

Justice Committee

Oral evidence: Prison Population 2022: planning for the future, HC 483

Tuesday 30 October 2018

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Members present: Robert Neill (Chair); Mrs Kemi Badenoch; Bambos Charalambous; David Hanson; John Howell; Gavin Newlands; Victoria Prentis; Ellie Reeves; Ms Marie Rimmer.

Questions 342 - 386

Witnesses

I: Juliet Lyon, Chair, Independent Advisory Panel on Deaths in Custody; Dr Kate Paradine, CEO, Women in Prison; and Jessica Southgate, Policy Manager, Agenda.

Written evidence from witnesses:

- [Independent Advisory Panel on Deaths in Custody](#)
- [Women in Prison](#)
- [Agenda](#)

Examination of witnesses

Witnesses: Juliet Lyon, Dr Kate Paradine and Jessica Southgate.

Q342 **Chair:** Thank you very much, everyone. We thought we would start a bit earlier, as the other session concluded earlier. You are all welcome. Thank you for coming to give evidence to us and for the written evidence that I know your organisations have submitted to us.

For the record, will you briefly introduce yourselves and your organisations? We can then go into the questions.

Jessica Southgate: I am Jessica Southgate, policy manager at Agenda. Agenda is an alliance of organisations campaigning around issues facing women and multiple disadvantage. By that, we mean domestic abuse, poverty, mental health, homelessness and contact with the criminal justice system.

Dr Paradine: I am Kate Paradine, from the charity Women in Prison. We campaign for a radical reduction in the women's prison population. We also run women's centres and some services in prisons.

Juliet Lyon: I am Juliet Lyon, chair of the Independent Advisory Panel on Deaths in Custody. The panel's sole function is to prevent deaths in any form of state custody and to advise Ministers and operational leads.

Q343 **Chair:** All of you seem to deal with particular issues that impact on the comparatively small number of women who are in the prison estate, but for whom there seem to be particularly significant difficulties around the complexities we are talking about. In its plan, the Department sets out three objectives at a high level: decent, safe, modern prisons; a sustainable population, looking at options for building more confidence in the alternatives; and keeping a grip on the money.

Let us look at the first two, in particular. To what extent do you think the Department's planning adequately recognises the particular way in which the pressures and needs of women prisoners impact on those objectives? Does it pick those up adequately, or is it too broadbrush and generic? Does there need to be something more specific? What do you think?

Dr Paradine: The words of the strategy are exactly what we have been arguing for over a long time. What is missing is a clear plan, targets and a real breakdown of what the problems are—a clear plan that also focuses on community solutions to women's imprisonment, particularly what we have already, which is a network of women's centres that is struggling to survive. We are not really clear that that has been set out properly. We hope that that will happen really quickly.

Q344 **Chair:** What do you want to see to know that it is set out properly?

Dr Paradine: We want a timetabled plan that focuses on each element of the women's prison population, particularly around raising confidence in community alternatives to custody. Hopefully, we will get into more of



the detail around that in later questions. We are not sure that there is a clear focus on community solutions and a strategy that looks at what is there already and invests in that, rather than trying to create some new solution that we do not need.

Jessica Southgate: There is a question around the Ministry's overall priorities and the degree to which they reflect the needs of women. As Kate said, the female offender strategy is very welcome in terms of its general thrust and ambitions, but the question of how far it is embedded within the wider departmental priorities is one to consider, particularly given that at the moment a lot of the issues around the justice system and the prison estate tend to focus on the male estate and issues around men. It is important that the strategy is embedded within the Department's wider work plan.

Juliet Lyon: It needs to be costed. It is as simple as that, really. The commitment is good. I would be very interested if the Committee could hold the Government to account on their commitment and ask them about a time plan, as Kate said. I would like to see costings for all the different elements of it.

The other thing that I would like to see—although the commitment is here—is an emphasis on cross-departmental working, particularly with the Department of Health. Obviously, our preoccupation relates to suicide and self-harm. There is a very big role for the Department of Health here.

Q345 **Chair:** That is very helpful. Since 2013, the Department has had an advisory board for female offenders. I understand that it has just reformed it. What is your take on that? Has it been useful or made a difference? What would you do differently?

Juliet Lyon: I became a member of it when I was director of the Prison Reform Trust. At that stage, I accepted that the Government were not prepared to establish a women's justice board, as we had hoped, as Baroness Corston had hoped and as Professor Dorothy Wedderburn had hoped. A number of people had made that recommendation. What we were looking for was a proper steer and a group with some executive responsibility.

If you take a look at what has happened with under-18s entering the justice system in the first place—never mind going into custody—the 70% to 80% reduction is fantastic. It has made a vast difference. The take-up of early preventive work by the police, local authorities and the Youth Justice Board shows what can be done. Therefore, there is still an element of disappointment for me.

It seemed to me then—and seems to me now, although I am less associated with it—that it was absolutely better than nothing. It was important to have a group that had a single focus on women, because otherwise they will get lost in the system, but I would still prefer to see something with more teeth and more bite.



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Q346 **Chair:** That is the different governance that you would prefer.

Dr Paradine: I have been a member for three years. I have just been appointed to the new advisory board. The overwhelming problem that we noticed with the board was that there was not clear recording of its advice. For example, the proposal for new women's prisons came out of the blue and was not supported at any point that I recall. In fact, it was robustly challenged at numerous points. We were not clear about how that advice was recorded. For the new board, we have asked that there is clear recording when advice is not followed, because it could be a really strong advisory force.

As Juliet says, the cross-departmental issue is a major one. This is not the MOJ's problem. It is dealing with the tail end of it. We need real cross-Government leadership on the whole issue.

Q347 **Chair:** You do not think that the structures are there to achieve that at the moment.

Dr Paradine: I am yet to be convinced. Obviously, it has met only once— last week.

Jessica Southgate: I agree with colleagues on the particular need for the board's advice to have some teeth and to be acted on, particularly when there is such overwhelming evidence and support for what the board is requesting and recommending. I also agree on the point about cross-departmental work. Obviously, a number of the solutions to women's offending lie far outside the Ministry of Justice. The question of how much buy-in there is in the Department of Health and Social Care, the DFE and MHCLG is up for debate.

Chair: That is very helpful.

Q348 **Ellie Reeves:** The Government are committed to a reduction in the prison population for women. What is your assessment of the Government's plans to achieve that?

Dr Paradine: I know the projections at the moment. They are not far off what the population is now, so the MOJ is not putting forward a very ambitious projection—as is happening in Scotland, which is projecting a significant decrease. We know that the female offender strategy has not been taken account of in the projections, but we feel that there needs to be a lot more focus on what can be achieved and much more ambition, particularly around short sentences and the number of women on remand.

The figures for the number of women on remand are overwhelming. Eighty-four per cent. of those sentenced are sentenced for low-level, non-violent offences—mostly theft. There is real scope to make a hole in the prison population and to reduce women's imprisonment significantly, but we do not see a plan and a breakdown of where that is going to happen



or what needs to happen in the communities to achieve it. No, we are not convinced that we are where we need to be on that.

Jessica Southgate: I agree with that. I would add a point around community support. As I have said, many of the solutions are outside the criminal justice system. In addition to challenges in the women's sector in being able to support and deliver the rehabilitative and preventive support to women to prevent them from being in contact with the criminal justice system, the wider support and public services that are needed as part of a wider safety net are hugely limited. They have had 25% cuts since 2010. It is about looking at the wider picture, as well as the criminal justice system itself and what the remedies are.

Juliet Lyon: We are seeing a failure to join up with other things that the Government are doing that are relevant and important. The victims strategy came out at the same time as the female offender strategy and would apply in very large measure to the kinds of women who end up in the prison system.

Equally, there is now a drive on homelessness. That is very important for women leaving prison, who are often homeless on release.

There is a lot that could be done. It falls into that social sphere, rather than the criminal justice sphere.

Q349 **Ellie Reeves:** It is really useful to understand that you think that cuts elsewhere are impacting on what is happening with the female prison population. What about the idea of piloting residential women's centres? What is your view on that as a way of reducing the prison population?

Dr Paradine: We are quite concerned by the focus on this. We are not clear about what is proposed and who the residential centres are for, and we are not convinced that there is evidence of need for them. The need that we see is for day services. At the moment, we have a real problem with both women on community sentences and those on prison sentences—those on IPP sentences who are being recalled to custody. All of them face the same problem, which is a problem with day services.

The real residential need is for proper homelessness solutions, not for new institutions to be built when we do not even know that there is evidence that the issue that they are supposed to tackle needs to be tackled. We have real concerns, especially because there is so little money attached to this strategy. It really is pitiful. It is a few hundred thousand pounds a year for two years for the entire country of England and the country of Wales, which is quite ridiculous. Our concern is really to know what these things are, why there is such a focus on them and why we are not focusing on women's centres and services for women in the community that can tackle the volume issue, not a very tiny number of women who might be affected by some sort of residential solution.



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Juliet Lyon: You used the word “plan”. It is important to have a plan for the population that incorporates the women’s centres in a way that sees them as a high-level priority. Last year, the building for Eden House, which was a women’s centre in Bristol, was sold for just over £600,000, for no apparent reason that one could determine. It had very good mental health facilities and very good links with health in Avon and Somerset. Although I believe that the Prison Service itself is working very hard, particularly in relation to safer custody, that is not the issue. The issue is a much wider-scale plan, having these alternatives and having the opportunity to invest in preventive work. I do not think that it is sufficiently a priority at the moment.

Jessica Southgate: I agree with that. There are cases where residential support for women can make a big difference, but it is attached to day centres. The network of day centres and day support services really needs to be there as the fundamental underpinning. Some services may find residential units or places within them beneficial, but what is critical is the ability to maintain the sustainability and stability of those services. At this stage, there are still probably too many questions for us to be able to say whether or not this is a proposal that would be of benefit and that is likely to reduce the prison population.

Q350 **Chair:** You have the women’s strategy. You also have the victims strategy. There is plenty of evidence that suggests that many women who come into the criminal justice system have been victims as well. Is there more that could be done to join up those two things, to recognise the needs of women in the justice system?

Jessica Southgate: Absolutely.

Juliet Lyon: There is the work on domestic violence, which is led by the Home Office. As you know, the Ministerial Board on Deaths in Custody is co-chaired by the Prisons Minister, the Public Health Minister and the Minister for Policing. That is a good model for a wider approach. Given that the majority of women have experienced some form of abuse, it would make a huge difference if the work on domestic violence were joined up properly. I was at Eastwood Park prison just a few months ago. A prison officer said to me, “We are running a nursing home, a psychiatric ward and a homeless shelter. Why can’t they sort it out from the start, rather than dumping women in prison?” Staff often feel that they are exactly that. They are having to receive and help women who are in a very bad way indeed.

Chair: That is very helpful. There seems to be a general consensus on that.

Q351 **Victoria Prentis:** My question is for Juliet. We have a new review on deaths in custody. What impact, if any, has the Department’s action had on deaths in women’s prisons?



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Juliet Lyon: It is specifically on women's prisons. The IAP conducted a review of deaths in custody because of the 12 self-inflicted deaths of women in 2016—a shocking number. Any death is one too many, but that was a particularly shocking number and very many more than prompted the Corston review.

I have seen the Prison Service focus under the leadership of Luke Serjeant and Jane Trigg. They have run a series of safe in custody day summits where they have drawn governors together, made a plan and invested in a small but useful way in distraction packs, giving more support to Samaritan listeners and women prisoners who act as insiders.

On the ground, there has been a big effort—and to some good effect, in that the number of self-inflicted deaths has dropped.

The degree of self-harm, as you probably know, has risen.

Q352 **Victoria Prentis:** Would you give us the figures? It is useful to talk about them.

Juliet Lyon: Absolutely. In the 12 months to June 2018, there were 2,366 incidents per thousand in female establishments, an increase of 24% on the previous year. The increase in men's prisons is very troubling as well. I can give you those figures. Rather than trying to wade through them now, it would be better if I sent them to you.

Victoria Prentis: It would be quite helpful to have the up-to-date figures.

Chair: We can then publish them in the report.

Q353 **Victoria Prentis:** This has always been a problem in the women's establishment, in particular. Do you agree, Juliet, that self-harm has always been a major problem?

Juliet Lyon: It has been. At one point it seemed to be not a few women but some women who were prolific self-harmers. At the last safer custody summit in Stafford, the governor of Foston Hall said that a woman on the autistic spectrum had put a ligature round her neck with the intent to kill herself 11 times the previous weekend. That is one woman, 11 ligatures, during the course of a weekend.

Yes, it has been a problem. Frankly, it will not be resolved until we look at it as a public health issue and at what can be done. It is unreasonable to expect prison staff and mental health teams in prisons to work with the severity and seriousness of women's conditions in a situation that is so far from what you would see in a psychiatric hospital or any health setting, where a multidisciplinary team of people would be available across the clock.

Prisons are very short-staffed. As you know, they have lost experienced staff in the course of the cuts. That was one of the reasons why, when we consulted women—60 women responded to the consultation—they gave



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that as one of the main reasons why they believe there has been this awful rise in self-inflicted harm.

Q354 **Victoria Prentis:** Do you see things getting better? I know the figures as yet would not bear that out. Do you think that progress is being made?

Juliet Lyon: There is more and closer working with the Department of Health and the Prison Service, which is to be welcomed. It is not for want of effort being put in. There are other ancillary things that we will probably come to that are helping, such as having phones in cells and trying to focus more on contact with family. All those things are helping to an extent.

If you look at one set of figures, because they are very telling, 46% of women and 27% of men have attempted suicide at some point in their lives before custody, so almost half the women entering prison have already attempted suicide. That compares with just 6% of the general population. We have an exceptionally vulnerable group of women in comparatively bleak establishments. That is not a criticism of staff but a criticism of staffing ratios and the environment in which they are kept. Women's teams have been working consistently with governors to try to improve safer custody, and we can see improvements. What I am reporting to you is what they are up against.

Q355 **Victoria Prentis:** Have you done any evaluation of trans prisoners and their risks of suicide?

Juliet Lyon: We have not. The IAP most certainly could look at it. We had a meeting with the person who conducted the transgender review of the Prison Service and spent time with him discussing the implications. Of course, every time you visit a women's prison you find people in those circumstances, often separated to an extent, but I have not looked at that particularly and we could do so.

Q356 **Chair:** We heard some concern from Dr Anand, a forensic psychologist, about the way the incentives and reward systems work. Do you have any observations on how that may play out in the women's estate and with female prisoners?

Dr Paradine: We have given a response to the consultation on incentives and the earned privilege scheme. We think there is far too much focus on punishment culturally in the whole system. Focusing more on earning privileges and incentives would be a much better way to go.

There are many issues in terms of the disproportionate impact of imprisonment on women and family contact. We are particularly keen, as a matter of urgency, that any issues around visits, letters and so on be removed from a form of punishment, which punishes family members, children and those in prison. An overhaul of the scheme is well overdue. It is a matter of giving governors the power to use it as a method of improving the environment in prison.



Q357 **Chair:** Are there enough safeguards in the scheme, Ms Southgate?

Jessica Southgate: Kate is probably the best person to answer that.

Q358 **Chair:** Are there enough safeguards? The British Psychological Society suggested there are not enough safeguards to prevent the scheme from being used in a way that can create harmful behaviour.

Dr Paradine: By using it as a form of punishment and not understanding the full context, but also communication about the scheme itself, we often find that women do not understand how and why the scheme works as it does. There are issues around discrimination. There needs to be more of a spotlight on how the system is being used. We know that women don't always complain readily or raise concerns, which concerns us.

Q359 **Chair:** When you talk about discrimination, is that what you are referring to?

Dr Paradine: Yes. It is about the scheme being used unfairly and being seen to be used fairly as well as being fair.

Chair: That is helpful.

Q360 **David Hanson:** We have talked about this quite a bit. I want to get a summary of the key barriers to making women's estate prisons less helpful towards rehabilitation in the next five years.

Dr Paradine: To pick up on the point about deaths in custody and self-harm, the issue is that women's prisons are dealing more and more with women with more and more complex needs as all the other issues in communities bite harder.

In making our prisons more rehabilitative, reducing radically the population has got to be the No. 1 focus. With short sentences, there is no time to do anything rehabilitative. That is the truth. Even a few months is not enough time to put yourself on a waiting list to take any benefit. We need to be looking seriously at a presumption against short sentences of under 12 months and enforcing that. It is the only way forward to ensure that we can manage the crisis at the moment.

Juliet Lyon: When I was at Eastwood Park the average length of stay was seven weeks, which gives you an indication of how little time there is to do anything constructive. One of the women in our consultation said, "How can you prioritise your physical or mental health when you have nowhere to sleep, no job, no support network and £46 in your pocket?"

We were very disturbed by a manager's comments. The consultation extended to 40 managers and health and justice professionals, some of whom were on a ministerial board and others were on the Advisory Board on Female Offenders. We heard from one manager that in some areas all homeless women have to report to a rough sleeper project, which assesses their needs and matches them to available beds in the area. If



no beds are available, the women are routinely accommodated on a fold-up bed in a room shared with a number of other people, largely males. Many women returning to such an area have considerable anxieties and experience real fears.

In terms of risky times for self-harm and suicide attempts, it is not just the first night in custody. It is sometimes when people are very close to release and they are worried about going back into domestic violence or ending up homeless. They experience, ironically, more support and more warmth in a prison than they would outside. That is a real indictment.

Jessica Southgate: All of this underlines the need for there to be a far more comprehensive range of gender-specific and trauma-informed support for women in the community.

We know that homeless services are dominated by men: 75% of their users are more likely to be men. It is similar in substance-use services. If women are in those environments—often women who have very complex trauma histories—it is not only intimidating; it can be very risky by, potentially, exposing them to men who have previously exploited and abused them as well as other men. It is not necessarily appropriate for their recovery and support.

The need for reducing short sentences, radically reducing the prison population, diverting women from custody and towards community alternatives where women are based in the place where they will live and make local connections, have contact with their children and get long-term support with trusted relationships and staff who can help with all those different holistic needs in their lives, is what is required.

Q361 **David Hanson:** I accept all of that and appreciate the input. The Government said in 2013: "The criminal justice system alone cannot address all the factors associated with women's offending, partnership working, and a true cross-government approach is essential to help us rehabilitate female offenders and to support women to get their lives back on track." That is a laudable objective from five years ago. What is the score card on that?

Jessica Southgate: One of the challenges we see in doing this from an area approach is everybody being able to get on the same page and deliver the support solutions that are needed. It is a cross-departmental issue at both the central and local level. Unfortunately, some of the barriers to being able to do that are continued reductions in budgets but also siloed budgets, which means it can be difficult for commissioners to align their pools of funding to work together and to unpack some of the competing priorities. As long as things are seen within one Department's priorities over another, it can be hard to get all those different people involved and engaged in providing the right type of support.

Q362 **David Hanson:** If the cross-Government body for rehabilitating and



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reducing offending, which has a central, overarching view to look at that task and to tackle those issues, cannot deliver the support, who can or should? What is the progress on that? What can they do?

Juliet Lyon: You find pockets of very good practice. We have been told about a group in Northamptonshire, chaired by the police, which works well to divert women into, for example, mental health treatment, to follow that through and to make sure that they have support in the community. We know that the Nelson Trust works well in Gloucester. There is an absolute lack of proper co-ordination and funding for this.

Q363 **David Hanson:** Does this reduce how the reoffending group deals with that issue now? Is it on top of it? Is it pulling together the issues? Should it pull together those issues? Should there be central direction? Is it devolution versus central direction? Where does it all land?

Dr Paradine: All roads now lead to the female offender strategy in properly planning for what needs to happen. Manchester has been considered the jewel in the crown of the whole-system approach. It has reduced women's immediate imprisonment during the past four or five years by about 35%. We know what works. That is proven to work.

In March there was a massive funding hole in Manchester. There is no plan to fill it other than what Manchester themselves are putting together. This illustrates the problem we have. There is no understanding nationally of even how many women's centres there are, when their funding ends, where it comes from and how many people they can serve or could serve if they were funded properly.

As part of the advisory board, we have called for an assessment of what is there and then work out what is needed. What has happened is that the peanuts that have been put into the funding strategy are being dished out in quite a random way, as far as I can see it, in an open competition where people have to spend days putting together bureaucratic application forms when we need to work out what strategically is needed nationally. The volumes of women going through the system do not make local solutions feasible. We need a national picture that invests in what is working. Manchester and other areas are showing what can be done.

Q364 **David Hanson:** Do you think that the whole-system approach is achievable by 2022?

Dr Paradine: Not from where we are currently, no, absolutely not. It could be if attention now turns to where money needs to be invested. Manchester did a cost-benefit analysis last December, which was published. It found that £4.68 was saved from public spending for every pound spent. The economic case is there and the social case is there. The prisons crisis makes us have to do this, but we do not see action on the ground.



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Juliet Lyon: Another piece of learning from the Manchester work is the importance of seeing this through a complex-needs lens rather than just a justice lens, so increasing over time. That has been the approach they have taken, which has allowed them to work, to provide support and have an ambition to provide support for all women at risk, it not being just a criminal justice solution.

Q365 **David Hanson:** Who has driven Manchester?

Dr Paradine: Women's services have been key to driving the change. By working collectively across charities in a very collaborative way, the Manchester Women's Support Alliance has been absolutely instrumental. While I agree that the public sector, the local authority, the police and others have worked hard, the fact that is that they and other charities have supported the women's sector in partnership to deliver change, to bring in masses of money from the Big Lottery Fund and other areas to drive this forward as a solution.

Q366 **Victoria Prentis:** I accept what you say about Manchester, and that is an exciting model for many of us. My slight concern is that, while that can be shown to work well in a large urban setting, can it be replicated in more rural areas? Of course, that does not mean we should not do it in London, Liverpool and other large urban settings, but do you have solutions for the rest of the country?

Dr Paradine: It is not just Manchester. We have a women's centre in Woking. The Nelson Trust and other charities across the country prove the women's centre holistic model of providing services across agencies and hubs for services, safe spaces for women, where they can come back again and again over a longer period of time, that are not focused on the criminal justice system.

This is a point that I want to make. The whole idea is of independent services that are not tied up with the probation service. We have not spoken at all about the Transforming Rehabilitation reforms, which have been absolutely disastrous—full stop—but especially for women's services that were working with probation in a very collaborative way.

All that has changed now. It is the case that this scheme can work in all areas of the country and we are showing that it can be done—but only if it is properly invested in.

Q367 **Chair:** Can you help me? You talked about the Transforming Rehabilitation reforms and their failure. A probation consultation document states that accommodation, employment and substance misuse ought to be a core probation offer. Do you agree? How much gets delivered in practice?

Jessica Southgate: The TR reforms have been absolutely devastating to the women's sector, as this Committee knows. The recent Clinks Tracking TR report, which has looked at the health and sustainability of the women's sector within the voluntary criminal justice sector, reported that



across the board women's services have had poor relationships with contract providers, greater degrees of cuts and feel less secure about the future.

The risk with the core offer is that setting a set of minimum standards is not suitable for women, particularly when we are talking about women who are, perhaps, very low risk and with high levels of need but who are likely to have needs in a range of different ways. So, having a base level feels like the lowest possible offer.

Juliet Lyon: I am reminded that gender specific standards have just been produced by Public Health England, which, again, is a step in the right direction. It all feels a bit like baby steps.

Going back to the earlier question about whether something can be done within the timescale, once the reduction in the under-18 population began to accelerate, it was done comparatively quickly. It took a while to get off the ground. We have a commitment in the female offender strategy. If that was actioned, costed and driven hard, it is not unrealistic to say that we would see a significant population change. We are not just talking about the snapshot population, which hovers around the 4,000 figure. It is double that number. It is more than 8,000 women who enter prison for the first time each year.

Dr Paradine: The focus in that consultation is very much on supervision, control, the probation service and CRCs. This Committee has noted that hundreds of millions of pounds of extra public money has gone in this failing system to the CRCs, but the focus is not on the support that is lacking to make the system work. We are concerned that money is going direct to the CRCs and is not finding its way to where it is needed, which is the support on the ground. If you ask probation officers, they will tell you the same—that they need support to refer people.

Q368 **Chair:** That is very helpful. During that section, we talked about, specifically, short sentences. Can anything be done about remand? It is a problem across the estate, but could any specific things be done from the female offenders' point of view?

Dr Paradine: Remand is a massive issue for the whole women prison population. A high number of those remanded do not even get a prison sentence after they have been remanded. It clearly needs to be a big focus of the female offender strategy.

You asked me earlier about residential women centres. We would be better off looking at the option of bail hostels than at a new-fangled institution, so we could drive down the number of women remanded. Reports have been published on magistrates using prison as a place of safety. When you look at the work of Agenda on mental health services for women, we need to be looking at the community alternatives, and remand is a good place to start.



Juliet Lyon: The IAP is currently undertaking an independent survey with the Magistrates Association looking at the use of community mental health treatment requirements and requirements that meet drug and alcohol needs. We have a section specifically on women because we are concerned about the possibility that prison still gets used as a place of safety. Anecdotally, we are told that time and again for the most vulnerable because of the lack of other services. We are very keen to see the results of that, which should be available—we can make them available to the Committee—I would like to think, by the end of this year. At the very latest, it would be January.

Q369 **Chair:** That would be very helpful. Are there any other observations?

Jessica Southgate: I would just echo what my colleagues have said.

Q370 **Chair:** What about the impact of recall on women? Are there specific areas where that bears either harshly, or could more be done in a more gender-specific way around dealing with issues of recall?

Dr Paradine: Women in Prison and many others are calling for the post-sentence supervision requirement to be taken away from legislation. It is part of the element of Transforming Rehabilitation that has put pressure on the system with no discernible benefit. We would prefer to see post-sentence support rather than the disproportionate use of post-sentence supervision. I notice that you heard evidence from the head of the Parole Board about IPP prisoners, at the other end of the spectrum. Women on IPP sentences have been recalled because they have been institutionalised over many years. They went into prison with complex needs and they came out with even more complex needs, with no support to see them through.

We would like to see, as part of the female offender strategy, a proper plan for investing in independent advocacy support so that workers like those from women's prisons and other women's centres can build relationships with women before they are released and then carry them through, which happens in Manchester, the prison link workers, into the community, settle them into services and do proper through-the-gate support, not this to-the-gate signposting that we have currently, where people are expected to leave prison with their £46 discharge grant and get on with it. That is, clearly, why we have the recall population that we do. Often people are recalled not for committing offences but for administrative breaches of disproportionate supervision requirements.

Juliet Lyon: In our report on preventing the deaths of women, we were very concerned about the number of times recall was drawn to our attention. One of the women prisoners said, "For women who are recalled to prison, this may cause them to feel that suicide is the only option as they cannot face living or existing in this environment again." We made a recommendation that recall to custody should be ended for most forms of technical breach of licence and that there should be a strengthening of supervision arrangements and support instead. That is critical.



In relation to IPP prisoners, on the wider report we did—the “Keeping safe” report about everyone in prison—we recommended a review of each person with a view to release. If we are thinking about hope as one of the things that people need to avoid self-harm and thoughts of suicide, people must have a sense of future, a sense of going forward and a sense of hope. It is a sentence that has totally sucked hope out of the system and out of those individuals.

Jessica Southgate: On supervision, there are issues that women’s particular life experiences and what is going on in their lives is not being taken account of—domestic abuse, children, childcare and caring responsibilities. If those wider factors are not considered and taken account of when supervision requirements are being set, inevitably, it is likely to lead to a breach and recall, which is a hugely damaging process.

Chair: I understand that.

Q371 **Bambos Charalambous:** You have dealt with the issue of recall. I was very surprised to discover that 48% of women are recalled within one year. There is an issue about the probation service and it being part of the through-the-gates model of providing services in advance.

I want to talk about the mental health priorities within the Department. I read that 79% of women in prison have mental health issues. What should be the priorities for the Department in building an evidence base for effective practice in the management and treatment of women in the CJS and becoming more data driven generally? Do you have any thoughts on that?

Jessica Southgate: Do you mean in terms of the evidence base more generally or specifically about mental health?

Q372 **Bambos Charalambous:** Generally, but also mental health in particular.

Jessica Southgate: There is an issue for women’s services more generally about evidence of the huge requirement and constant expectation of producing more and more evidence, particularly when much work has been funded without the Ministry of Justice taking a central role—and other Departments in terms of funding pots—and of setting a set of outcomes that can be comparable between different projects. It sets a high evidential threshold for women’s services, and many of them have spent time diverted from doing frontline work in recording and reporting on that.

We also know that in order to be able to do some of the systemic change we have been talking about today there is a need, which is not necessarily always set out at the start, to develop evidence as time goes on, for that to be very much co-produced with women and with a value on the quality of evidence.

Those are some of the underpinning issues that need to be considered when we are talking about setting an expectation of what we need from



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an evidence base before we go on to fund, support and continue to grow projects.

Dr Paradine: We find that evidence is being used as a stick to beat services rather than an incentive to multi-agency collaboration and performance. Certainly, in Manchester, they have shared targets and looked at the way you look at the whole system, not looked at targets as a dysfunctional method of, supposedly, holding providers to account but just creating a bureaucratic nightmare of reporting. There is something about the female offender strategy choosing some clear targets that are easily measurable and supporting the reoffending rate of measurement.

It is incredibly hard to measure reoffending if you are a service provider using the Justice Data Lab and MOJ systems. Help needs to be given. We need an acceptance that it does cost money properly to evaluate services and for services that routinely have staff at risk of redundancy. Women in Prison and other providers like us pretty much all the time have someone at risk of redundancy and some service at risk of ending. That is the daily reality of running services. Sometimes evidence is not prioritised in the way commissioners might like.

Juliet Lyon: There is a case—I do not know whether it is financially feasible—for doing another psychiatric morbidity study of the whole prison population. There would be a particular section that would focus on women.

The Ministry of Justice is better than many Departments in gathering information. They are very clear about the numbers of people in prison, the reason they are in prison and mental health needs. All those figures are published. They are not published as regularly as we would like but they are available.

In terms of statistical figures, they are good, but a psychiatric morbidity study would inform health commissioners. We would like to see each of the health commissioners having somebody responsible for commissioning specifically for women. As they are only 6% of the prison population, they are constantly overlooked, and you can see how that happens.

Q373 **Mrs Badenoch:** The Prison and Probation Service identifies specialist cohorts of women as part of their operational delivery model. They talk about how best to meet their needs and how they can manage them effectively. I would like the panel's assessment of HMPPS's approach to transgender and trans-identifying prisoners, foreign national women and women from ethnic minority backgrounds. Dr Paradine, I know you have a statement, which we received earlier, but would you start and perhaps expand on that?

Dr Paradine: You would like me to start on the issue of transgender prisoners.



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Mrs Badenoch: Yes.

Q374 **Chair:** And the other points mentioned, about foreign national women and other particular cohorts of women.

Dr Paradine: We have issued a statement—we do not comment on individual cases—stating that this is an incredibly complicated area of the Prison Service. We have been providing services to trans women and trans men for many years in the women's estate and in our women's centres, as needed. We know how complex this issue is. We are concerned at the moment about the needs to balance the rights of many different people to privacy, access to services, support and to safety. All those things need to be balanced. There needs to be a clear discussion about that in the prison estate and to accept that it is an extremely complicated area.

Q375 **Mrs Badenoch:** You feel that a proper discussion is not being held at the moment and that the Prison and Probation Service is not saying enough. I was having a look in my brief. They have issued guidance on treatment. Do you feel that the guidance is fine? Do you think more needs to be done? Are you talking about, perhaps, changes to the Gender Recognition Act or what is happening under current legislation?

Dr Paradine: Because we run women's centres—there are the prisons—and with the exemptions in the Equality Act, we need to look at the guidance and the way the exemptions in the Equality Act are being managed and dealt with in practice. There needs to be more clarity—we need a discussion about the balancing of rights and the dilemmas that face those providing prisons and women's services—about providing services for transgender women and transgender men and to provide services, in our case, for women. We have to make sure that the balancing act is enabled and that the law and guidance support those decisions and ensure that there is a proper balancing act.

Q376 **Mrs Badenoch:** Does anyone have anything further to add on that cohort before you move on to the others?

Dr Paradine: No.

Q377 **Mrs Badenoch:** What about foreign national women? How do you feel about how the services are doing with respect to that cohort? Are you happy with their approach?

Jessica Southgate: In terms of foreign national and black and ethnic minority women, we produced a report with Women in Prison, "Double disadvantage." We interviewed women about their experiences of the system. It is clear that there is a double disadvantage for those women. Many foreign national women will have had additional vulnerabilities and risks in terms of their experience and journey into the system, but there are also the challenges that they might face particularly around cultural, religious sensitivity and recognition of their specific life experiences.



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They have very basic access to understand what is going on in terms of the English language and translation services and their rights to stay in this country, particularly where children are involved. It is important that there is an appropriate response to that. At the moment, that is lacking.

On the wider issue about black and minority ethnic women in general, there is a huge issue around disproportionality in the criminal justice system. They make up 18% of the women's prison population, despite being only 14% of the population. While in the system, women tell us that they experienced discrimination and stigma at each of those contact points with the criminal justice system. It reiterates and underlines the need for culturally informed support that recognises ways in which they might experience the system differently.

Juliet Lyon: Sometimes it is the absolute detail that matters. We consulted women at Bronzefield. They have in-cell phone facilities. The foreign national women said that made a huge difference to them because they could phone family members at different times of the day or night, get through and have that support from their families. It is not always the big things but the detail that can be critical.

Dr Paradine: For the report that we did with Agenda, as part of the Lammy review, we met women in some of the prisons to talk about their experience of disproportionate treatment and discrimination in the system. Recently, Hibiscus and the Prison Reform Trust have published a report on foreign national women, which I commend to the Committee, and certainly the detail does matter.

An important point to make is about specialist services. Hibiscus provides specialist services for foreign national women. While the women's sector has suffered massively in recent years from austerity and the TR reforms, black and minority ethnic specialist provision has suffered even more. There is something about looking at what services are available to women and to meet their specific needs in what are often specialist areas. The area of foreign national women is a specialist area and we cannot expect prisons to provide the advice that is needed. We need to bring in experts to support women at times of desperate need.

Chair: Thank you. That was helpful.

Q378 **Ms Marie Rimmer:** What lessons can be learned from the closure of Holloway and the open unit at Styal with regard to the prison estate transformation programme? Do you have any experience? Is there anything you want to pass on?

Dr Paradine: The closure of Holloway, and I am sure that Juliet will say more, was a disaster. It was unplanned, there was no strategy and it put masses of pressure on all the other women's prisons and on women's services. Women in Prison and other charities gathered around Holloway. We brought money into Holloway from funders and so on because it was the biggest women's prison in western Europe. When that was ripped out



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so suddenly and without any strategy, money was lost from the system and services closed. We closed services. We had to move location. The impact of that is still being felt across the whole country, including pressure on the prison estate. The biggest lesson is that, when you close a prison, you need to think about the ecosystem that surrounds it and what that means.

If you look at London now, MOPAC and the London Crime Prevention Fund are trying to recover ground in investing in women's community services, but what has never been done from a national level is to make a plan for what it means to take away a prison in London—

Q379 **Ms Marie Rimmer:** An impact assessment.

Dr Paradine:—and the impact that that has had on the most vulnerable group of citizens in London, which is women caught up in the criminal justice system.

Q380 **Ms Marie Rimmer:** But there was no impact assessment as far as you are aware.

Dr Paradine: As far as we are aware, we have never seen one. There was no consultation. Nothing was done afterwards to look at damage limitation. It was a completely wasted opportunity. Two years on, the site sits empty, with no plan, despite a call, which we have supported locally and across the country by a number of charities, to put a women's centre on that site, to provide social housing rather than private housing and to invest any income from the sale of Holloway in the services that are desperately needed. We understand that many millions will come from its sale.

Juliet Lyon: The closure came towards the end of my time at the Prison Reform Trust. We were working very hard to try to help reduce women's prison numbers and promote effective alternatives to custody. It was such a political move to close the iconic largest women's prison. The other thing is that it was a financial move because the Ministry of Justice owned the site, whereas the sites of a lot of the other London prisons are not owned directly or the ownership is confusing. Holloway was an easy one in terms of the ownership. It could be closed. Politically, it was iconic. But it was done at huge speed. It is a tribute to Emily Thomas, the incoming governor, who managed that transition as safely as she could.

When we did our consultation at the IAP on the reasons for the deaths in 2016, it was interesting what the women said and what the health and justice professionals said. Of the five reasons—the knock-on effect of the hasty closure of Holloway prison, including increased distance from home, pressure on other establishments, combined with the widespread closure of women-only support services and community—that was their view.

One of the things we are ambitious to do at the IAP is to create a safety impact assessment, across the whole estate, which essentially would enable operational leaders and Ministers properly to advise about the



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impact on safety. It would have helped with Holloway, because it would have been a major decision under consideration.

They could then have given mitigating factors. If there was a risk to safety, how would you mitigate it? It would then have been for the Minister or the Secretary of State and operational leaders to make a decision, with those factors set before them. I had no impression that anything was done in a thoughtful or considerate way.

Q381 Ms Marie Rimmer: Without a risk assessment, have you any knowledge on the impact on Styal? Have you anything to say on the open unit at Styal with reference to the prison estate? Have you any knowledge about that?

Chair: We picked up about the open unit at Styal Prison.

Ms Marie Rimmer: You have picked that up. I am sorry, I did not hear you. It is with reference to the prison estate transformation programme.

Chair: What lessons did you learn from that?

Dr Paradine: In Drake Hall various attempts are being made to have follow-on accommodation to step women down to going into the community. Those solutions definitely need to be looked at in how the system enables women to use them. Things like family visits in the lead-up to being released are really important.

To return to Juliet's point, the impact of distance from home for women across the board is massive in terms of the practicalities of getting young children to visits.

Q382 Ms Marie Rimmer: The Prison Reform Trust has suggested that there is a need for greater transparency on the part of the Ministry on principles for future prison design. If you were consulted, what would you suggest and where, internationally, could you recommend that we would look for good practice with regard to women's prisons design, rehabilitation and safety?

Juliet Lyon: It is interesting to look at what has happened in Scotland. As you will know, the replacement to Cornton Vale was to be the largest women's prison in Europe. Architecturally, it was a pleasant design with a lot of glass, light and spaces for counselling and so forth. At the very last minute, the Cabinet Secretary cancelled that plan because he, rightly, I think, decided that bringing women together from across Scotland into this large establishment, however well designed, was a real mistake. What they needed to do was to look more at community hubs, much smaller units.

Whether they are doing this as much as one would hope in Scotland I am not clear, but it is important to look at the women whose offending is so serious that it warranted imprisonment. As we said earlier, the vast majority of women have committed comparatively minor offences. They have often been victims of serious crime. They are highly likely to have



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mental health needs and they are highly susceptible to the risk of suicide and self-harm.

You would not start with planning the design of a prison. You would start with the population, analysing the population and the needs of the population, working across Departments. You could, for example, create a health setting that would have closed and secure elements, which would be appropriate for those who needed to be held securely.

We are nowhere near where we should be in terms of just how many spaces are needed. If you look at the shrinkage in the under-18 estate, you can see how radical things could be and the potential for real change.

Q383 Ms Marie Rimmer: Are you saying that we should look at the future population and meet the needs?

Juliet Lyon: Yes; absolutely.

Q384 Ms Marie Rimmer: You spoke earlier about smaller units closer to home.

Juliet Lyon: Yes.

Dr Paradine: For the women's prison population, I suggest we look at refuges and the way some of the new-build refuges are being built rather than prisons, because that kind of provision is what is needed.

Q385 Chair: That has been very helpful. This inquiry is focusing on planning up to 2022, and the Ministry has since established a Justice 2030 project looking at risks and opportunities further ahead. Is there anything that you think we have not touched on so far? We have had a very useful discussion today. Is there anything that would help us in terms of what we should be looking at in our inquiry and what you think the Ministry should be looking at not just to 2022 but to 2030?

Jessica Southgate: We have covered all the main things that we would argue from Agenda—the critical importance of finding community solutions to women's offending, looking outside the criminal justice system, ensuring there are routine inquiries so that we find out about women's abuse histories, providing appropriate women-only trauma-informed responses to that, and, therefore, looking to the future, assuming that there will be a much smaller custodial population. Then we have to think about designing for that rather than building any additional places, which will inevitably be used and would result in up-tariffing.

Dr Paradine: We feel that there is a sense of learned helplessness within the Ministry of Justice around ambition in making this happen. When you look at the figures, what we have said can be done is eminently doable, which is to halve the women's prison population by the next decade. We can break that down and focus on exactly the minutiae of what needs to be done. We just need to get on and do it.

We counsel ambition from this Committee. I know you have been doing that. You have been holding the Government to account on all this. We



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need to drive forward on the figures and to look at what can be done around the numbers.

It costs about £66,000 a year to keep a woman in Bronzefield prison. For the price of a couple of weeks in Bronzefield, you can have gold-standard services in the community to make the difference that needs to happen.

Q386 Victoria Prentis: Do you think you are ambitious enough with your figures for a reduction? Why are we not looking at it the other way around, which is: who needs to be in prison?

Juliet Lyon: I agree with you. The Treasury figures are very mind-concentrating, because the Department is clearly going to have less and less to spend. Unless it now faces that shrinkage in a much more radical way, that means across the board, across the whole prison estate. There is an opportunity and a commitment has already been given by Government to do something radical in relation to women.

The drop in the number of children going into the justice system is 75%. The Committee could well look at the ambitions of the Government for preventive work with vulnerable girls and women. It could look at costing that and could also invite the Department of Health, given its commitment now to improve mental health services and a determination to reduce suicide in the wider community, to speak to your inquiry on the population.

Dr Paradine: We think that this involves police and crime commissioners. We have always said that the 2020 ambition to reduce the population of women was the start. We believe, as Baroness Corston said 11 years ago, that there was only a small number of women in prison who might need to be incarcerated for the reasons of their offences and for public safety.

Jessica Southgate: On the point about mental health, we have been co-chairing with the Minister, Jackie Doyle-Price, the Women's Mental Health Taskforce, which will report before the end of the year. That will set out a range of principles for gender-informed mental health care, which is a different and useful frame through which to look at the kind of support that is required for some of these women.

Chair: That is very helpful. Thank you very much for your time and evidence. It has been most useful for our inquiry.