time as their victim during the current restrictions. One child explained:

'... it gets you mad, verbal non-stop every single day and every single night. If someone verbals me I get mad easy, so just sitting in my pad sweating.'

- 2.25** Another told us:

'Being in your pad all the time makes you hyper... it makes you think so much. The verbal makes me paranoid.'

- 2.26** On a more positive note, children told us how their larger concerns about COVID-19 had put petty disagreements with each other into perspective. This had prompted some children to find ways to get along with each other. One child told us:

'Since COVID, a lot of people have basically shook hands, said let's lock all this off, all the beef, all the drama, so a lot of people have been sorting out their problems on their own.'

Drug use and debts were still a problem.

- 2.27** Some prisoners had turned to using drugs as a means of managing the isolation and boredom caused by long periods of time locked behind their cell doors (see paragraph 2.83). Adult prisoners were clear that illicit drugs had continued to come into prisons, albeit in more

limited quantities. They noted that the reduced availability of drugs since March 2020 had driven up demand and increased the prices, which in turn increased the risk of prisoners getting into greater debt. Prisoners also expressed concern about the safety of those using drugs while locked in their cells, as the opportunities for fellow prisoners and staff to check on their well-being were greatly reduced.

Daily life was extremely limited and spent almost entirely locked in a cell.

2.28 In normal circumstances, prisoners have time out of their cell each day to attend a range of activities, including work, education, rehabilitative courses, the chapel, the gym and library. Since March 2020, these activities had almost all stopped. Time out of cell was typically limited to as little as 45 minutes a day at the start of the pandemic. When HM Inspectorate of Prisons (HMI Prisons) conducted scrutiny visits in prisons between July and October 2020, we found that adult prisoners were unlocked from their cells for, on average, 90 minutes each day, though in some cases it was even less. Children were getting about five hours a day out of their cells after part-time education resumed.

2.29 Our previously published paper on living conditions (HMI Prisons 2017, *Life in prison: Living conditions*) found that some cells were as small as 6.5 metres squared and could be ‘doubled up’, so a cell originally designed for one prisoner could hold two. Sharing this confined space could mean sharing a toilet and these were not always screened or covered. Given the small size of some cells, toilets were frequently situated near beds.

2.30 While ‘doubling up’ was common practice in adult prisons before the pandemic, during our interviews prisoners who shared a cell described having little option but to use the toilet in front of each other. One prisoner vividly described how unpleasant this could be:

‘... he’s literally sat shitting in front of me...’

2.31 Eating meals in communal dining areas was common for women and children before the restrictions. However, this had stopped and all the prisoners we interviewed ate their meals in their cells, which they found to be an unpleasant experience. One woman told us:

‘... your room is tiny... and you’re in that room 24/7, you’ve had your dinner in there, you’ve slept in there, you’ve done everything in there, and then... it’s just demotivating, those same four walls, it’s just demotivating...’

2.32 Prisoners in single or shared cells were equally frustrated about their living conditions but for different reasons. For prisoners in single cells, the benefit of having privacy had long since turned into loneliness and isolation and many craved social interaction. For those who shared cells in close proximity with little respite, company and friendship had unsurprisingly started to turn to irritation and disagreements. Some shared with friends or family members, which made it more bearable, but one man told us:

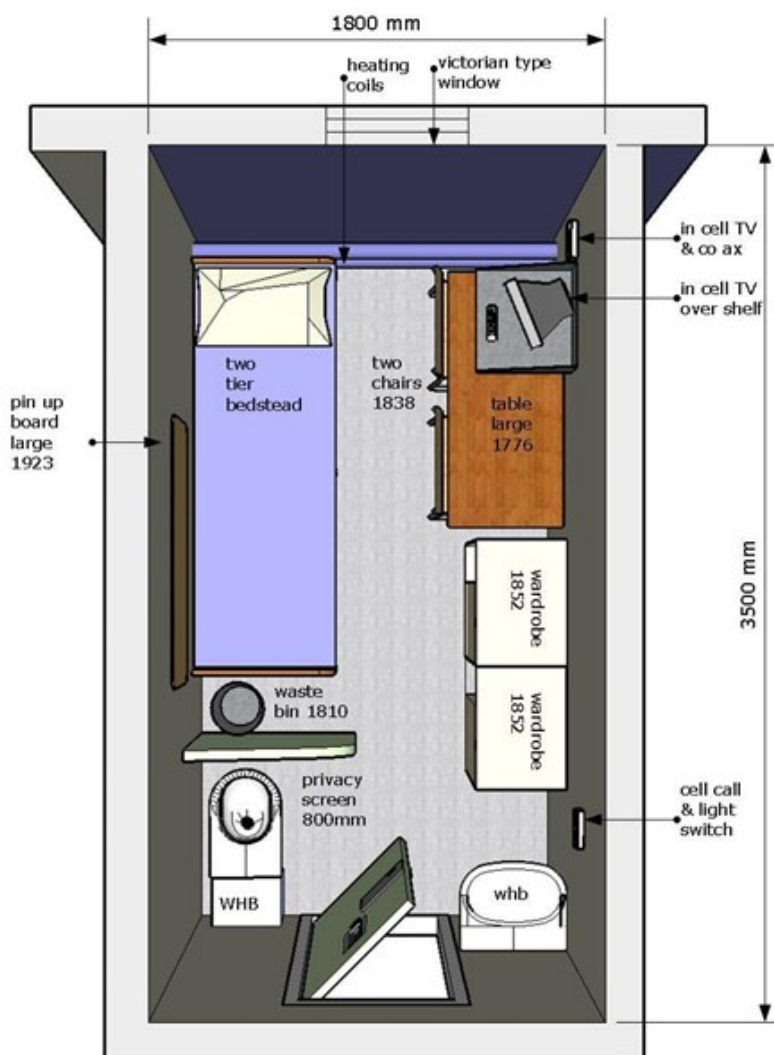
‘You can hate someone for no reason can’t you, being in the cell with them every day.’

2.33 Prisoners had struggled with extremes of heat in their often poorly ventilated cells when locked up for such long periods. This was a particular problem during the heatwave in summer 2020 but was also a challenge when a prison’s heating systems came on for the winter. The high temperatures and the cramped conditions made it difficult to exercise in cells. One woman said:

‘... all the sweat’s dripping off you, it don’t matter what you do, you’re stuck in there sweating... it was unbreathable at times...’

Figure I: Illustration of a 'Victorian type' cell designed for one which can be 'doubled up' to accommodate two prisoners

**Single Occupancy Wet Cell
With Crowding Capability**
Victorian Type : Existing Build
Max. Capability : Two
Approx. Flr. Area
6.5 msq



PSI 17/2012 Certified Prisoner Accommodation. Available at: <https://www.justice.gov.uk/downloads/offenders/psipso/psi-2012/psi-17-2012-certified-prisoner-accommodation.doc>

It was difficult to complete essential daily chores.

- 2.34** Time spent out of cell for adult prisoners was often rushed and stressful. In most adult prisons, the 90 minutes which prisoners had unlocked was divided into two sessions. One was dedicated to time in the open air on the exercise yard. This meant that adult prisoners often only had 45 minutes to shower, clean their cells, submit meal choices, place orders from the prison shop, post complaints and send requests for help to prison departments and, for some, use the communal phones. There was often not enough time to get all these jobs done and prisoners sometimes had to prioritise, for example, either queuing for the communal phones or taking a shower. One man described being unable to easily clean his cell because the mop and bucket was only available to him during his short time unlocked. Instead, he ordered wet wipes from the prison shop to clean his cell floor while he was locked up.
- 2.35** There was less pressure for children to get essential tasks done, because there were more staff on the residential units to help and children generally had more time unlocked to speak to them.

- 2.36** For prisoners with in-cell phones and showers, time out of cell was much less pressured as they could take a shower or make phone calls while locked in their cells. However, having these facilities in-cell sometimes reduced their chances for social interaction, because there were fewer reasons for them to be unlocked.
- 2.37** Some prisoners reported receiving unofficial punishments from staff if they took too long completing their daily chores. These typically consisted of depriving prisoners of a shower or their exercise period for the next day. One prisoner told us:
- '... depends if you do something wrong... I mean, if you wind the screws up, if you don't bang up on time, you stay too long in the shower, you do something on the yard, just little things... they'd just take your regime and exercise off you... the day after... you'd just get bang up all day.'*
- 2.38** Prisoners experienced frustration with some of the basic prison processes. For example, they did not understand why the range of goods available to order from the shop had reduced during the pandemic, and they reported having less money to spend on weekly orders since their full-time jobs had been taken away.

Getting to see health care was difficult.

- 2.39** Prisoners tend to have a greater need for health care services than the general population. During the pandemic, many health care services were reduced to emergency access only, and providers such as dentists and opticians were unavailable for months. Services were gradually being reintroduced but had not yet returned to normal. Prisoners said they could not easily get health care appointments, faced long waits for advice and treatment and struggled to make sure officers could escort them to the health care centre. They said they were sometimes left in considerable discomfort and this was exacerbated by the long periods locked up without distractions. They also reported delays in getting outside hospital appointments.

Case study 4

E was in prison for the first time. She had experienced severe difficulties accessing health care. She was in chronic pain caused by spinal problems. It had taken eight months for her to see a physiotherapist. Her poor eyesight meant that she was unable to read and she had not been able to get an appointment with an optician. She suffered from acute pain caused by a dental cavity and was also unable to see the dentist. She described 'feeling really, really isolated'.

The effect of COVID-19 restrictions on support for prisoners

Initial loss of contact with family and friends was hard.

- 2.40** Strengthening relationships with their family and friends can support prisoners' successful release back into the community and reduce the likelihood of further offending. All face-to-face prison visits were stopped in March 2020 without exception until early July, when they resumed under strict guidelines. In November, visits were stopped again in adult prisons, reflecting the second 'lockdown' in the community. Prisoners found the lack of visits from their families for months at a time difficult to cope with. One child told us:

'But now there's no visits, it is tough to be honest – like not seeing your mum, your dad, your brothers, your friends, it is hard, but this is not forever, I mean like it's not forever... [he misses] little

things, hugging and speaking to them, holding hands when I'm talking to them, you know, little things like... a lot of things to be honest... My mum's got a lot of things going on, she's getting on now – I'm always thinking about her – I'm always ringing her telling her, ah take your medication... I always used to do stuff for my mum... it is tough... [but] it's not forever, it's temporary...'

When face-to-face visits restarted, they were very different and proved unpopular.

2.41 When social visits restarted, they were very different. Prisoners found the overall experience unsatisfactory and take up was low. Some were concerned about their family members travelling long distances during the pandemic and had asked them not to take the risk. The number of visits a prisoner could have each month had been reduced because social distancing limited the number of people who could be in the visits hall at the same time. The length of visits was usually shortened. The number of visitors was restricted and they had to come from the same household. This presented prisoners with difficult choices when their children lived in separate homes. Visitors could no longer buy refreshments for themselves or the person they were visiting, toys to occupy children had been removed and children's play areas were closed. Measures put in place in the community, such as meeting in the open air, were not available.

2.42 Visitors were required to stay two metres away from prisoners and wear face coverings, which made communication difficult. They were also banned from hugging, kissing and shaking hands with the prisoner. Prisoners described how difficult it was not to hug their child or parent at the start or end of visits. Some told us that they were unlikely to ask for another visit because the ban on physical contact had confused and upset their children. One woman told us:

'After seeing him in July [her first face-to-face visit with her three-year-old son after in-person visits had restarted] it was hurtful... it was actually really hurtful, it was really bad man, because he's only three, he doesn't understand what's going on, he doesn't understand why, he just kept on asking, 'Can I touch mummy? Can I touch mummy? Can I give mummy a kiss? Can I give mummy a hug?' And to say 'no' to your child... it's heart-breaking. Because he doesn't understand and then he's just going to start acting up, because that's how he expresses himself, they don't know how to talk at that age, they just act up, so it was hard, it was heart-breaking. So I don't think I'll even let him come back up during this lockdown... It felt like, I don't know if this is the right word, but like neglect... like I can't even touch him, do you know what I mean, to say no to him when you haven't seen him for so long, he hasn't hugged me, kissed me, nothing. It's a lot... and not just for me, for him.'

Video calling was a welcome addition.

2.43 Some months into restrictions, free monthly video calls for prisoners were introduced. Overall, prisoners were pleased to have this form of contact and those whose families lived a long way from the prison found video calls to be a particular asset. However, the entitlement to just one 30-minute call a month at some prisons was not sufficient. Prisoners reported frequent technical problems, such as the picture repeatedly freezing, which caused considerable frustration. Prisoners also reported their family members having problems registering to use the service. Despite these issues, prisoners were very keen that prisons should retain video calling once the pandemic subsided. For some, it was the first time in years that they had seen their mother or father sitting in their living room. One woman told us:

'... it's nice really, you get to see home.'

Case study 5

Before the pandemic, F received regular visits from her two children who lived in a foster placement. Because her children had to be brought in by their social worker, and this involved two different households, a face-to-face visit was not possible under COVID-19 restrictions. Video calling was also problematic because her son had attention deficit hyperactivity disorder (ADHD), which meant that he tended to move and fidget constantly. This caused the video call to repeatedly freeze and the call would become impractical. She was due to be released in early 2021. She told us: ‘... when I get out it’ll be 10 months since I’ve seen them, it’s crazy.’

In-cell phones made it much easier to stay in touch with family and friends.

- 2.44** During the pandemic, prisoners primarily relied on phone calls to stay in touch with their family and friends. Each adult prisoner was given an extra £5 per week to spend on phone calls and the cost of calls was reduced. Children received a further, additional allowance. Prisoners were positive about these measures and said they were vital for maintaining family contact.
- 2.45** In-cell phones had been introduced in some prisons before the pandemic. Where prisoners had this facility, they were extremely positive about it. They could make longer phone calls to more people at a time when their friend or relative would be at home. This helped them to endure the long periods locked in their cells.
- 2.46** In prisons without in-cell phones, prisoners often spent much of their very limited time out of cell queuing to use communal phones, which sometimes left them with little or no time to shower or take outside exercise on the yard. In some of these prisons, prisoners could ask to use specially adapted secure mobile phones. When access to these phones was adequate and reliable, prisoners talked positively about them. However, these phones were sometimes missing or damaged and, in some prisons, did not work well due to poor signals.

Family support work had been limited for a long time.

- 2.47** In normal times, most prisons provide family support workers to help prisoners build better relationships with their families, which has the potential to reduce the likelihood of further offending on release. However, many family support workers had stopped going into prisons during the pandemic. Their prolonged absence had limited the support prisoners could access to help maintain ties with their families. When we conducted our interviews in the autumn, some limited family support work had restarted, but it was by no means back to full provision. This was especially difficult for parents who already had little contact with their children. They missed the advice and support they used to get. One woman explained:

‘Although I don’t speak to my daughter I used to get regular updates through the social worker and I couldn’t have that for quite a long time because the PACT people [family engagement workers, see Glossary of terms] weren’t coming in. That was hard to not be able to find out any information about my daughter... it was all very third, fourth-hand information I was getting, and I wasn’t able to get the answers I needed as to where she was, what had happened... so it’s been quite a hard time because although I didn’t have much in the way of contact I knew that the social worker was only at the other end of the phone... but with them [the child’s social worker] not being at their offices either I couldn’t get through at all... in the last month, month and a half my OMU [offender management unit] worker has been helping me out with making phone calls to the social worker but yeah the first three or four months were very difficult... I just felt like I’d lost her [my daughter] even more than I already had, I was just crying all the time... crying and sleeping, hurting myself, eating too much, watching too much telly, just not dealing with it in the proper way.’

Getting support from other prisoners and staff was more difficult.

- 2.48** COVID-19 restrictions had limited the support that prisoners received from the point of arrival onwards. Prisoners arriving during the pandemic, particularly those who had not been to custody before, felt shocked and confused. They sometimes lacked enough information about what to expect from daily life and were concerned about the risk of catching COVID-19. Induction processes had been limited severely and prisoners often relied on other prisoners for information about daily life, processes like using kiosks or who to approach for advice. Interpreters were not always used when non-English speakers arrived, so they had even less information about prison life during the pandemic.
- 2.49** The COVID-19 restrictions had significantly affected prisoners' ability to access support from their peers on a day-to-day basis. They had little opportunity to make friends and social activity was often restricted to the exercise yard. Prisoners missed existing, supportive friends from other landings and wings who were now unlocked in different groups and who they no longer saw in workshops or classrooms. Women especially missed easy access to peer support workers who could offer advice and guidance when they were feeling low. Some prisoners craved companionship and the opportunity to hold everyday conversations. Children missed the developmental opportunities provided by social interaction. One said:
- 'When I'm mixing with a lot of people I feel like I'm getting educated... I'd love for it to happen again.'*
- 2.50** Some prisoners, however, did not miss socialising with others and largely preferred to keep to themselves. There were several reasons for this. Sometimes these prisoners had been at the prison for a long time already and had existing support networks. Some relied on their cellmate for friendship. Others were due to be released imminently and preferred to focus on this instead of seeking new friends in prison.
- 2.51** Some prisoners described very helpful, supportive staff who went the extra mile to care for and check in on them at difficult times. Others said that because they were unlocked for such short periods, they rarely had a chance to speak to staff in any meaningful way. One prisoner commented:
- 'Basically from day to day, as soon as you wake up in the morning your anxiety is through the roof because you've got no support, you're banged up like 23 hours a day.'*
- 2.52** Prisoners said staff sometimes seemed too stretched to spare the time to stop and chat. They also said many interactions were purely functional as staff made sure that each group completed their daily chores in the short time allotted and the day ran to time. It sometimes seemed to men that staff were primarily interested in locking them away as quickly as possible rather than supporting them. Women were frustrated about the lack of opportunity to receive support from staff. Some said they had felt so distressed that they had considered harming themselves. One prisoner commented:
- 'I never really interact with them, the only time I used to see them was when they let me out for showers or yard, or when they brought food. We never really got to talk to staff.'*
- 2.53** The key worker scheme (see Glossary of terms) was being embedded in most men's prisons before the pandemic. This was intended to provide prisoners with a regular, meaningful weekly session with a dedicated officer who knew their circumstances and could help them progress through their sentence. The sessions were curtailed at the start of the pandemic and later reintroduced in some prisons, but only for a minority of prisoners considered to be most in need, such as those at risk of suicide and self-harm. Consequently, men we spoke to often reported little or no contact with a key worker and described feeling forgotten.

Despite the absence of a formal key worker scheme in women's prisons, women were more positive about being able to have regular contact with a member of staff they knew well.

- 2.54** Some adult prisoners told us that chaplains had been a particularly good source of support, although their ability to see a chaplain of their own faith was limited by the COVID-19 restrictions. Prisoners also missed being able to attend religious services.

Unconvicted prisoners faced additional challenges.

- 2.55** The number of unconvicted prisoners had risen considerably since court hearings and trials were delayed by the pandemic. By the end of September 2020, it was the highest it had been since 2014. Some unconvicted prisoners were frustrated by extended waits for court appearances. We spoke to children who were in custody for the first time and were expecting to spend almost a year waiting for their trial. This was a daunting prospect and felt very unfair to them. The uncertainty they described contrasted starkly with prisoners serving determinate sentences, who repeatedly told us how a release date gave them something positive to work towards. One child explained:

'I am going to be on remand for one year... The delay in my case has been the worst effect of coronavirus.'

- 2.56** To address the delays in court hearings and support infection control, prisoners often appeared from prison by video link. These appearances could be stressful, were sometimes marred by technical issues and were sometimes cancelled altogether. Prisoners sometimes struggled to stay in touch with and brief their solicitors. They had been unable to receive a visit from a legal representative for much of the pandemic and usually contacted them by phone. This was often at their own expense and was much more challenging in prisons without in-cell phones, where the duration of calls was usually capped and some prisoners ran out of time to discuss everything with their solicitor. Other prisoners had struggled to get their solicitor's phone number added to their list of authorised call recipients.

The effect of COVID-19 restrictions on prisoners' rehabilitation

Prisoners could not easily address their offending behaviour.

- 2.57** Rehabilitation is one of the key purposes of imprisonment. Prisoners typically complete courses and activities which are set out in a sentence plan designed to address their offending behaviour. By reaching these goals, they can demonstrate a reduction in their likelihood of reoffending and their risk of serious harm to the public. This allows for progression; for instance, they may be recategorised and allowed to transfer to an open prison for the rest of their sentence, or those requiring the approval of the Parole Board might be released. However, under COVID-19 restrictions most prisoners had lost these opportunities to address their offending behaviour. Although some courses and groups had restarted in the late summer, these were only available to very small numbers of prisoners and waiting lists were growing. The full range of rehabilitative opportunities had not yet been reinstated. Some prisoners had been unable to complete courses designed to address their risk of harm to others before they were released. Others were pleased to have avoided having their attitudes challenged. Prisoners described the effects of not having the chance to learn and demonstrate improved attitudes and behaviour. One said:

'... there's no progression, it's just counting the days...'

2.58 The reality of being locked in their cell for most of the day prevented prisoners from demonstrating good behaviour to staff. Without time spent in classrooms or workshops, or a job on the wings, they recognised that there was nothing for staff to observe or record about their progress. Without this evidence to inform recommendations and risk assessments, they realised that their chances of being recategorised, transferred to an open prison or released by the Parole Board had reduced. One prisoner told us:

‘... when you’re constantly banged up and there’s nothing to write about you, they’re not seeing you progress...’

2.59 Similarly, children felt that the loss of a full day of activities mixing with other wings left them unable to develop the coping and social skills they needed to mix with larger and different groups of people. The restrictions on interactions with others meant they felt ill-equipped for a return to the community or a move to an adult prison.

2.60 One way for prisoners to demonstrate that they can be trusted and their behaviour has improved is to be released on temporary licence. Subject to risk assessment, prisoners can take jobs in the community while on day release or visit their families for overnight stays. However, release on temporary licence for these purposes were stopped in March 2020. Prisoners who had been approved for open conditions, where they can typically take full advantage of this scheme, were frustrated by the suspension of transfers between prisons when the pandemic started.

Case study 6

Before the pandemic, G said she had made good progress in achieving her sentence plan goals and had been approved for a move to an open prison to serve the last part of her sentence. She was frustrated that this move had been delayed by several months because of the restrictions. She had planned to use her time in an open prison to find work and somewhere to live on release. Although a transfer was ultimately offered to her, it had come too late in her sentence to allow her to benefit from open conditions before her release. She told us: ‘... I just felt like my world had been turned upside down. I really, really, really had a goal in mind from the beginning of my sentence that I wanted to spend the last two years in open... now that slipped by and I was ok I’ll just do the last year and when I got my re-cat [recategorisation decision] I was absolutely over the moon, and then [her transfer was postponed]... I just felt gutted... I had it in mind that I’d have a job to go out to cos I’m dreading in a way going out because I’ve got nothing to go out to... and I knew that going to open [prison conditions] would give me that bit of help that I needed to build something up.’

2.61 During the pandemic, regular contact between prisoners and their prison offender managers (a member of staff often with a background in probation practice who will motivate and challenge them) had been very restricted or stopped altogether. This limited the amount of progress which prisoners could make with their sentence plan. With so many routes to progression and rehabilitation removed, and support from prison offender managers so limited, prisoners told us that they did not know what they were supposed to do to progress.

The benefits of work, training and education were missed.

2.62 Adult prisoners we spoke to expressed a clear desire to return to purposeful activity. They missed a full daily routine which included work and education, because this made them feel useful and gave them purpose. They missed having something to look forward to each day and the chance to socialise with prisoners from other wings while they worked. Although children had resumed part-time education, they still missed the other parts of their daily lives

which had not been reinstated. However, they said that smaller class sizes under the current restrictions had improved their experience of education.

- 2.63** Prisoners were frustrated to have lost the chance to obtain vocational qualifications, to work towards basic qualifications in English and maths or to study for a degree. Adult prisoners were typically very dissatisfied with the in-cell education packs which had been provided after classroom attendance ended. They described these packs as simplistic, repetitive, unengaging and unchallenging. As a result, prisoners were not motivated to complete them. Overall, prisoners did not feel that they could meaningfully engage in education during the COVID-19 restrictions. As one prisoner put it:

'There's no such thing as education in this prison.'

Release planning was limited.

- 2.64** Prisoners are supposed to have their resettlement needs assessed shortly after arrival in prison. This plan is then reviewed at a face-to-face interview, far enough ahead of release to allow for practical support, such as housing, to be arranged. Since the introduction of COVID-19 restrictions, resettlement staff had mostly stopped coming into prisons or seeing prisoners face-to-face. Adult prisoners were particularly frustrated by the lack of communication, planning and support they were currently receiving from resettlement workers to help them prepare for release. Often, the only contact they received about their release was a paper-based questionnaire or sometimes a phone call. Some prisoners praised the release planning support they had received from alternative sources, such as the prison's chaplaincy or from their offender manager in the community.
- 2.65** The lack of effective resettlement support left prisoners feeling ill-prepared, vulnerable and worried about the practicalities of being released. These anxieties were amplified by the effects of COVID-19 restrictions in the community. They worried that society would seem very different and were concerned about coping with ever-changing restrictions that they did not understand. Prisoners had more questions than usual about their release. They were unsure how they would be able to travel home safely and then obtain essential items such as food, clothes, furniture and bedding. They were concerned whether support was available to help with housing, claiming benefits, paying bills and getting a job, and did not feel that they were getting enough support and advice. One man told us:

'... this COVID thing is out there, I've got no money, no clothes, nowhere to live, no tools, never signed on, dyslexic, suffer from mental health, I don't know how society works... they literally sent me a blank CV and said fill this in... I'm worried to death about it ...'

Case study 7

H had spent most of the last seven years in prison and was due for release in January 2021. He had been sent a questionnaire by resettlement workers which he had completed and returned when we spoke to him in early November 2020. He was already anxious about transitioning from a long prison sentence back into the community, but his worries had been exacerbated by the pandemic and not knowing how society had changed. He wasn't able to visualise how things would be on the outside and how he would cope. He was anxious about what the restrictions would mean for him in terms of being able to reach his accommodation on the day of release, get a haircut, buy clothes, fulfil his license conditions and get a job. All these worries were escalating in his head. He said: '...I really don't know whether I'm coming or going...'

The effect of COVID-19 restrictions on prisoners' well-being

Prisoners struggled to occupy themselves and faced chronic boredom.

2.66 Faced with so many hours locked in their cells, prisoners had tried a variety of ways to cope with their confinement and associated anxieties. Reading was a valued way to make the time go quickly and relieve the monotony. Some prisoners who had never read books before said they had started reading avidly. However, there were often barriers to this activity. For example, nearly all libraries had been closed since the end of March 2020 and prisoners relied on a limited selection of books being brought to wings. Some prisoners needed glasses to read and could not get an appointment with the optician during the pandemic. Non-English speakers could not easily obtain foreign language books. Prisoners who found it hard to read struggled to stay busy.

Case study 8

J, a foreign national prisoner who spoke poor English, was in prison for the first time. He struggled with being locked in his cell for such prolonged periods with little human interaction. These feelings were amplified by the language barrier. His family did not live in the UK and were in poor health and this worried him immensely. He felt alone and unsupported by the prison and spent his days either lying on the bed or sitting in a chair with nothing to do, because all of the activity packs and books were in English. He told us: 'You can't move, my kidneys and my body are hurting because you either have to lie down or sit in the chair for 23 hours, and there is nothing that you can do about it, and plus by staying in the chair seated because the room is so small, being seated and staying in the bed makes my kidneys and body ache, it's quite hard.'

2.67 Prisoners talked about spending their days watching the same television programmes over and over until this became monotonous. Prisoners appreciated listening to the radio but they were frustrated by the limited number of radio stations accessible through their television and they were not always able to obtain a separate radio. Men who were allowed to have their games console from their property relied heavily on them to keep themselves distracted.

2.68 Some prisoners had developed mundane daily routines as a way of managing their feelings. Some listened to the ticking of the clock or counted down the days on the calendar. Others kept rearranging their belongings, delayed putting things into the bin or moved photos around on the wall. One told us:

'... I alternate my time, I lie in bed, sit in my chair, lie in bed, sit in my chair, this is how I pass time, I think time to get up now, then I get stiff sitting on a chair, so I stretch out on my bed, then I get up again and sit in the chair... I don't know what time of day it is or what day it actually is for that matter, praying helps as I do this five times a day but I am guided by meal times to know what time of day it is...'

2.69 While another recalled:

'It was hard... you're in a box aren't you. It's like why don't I sit over there today, alright I'm going to sit on that side of the bed... no I'm going to sit on that side of the bed for a change, you rearrange how your bed linen is... Even now I change my photos into different places... it's just weird and difficult.'

- 2.70** Access to indoor gyms had been stopped at the start of the pandemic. Where facilities had reopened, even in a limited form, children and men particularly valued them. Some children had found in-cell workouts beneficial, but adult prisoners largely found these impractical due to the confines of their cell. Children spent time chatting to other children from their cell windows. Prisoners also mentioned writing, dancing to music to ‘feel human’, singing to themselves, crafting, knitting, colouring-in, drawing and playing cards or dominoes.
- 2.71** Prisoners, especially women, were very clear that they were by now tired of limited and repetitive in-cell activities, especially the distraction packs, quizzes and occasional activities such as bingo provided by prison managers. One woman said:
- ‘... there’s only so many crosswords and word-searches you can do...’*
- 2.72** Another told us:
- ‘You can only do so much in your room, I write a lot. I’m even tired of that and I love writing.’*
- 2.73** Prisoners told us that it was impossible to sustain meaningful in-cell activities for so many months. Their lives felt much too restricted, any distractions provided to them had long since worn thin and they were frustrated and fed up. Women especially missed prison activities which they had previously found relaxing and therapeutic. These included spending time walking and working in the gardens and grounds and, where they had them, looking after the prison’s animals. These gave women a purpose and helped to manage their feelings.
- 2.74** Prisoners described the effect that chronic boredom and inactivity had had on them as they spent most of their daily lives locked in one room. They frequently compared themselves to a caged animal. They felt that their treatment was inhumane. Some prisoners saw no point in getting up in the morning due to the lack of purpose, activity and stimulation. Others dreaded the next day arriving due to the monotony. They described going ‘stir crazy’. They repeatedly referenced the film *Groundhog Day*, in which the main character is forced to endure the same day over and over again every time he wakes up.

Case study 9

K, a child, said that the long periods locked up without activity or stimulation had affected his well-being. The restrictions had been very frustrating for him. He described sleeping for days on end and being unable to move from his bed because he had been there for so long. It made him question his purpose in life. He said: ‘It was like my life had gone to waste, I had nothing to do, absolutely nothing to do - couldn’t run - a feeling I’ve never felt in my life.’ He developed a routine in his cell to help manage but found the boredom difficult to deal with and was craving education. He talked about his efforts to stave off chronic boredom: ‘It felt like I forgot myself, cos I was hardly talking... in my pad for that long I’d end up counting myself to sleep... I’d be that bored... cos I’d been in my pad for that long, I was counting every day, I’d count my toes, I’d count my fingers, I’d count my hands... I’d sit on my bed thinking, why am I counting? It felt like I forgot myself.’ He described having to release his energy when he was eventually unlocked and walking deliberately slowly back to his cell to eke out a few more minutes of time out of cell. He described his experience of restrictions thus far as the worst six months of his life.

Case study 10

L arrived in prison on remand in July 2020. It was his first time in custody. He said he had received little information or support from staff on arrival. He felt very restricted by the size of his cell. He described extreme levels of boredom and isolation. He said: ‘... the only people I see when I’m looking out my window really and see all the comings and goings... you try and make a story up for that person... I suppose it’s just like sitting in a café, oh I wonder who that person is, I wonder what that person does for a living’. He would check at the same time the next day to see if the same people passed by. He craved social interaction: ‘... sometimes you look forward to that door opening, for your food, just so you can speak, even though you’re only saying thank you, you’ve got to make sure that your voice still works haven’t you?’

Deterioration in physical health.

2.75 The sedentary nature of prisoners’ lives during the pandemic had often caused their physical health to deteriorate. Significant weight gain was a common complaint. Some prisoners were very self-conscious about the way they looked and felt this had diminished their self-esteem. One man described his weight gain as ‘embarrassing and depressing’. Throughout the pandemic, prisoners had received free daily snack packs, which often consisted of chocolate, crisps and sweets. Prisoners said that these packs had caused them to put on additional weight and the sugary treats were affecting their dental health. They were frustrated that the packs did not contain healthier alternatives and that their access to health care services such as the dentist had been simultaneously restricted. Overall, their inability to eat well or get enough exercise, and the long-term health implications, really worried them. One woman told us:

‘... since lockdown they’ve actually been giving us more stuff, yeah we get more stuff in the packs... it’s just fatty stuff really like crisps, cereal bars, biscuits, and then you get fruit... but the rest of it is all starch and carbs and fatty stuff really, not a lot of healthy stuff... it’s not going to help with people being in a room 23 hours a day and not exercising, so everyone’s gaining weight... it’s not good for their self-esteem, like there’s a lot of girls who are really upset about their weight.’

Case study 11

M arrived in her current prison shortly after COVID-19 restrictions began. She felt that her mental health was deteriorating because of the amount of time locked in her cell. She said: ‘It’s such a small space... to be in for that period of time every day... it’s being imprisoned while you’re in prison.’ She continued: ‘It’s not humane, the way we’re being treated right now... it’s like an animal sitting in a cage and being mistreated.’ She had particularly struggled in her cell during the hot summer weather. Although staff brought ice lollies, it felt like nobody cared. Her self-esteem had been affected by weight gain. She said that she had put on half a stone during the restrictions due to a combination of inactivity and unhealthy sugary food provided by the prison. She commented: ‘At the time when they were giving out popcorn, it was confusing because I thought it’s conflicting that they’re giving out popcorn and yet people are struggling even to see the dentist.’ She was frustrated that there was not enough space in her cell to exercise. She believed that she and the other prisoners would come out of prison with more mental health issues. She explained that she would have ‘lost it’ without a release date to work towards. She had been counting down the days to going home.

2.76 Prisoners missed the opportunity to keep themselves fit and some reported experiencing neck and back pain. They associated this with long periods of inactivity locked in small cells and the poor quality of in-cell furniture and their mattress. Women also linked their limited time out of cell and the associated stress with worsening health conditions. Some had

developed skin conditions and we were told that conditions such as asthma and epilepsy had worsened.

There was too little mental health support at a time of heightened anxiety.

2.77 The prevalence of mental health problems among the prison population before the pandemic was well-documented. The effect of COVID-19 restrictions on this population had therefore been significant. Prisoners we interviewed described feeling drained, depleted, lacking in purpose and were sometimes resigned to the situation. Some felt their lives were going to waste. They often felt lonely and unsupported. They were frustrated and sometimes angry. They sometimes resented managers, other prisoners and the community. They did not feel hopeful for the future.

2.78 Some prisoners described their low mood. Others had been diagnosed with clinical depression and prescribed antidepressant medication during the pandemic. Some felt that their unprecedented isolation was already causing them psychological damage. Others were concerned for friends who would go for days without coming out of their cell. Some felt that the indefinite duration of restrictions was adversely affecting prisoners' ability to cope. One woman said:

'I just think it's really, really affecting people's mental health now. I think we all sort of, at the beginning of it, I think we all sort of just obviously thought - oh it won't be for that long, it is what it is kind of thing, but we really didn't think it were going to drag out seven months and probably longer...'

2.79 Beyond the length of time locked up in their cells, prisoners told us about the other ways in which COVID-19 restrictions had increased their feelings of anxiety. Quarantining arrangements caused prisoners considerable worries. For new arrivals, this meant spending two weeks in almost total isolation, often without the limited time out of cell available in the rest of the prison. Children described sleeping away these first two weeks, while other prisoners talked to us about the psychological effects of such long periods on their own. Once located in the main prison, clinically vulnerable prisoners who were offered the chance to shield from the virus had sometimes declined these arrangements because their already limited daily lives would have been further diminished, with even less time out of cell and less human contact. For a similar reason, some prisoners had not disclosed COVID-19 symptoms to prison staff because they did not want to endure 14 days isolation in their cell. They were extremely worried about the effect this would have on their mental health.

2.80 Some adult prisoners described general anxiety about the implications for their health of catching COVID-19. With such prolonged periods behind their cell door without distraction, their anxieties had escalated and were reinforced by the news and conversations with their families. They worried about their health while they waited for COVID-19 test results. They wanted to talk to health care staff about their fears but were not able to see them.

2.81 Some prisoners told us that their anxiety was heightened by a lack of control over their daily lives, environment and the measures they could take to protect themselves. Some were unsettled by the changes made to their daily routine as the restrictions were first put in place and later amended. For others, the perception that staff did not really have full control over the situation concerned them. One man told us:

'I do understand like that no one really knows what's going on so everyone is kind of winging it but to see the people who are supposed to be in control not in control is a bit... woah what's going on here?'

2.82 Adult prisoners told us that they had struggled to access mental health services because of the COVID-19 restrictions. Prisoners who had been undergoing individual and group-based

therapy before the pandemic said that their mental health had deteriorated when these services had been abruptly suspended. Inevitably, some prisoners were due to be released into the community without completing their prescribed therapy.

Case study 12

N spoke about his mental health diagnosis and how the COVID-19 restrictions and lack of access to mental health services since March 2020 had made things worse. He said he had panic attacks while locked up. He spent his time pacing up and down his cell. He talked about wishing his life away and spoke vividly about dreading each day arriving due to the monotony and loneliness. Early childhood trauma had left him afraid of being on his own and he was struggling with his emotions. He was unable to sleep and passed the time by scrubbing his cell clean in the early hours of the morning. He struggled to make any friends or get to know staff because of the short time he was allowed out of cell. Before the pandemic, he had attended one-to-one therapy and group therapy with the mental health team. However, since the restrictions began, he said that he had received two phone calls from mental health workers, who had offered him a distraction pack. When we saw him, he was receiving support from staff on his residential unit because he was considered to be at risk of suicide and self-harm.

Unhealthy coping strategies were being used.

- 2.83** The pressure caused by such long periods of isolation had led some prisoners to use unhealthy coping strategies. Women told us that they had started cutting themselves more often during the pandemic as a way of managing increased stress, low mood and anxiety. The removal of the usual coping strategies, such as talking to friends during association periods and regular therapy sessions, had increased some women's distress.

Case study 13

P was in prison for the first time. She spoke of her loneliness and intense frustration with the COVID-19 restrictions. She described the anguish of not being able to see her children. Before the pandemic, she had been receiving therapy from a psychologist, but this had stopped in March 2020. She found the restrictions very difficult and subsequently struggled with her mental health. Although the mental health in-reach team continued to see her, she seriously harmed herself by cutting. She described being 'patched up' and then taken back to her cell where she was once again on her own. She said, 'We are being left behind our doors and it is killing us.' She described her cuts as 'lockdown scars'.

- 2.84** Over-sleeping had become common among prisoners, who no longer had any meaningful structure or routine to mark out the boundaries of their days. Prisoners also used drugs, typically psychoactive substances, to pass the long hours in their cells, relieve the intense boredom and monotony and help them sleep. One prisoner commented:

'I see spice [psychoactive substances] on the wing every day, they're putting themselves to sleep so they can sleep their sentence away.'

Section 3. Conclusion

The cumulative effect of COVID-19 restrictions on prisoners' well-being and rehabilitation was likely to be significant and far-reaching.

- 3.1** Efforts to contain the spread of COVID-19 were initially successful but have come at a heavy cost to prisoners. Most prisoners had spent over 90% of their days behind their cell doors since the end of March 2020, with no end to the restrictions in sight. The restrictions on their daily lives had started to feel unfair and punitive. They told us that intimidation, bullying and violence had not ended during the restrictions but had instead taken different forms. Prisoners' daily lives were almost entirely reduced to their cells and they struggled to fit their daily chores into the very limited amount of time unlocked.
- 3.2** Contact with family and friends had been limited by the pandemic, although in-cell phones and video calling had proven to be positive developments and crucial lifelines for prisoners. The support prisoners could usually get from staff and other prisoners had been adversely affected. Those on remand faced additional anxieties as they waited for up to a year for their trials.
- 3.3** There were no longer opportunities for adult prisoners to attend education classes and very few were involved in work or training. The focus on helping prisoners to address their offending behaviour or reduce their risk of serious harm to others had largely been lost. The prospect of release into a world drastically different as a result of COVID-19 restrictions caused them significant anxiety.
- 3.4** Prisoners were chronically bored and they said that their physical and mental health had often worsened. Some were using unhealthy coping strategies like drugs and self-harm to manage the prolonged periods locked in their cells. There was no doubt that being locked up for over 22 hours every day, without enough stimulation and often without company, was having a profound effect on prisoners' well-being. Although prisoners did not often exhibit acute upset or distress during our interviews, what we found was equally worrying. Their mental and physical health were, sometimes visibly, in decline. They felt drained and depleted. Their despondency, resentment and lack of hope for the future were especially notable.
- 3.5** What prisoners told us calls into question whether the right balance had been achieved between managing the risk posed by COVID-19 and providing them with enough meaningful activity, engagement and time out of cell. Many prisoners feared being released with increased mental health problems and without having had the chance to address their offending behaviour. The long-term consequences of such prolonged and severe restrictions in prisons could be profound for prisoners and the communities to which they ultimately return.

Section 4. Appendices

Appendix I: Methodology

This section provides additional detail on the qualitative methodology used in this thematic review. It covers the selection of the six prisons and 72 prisoners for the fieldwork, along with how the fieldwork was conducted and how the interviews were analysed.

Selecting prisons

Of the prisons selected for fieldwork, three held adult men, two held women and one held children. The sites were selected to ensure a range of different functional types and geographic locations, and included one prison in Wales.

This thematic review focused on prisoners who have experienced prolonged periods locked in their cells under COVID-19 restrictions. For this reason, open prisons were excluded because these prisoners have not been locked in their rooms for such extended periods.

Selecting prisoners

We selected prisoners to make sure that the widest possible range of experiences and views was heard. We achieved this by making sure we included people living in different prison environments, from different demographic groups and who were at different points in their sentences. Across the establishments, we made sure to capture a diversity of experience and characteristics in the following areas:

- Environmental factors: whether the prisoner was in a shared or single cell and whether they had access to in-cell showers and phones or had to rely on communal facilities.
- Sentence-related factors: we included a mix of unconvicted and determinate-sentenced prisoners, and a mix of prisoners who were due to be released within the next eight weeks and those who were not.
- Individual factors: a range of ages and ethnic backgrounds.

Establishments provided this information for all of their current prisoners. HMI Prisons inspectors then selected interviewees to ensure diversity across the factors listed. Our focus was on those prisoners living on typical residential wings who had experienced prolonged restrictions as a result of COVID-19. For this reason, we deliberately excluded any prisoners who were located on segregation or inpatient units. We also excluded the minority of prisoners had been in any regular work since restrictions were imposed in March 2020.

To reduce the risk of COVID-19 transmission we did not interview any prisoners who were shielding, symptomatic or quarantining in the 14-day period following arrival in prison. However, our sample did include prisoners who had previously spent time in each of these environments, so that we could understand these experiences.

Carrying out the fieldwork

Fieldwork was conducted between 30 September and 5 November 2020. In-depth interviews with prisoners were conducted using a topic guide that had two main sections. The first section included a few open questions designed to give prisoners the opportunity to describe their current experiences and the most significant effects of the COVID-19 restrictions.

The second section focused on specific areas of interest and was based on a series of prompts, rather than questions, which covered: arriving in prison, feelings of safety, emotional well-being and support, living in your cell, building relationships with other prisoners, building relationships with staff, getting daily chores done, accessing health care, staying active and keeping busy, staying in touch with children and families, being on remand, getting on with your sentence and getting ready for release.

Taking a qualitative, in-depth approach to the interviews allowed interviewers to follow up in more detail the experiences and concerns that were of greatest importance to each prisoner. As a result, all interviews did not necessarily cover all of the topics listed above. The interview guide was piloted at two establishments in September 2020, resulting in some changes to clarify the topics and refine some of the prompts.

With prisoner consent, interviews were audio-recorded. Having a full audio recording of the interview, rather than relying on interviewer notes, allowed for a more rigorous approach to analysis, and the inclusion of verbatim quotes throughout this report.

This project was conducted according to HMI Prisons' ethical principles for research activities:

<https://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/research/ethical-principles-for-research/>

Particular attention was paid to the well-being of participants throughout the fieldwork process. Interviewers were able to advise prisoners on any support available within the prison where required. Interviewers followed HMI Prisons' safeguarding protocols for adults and children:

<https://www.justiceinspectorates.gov.uk/hmiprisons/wp-content/uploads/sites/4/2019/12/HMIP-Safeguarding-Adults-Protocol-Nov-2019.pdf>

<https://www.justiceinspectorates.gov.uk/hmiprisons/wp-content/uploads/sites/4/2019/12/HMIP-Child-Protection-Protocol-2019-update.pdf>

Interviewers also adhered to HMI Prisons' health and safety guidance to reduce the risk of transmission of COVID-19:

<https://www.justiceinspectorates.gov.uk/hmiprisons/wp-content/uploads/sites/4/2020/10/Scrutiny-visit-health-and-safety-guidance-October-2020.pdf>

Analysis and reporting

Data from individual interviews were summarised to facilitate thematic analysis. Themes were identified both within and across the different types of establishments.

Throughout this report specific phrases or terms used by the interviewees are embedded in the text to show the language used and to convey prisoners' lived experiences. Verbatim quotes and case

studies have also been used to illustrate themes and provide more detailed information on the specific experiences of prisoners during this period. To protect the anonymity of those we spoke to as part of this work, no establishments or prisoners are named.

Appendix II: Contributors and acknowledgements

Contributors

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Appendix III: Glossary of terms

We try to make our reports as clear as possible, and this short glossary should help to explain some of the specialist terms you may find. If you need an explanation of any other terms, please see the longer glossary in our ‘Guide for writing inspection reports’, available on our website at: <http://www.justiceinspectorates.gov.uk/hmiprison/about-our-inspections/>

HM Prison and Probation Service (HMPPS)

HMPPS carries out sentences given by the courts, in custody and the community. Within England and Wales, it is responsible for: running prison and probation services; providing rehabilitation services for people leaving prison; making sure support is available to stop people reoffending; and contract managing private sector prisons and services.

Key worker scheme

The key worker scheme operates across the closed male estate and is one element of the Offender Management in Custody (OMiC) model. All prison officers have a caseload of around six prisoners. The aim is to enable staff to develop constructive, motivational relationships with prisoners, which can support and encourage them to work towards positive rehabilitative goals.

Pact (Prison Advice and Care Trust)

Pact is a national charity that supports prisoners and their families. See: <https://www.prisonadvice.org.uk/>

Public Health England (PHE)

PHE is an executive agency of the Department of Health and Social Care. It provides government, local government, the NHS, Parliament, industry and the public with scientific expertise and support. PHE was established in 2013 to bring together public health specialists from more than 70 organisations into a single service.

Psychoactive substances

Psychoactive substances are either naturally occurring, semi-synthetic or fully synthetic compounds. When taken they affect thought processes or individuals’ emotional state. In prisons, these substances are commonly referred to as ‘spice’. For more information see: <https://www.gov.uk/guidance/psychoactive-substances-in-prisons>

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