

“Mental Health and the Criminal Justice System” the Quakers in Criminal Justice conference at Ammerdown Conference Centre February 2018

The conference this year took place in the lovely setting of the Ammerdown Conference Centre, south of Bath. The theme of the conference is one that gives great cause for concern: 72% of male and 70% of female sentenced prisoners suffer from two or more mental health disorders. But the calm and beauty of Ammerdown and the opportunities for worship in the Centre’s chapel really helped to make this a positive experience

The speaker on the first evening was Sir David Lathom. Now retired, his distinguished career has spanned being a Queen’s Counsel, High Court Judge, Lord Justice of Appeal, Vice President of the Court of Appeal Criminal division and Chairman of the Parole Board. He now chairs a charity named ‘Justice’, formed in 1957 by concerned members of the legal profession who wish to bring about reform of the criminal justice system where they identify failures to protect human and individual rights. Sir David gave us an overview of the report published in November 2017 **“Mental Health in the Trial Process”** produced by ‘Justice’.

The concern that drove them to produce this report is that people who are vulnerable because of mental health conditions, learning difficulties and addictions form such a large proportion of those in police custody and in prison, but their needs are not always identified, nor is the system designed with them in mind. This often exacerbates the situation and their condition. From first contact with the police, through to disposal there remain fundamental problems with the response to mental health. If these are not addressed, the fair trial rights of many defendants may be undermined.

A working party was set up consisting of professionals from the criminal justice system, psychiatry, the CPS, the police, and other bodies with a remit to report on how vulnerable individuals should be dealt with in the period leading to trial and during the trial and sentencing. The working party decided to adopt a broad definition of “vulnerability” in order to avoid confusion over precise diagnosis. Their recommendations apply to persons of any age who could be considered to have any impairment that could cause them to commit potentially criminal conduct, and/or which can affect their ability to effectively participate in the criminal justice process.

“The broad, overarching theme of the report is that vulnerable people must be properly identified and given such support and reasonable adjustments as will enable effective participation in their defence or, if appropriate, that they not be prosecuted. Those diverted from prosecution or prison should receive suitable and effective treatment to ensure that they remain outside of the criminal justice system.”

The report makes 52 recommendations in all, but the key ones as outlined by Sir David were:

- As soon as police are aware that they are dealing with a vulnerable individual they must have immediate access to appropriate mental health professionals to advise on how best to proceed. An example of good practice in Cambridge are the two safe houses run by MIND where vulnerable individuals can be taken rather than to prison custody suites.
- There need to be identified professionals at each stage, in the CPS, the Probation Service, the Magistrates and Crown Courts, who have received additional training in identifying Mental Health conditions and the needs of vulnerable individuals. And that those who have received training will guide any decision to prosecute and keep reviewing processes put in place.
- Once a person is identified as ‘vulnerable’ they should get immediate legal help and support from an ‘appropriate adult’ or trained ‘intermediary’ to explain and support them through the criminal justice system.
- A ‘guilty’ plea must not be accepted until a case is proven, to protect vulnerable individuals from agreeing to a guilty plea because they are frightened or confused. But the aim should be to avoid such cases going to Court. An example of good practice is “deferred sentencing”, using a ‘behaviour contract’. If the offender adheres to the contract,

cooperating with treatment programs, attending courses, counselling etc, they will not go to court or have a criminal record.

- Where vulnerable individuals are managed appropriately they will not pose a risk to society; there is no need to lock them away.

The presentation of the report led to a lively discussion, everyone agreeing that all the recommendations are obviously very necessary. It is very encouraging that the report is written and backed by so many very experienced individuals whose opinion is respected. The problem, always, is getting it through from report stage to implementation. The full report which is very readable can be found on <https://justice.org.uk/our-work/areas-of-work/criminal-justice-system/mental-health-fair-trial/>

The fascinating talk on Saturday morning was by Tristram Cox, a Music Psychotherapist who manages a team of Arts Psychotherapists, part of the Psychological Therapies Services in a Medium Secure Unit. The talk was titled “**Fromeside Secure Unit – an Island apart?**” Fromeside is built on the site of an old mental institution and is truly a world apart in its approach to treatment.

People, because of their mental health needs, are referred in to the unit from police custody via the courts or from prisons. These are people who have a complex mental disorder, have been detained under the Mental Health Act and pose a significant risk to others. Some of them move between medium, low, and high secure units as their level of risk changes. The average stay on the unit is 1 year, but can vary from days to 10 years a typical stay being 3 years.

The unit provides assessment and treatment of mental disorders including psychosis, personality disorder, and substance abuse. The objective is to stabilise the condition and reduce harm to others by using a range of therapeutic interventions in the least restrictive environment manageable.

Fromeside has 81 patients accommodated on 7 wards and is equipped to take men and women. The Multidisciplinary Team consists of Psychiatrists, Nurses, Doctors, Social Workers, Chaplains, Occupational Therapists, Psychologists, Arts Psychotherapists, and Education. Each professional takes responsibility for one particular aspect of the person’s care but it is co-ordinated by an individualised care pathway, frequent ward rounds, team meetings and case reviews. The key areas for intervention are mental health and psychological wellbeing, risk reduction, physical health and wellbeing, relationships, substance use, community and life skills. This therapeutic approach is likened to a maternal holding environment – what is called a “Brick Mother” (Winnicott – Maturation and the facilitating environment 1965). However the individual also has to progress to functioning well independently.

Tristram went on to play us recordings of some examples of his work with individuals and it was intriguing to hear how that work developed, hearing how their agitated, quite obsessive composition and playing over time developed in to something much calmer and more meditative.

I think most of us, particularly those working in prisons, were just amazed at the resources for treatment available to the unit and the region-wide mental health service, and recognised how valuable such expertise could be in our own establishments.

Also on Saturday we were given a choice of four workshops:

1. “Using Comic strips with offending behaviour” facilitated by Marion Liebmann
2. “Exploring concerns about inequality and mental health within the criminal justice system using popular music” facilitated by Julia Horne
3. “Developing ‘co-production’ in a prison context” facilitated by Sinead Bailie from Q. Service (Northern Ireland)
4. “The impact of the criminal justice system on women’s mental health” by Joy Doal

As always with a choice of workshops you are left with a difficult choice. I chose workshops 1 and 4 as being most relevant to me.

Marion Liebmann's introduction to using the comic strip format to help people tell their stories was very revealing. So often when describing something we leave gaps, but this almost freeze-framed account makes these gaps very obvious, helping people to recognise these and where they might be minimising or failing to account for their part in the sequence of events. We all, rather reluctantly, had a go at doing our own comic strip to recount an event in our own lives. Despite our shortcomings as artists we were surprised at what we learnt from the exercise.

Joy Doal's account of the women's centre, Anwim, that she runs in Birmingham was particularly relevant to me. As a chaplain in a women's prison I am very aware of how vital contact with, and support from, Women's Centres are in preventing custodial sentences and preventing women from re-offending or being recalled. The range of courses and support offered was impressive and they also have accommodation for 9 women being released from prison. Until the introduction by the government of "Transforming Rehabilitation", which dismantled the Probation Service and introduced Community Rehabilitation Companies to supervise low risk offenders, Anwim had successfully offered an alternatives to custody service. But they recognised that under the new contracts this could be financially damaging, and this has proved a wise decision for them - but a sad loss.

An optional session on Saturday afternoon "Prison Reform – What's happening behind the scenes" was run by Melanie Jameson. This was an overview of 4 reports on the criminal justice system and progress made:

1. The Corston Report on Women in Prison, 10 years on
<http://www.womeninprison.org.uk/perch/resources/corston-report-10-years-on.pdf>
This document gives a very clear view of any progress that has been made in implementing the recommendations made in the report.
2. The Taylor Review of the Youth Justice System in England and Wales, December 2016
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/577103/youth-justice-review-final-report.pdf
Youth Offender numbers are dropping. Following the recommendations, two new secure schools will be set up, governors will have autonomy to commission the services they judge that they need, pre-apprenticeship training will be available, there is a greater focus on mental health and staffing levels raised to 1 prison officer to 4YOs.
3. The Lammy Review an independent review of the treatment of, and outcomes for, black, Asian and minority ethnic (BAME) individuals in the Criminal Justice System, Sept 2017
<https://www.gov.uk/government/organisations/lammy-review>
This very important review was referred to by all the speakers over the weekend. A race disparity audit and a Race and Ethnicity are planned as a result of the recommendations.
4. The Coates Review on education in prison 'Unlocking potential', May 2016
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/524013/education-review-report.pdf
Increased governor autonomy will mean that they have more freedom to identify the education services that are most needed in their establishment. The 4 main providers of education in prisons will be asked to provide courses specific to the prison's needs. For this purpose in 2019 prisons will be organised in to 'lots' with similar requirements. Specific learning difficulties will be identified on induction, not just literacy and numeracy levels.

Melanie concluded that what was needed for the valuable recommendations in all these reports to be implemented was the political will, adequate funding and a reduction in prisoner numbers.

On Sunday morning the final excellent presentation "**Prison can harm emotional wellbeing**" was by Kimmitt Edgar, head of research at the Prison Reform Trust. Kimmitt has been on the Restorative Justice council, is chair of the Alternatives to Violence Project and since 1992 has represented Friends at the UN Commission for Crime Prevention and Criminal Justice.

Kimmett's first slide was of the requirements for well being as set out in The Care Act; being treated with respect; physical and mental health and wellbeing; protection from abuse and neglect; control of the individual over their day to day lives; participation in work, education, training or recreation; social and economic wellbeing; domestic, family and personal; suitability of living accommodation and the individual's contribution to society. He asked what we would consider was missing from this list and the consensus was hope for the future and contact with nature, trees, grass fresh air. One ex-prisoner present commented on what a difference it made to his mood when he was transferred to an establishment with a small area of grass and some trees. On the basis of this, it is not surprising that prison does damage your emotional health and if you do not come in to prison with a mental health problem it is highly likely that you will leave prison with one.

The areas of particular risk in a prison environment are:

- Isolation from friends and family
- High risk of assault from other prisoners and of self harm
- Institutionalisation which impairs autonomy and self reliance - inculcates authoritarian values – minimises positive interaction with peers – fractures family ties – destroys the family's financial stability and prospects of future financial and social advancement.
- Emotional Stress: people with a history of attempted suicide and self harm are being placed in a proven stressful environment.
- Inequality, racism and discrimination are rife in the prison system.

The solutions put forward in Kimmett's final slide were that people in the prison population:

- Should be helped to develop a positive image of themselves, to have self esteem and that staff should respect that.
- Should feel safe.
- Should be helped to develop a sense of community and responsibility to that community.
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In between all of these sessions we had the opportunity each day of meeting in small home-groups to discuss our thoughts on what we had heard and what we would be taking away with us.

A very full and interesting conference with much to inform and stimulate further reading and thought. Always of particular value at the QICJ conference is the participation of Quakers who have personal experience of a custodial sentence. This adds a valuable balance and depth to discussions.

Mental Health care in prisons – The Prison Reform Trust <http://www.prisonreformtrust.org.uk/>
The state of our prisons is a fair measure of the state of our society.

10% of men and 30% of women have had a previous psychiatric admission before they entered prison. A more recent study found that 25% of women and 15% of men in prison reported symptoms indicative of psychosis. The rate among the general public is about 4%.

26% of women and 16% of men said they had received treatment for a mental health problem in the year before custody.

Personality disorders are particularly prevalent among people in prison. 62% of male and 57% of female sentenced prisoners have a personality disorder.

49% of women and 23% of male prisoners in a Ministry of Justice study were assessed as suffering from anxiety and depression. 16% of the general UK population (12% of men and 19% of women) are estimated to be suffering from different types of anxiety and depression.

46% of women prisoners reported having attempted suicide at some point in their lives. This is more than twice the rate of male prisoners (21%) and higher than in the general UK population, amongst whom around 6% report having ever attempted suicide.