

# ***THERE WHEN YOU NEED THEM MOST:*** *pac's first night in custody services*

Jessica Jacobson and Kimmett Edgar with Nancy Loucks



---

# Contents

<b>Foreword</b> .....	iii
<b>Acknowledgements</b> .....	v
<b>1. Introduction</b> .....	1
Aims and objectives of <i>pact</i> 's first night in custody services .....	1
Independent review by the Prison Reform Trust .....	1
Interviews with prisoners .....	2
Background to the study: the transition into custody .....	3
Structure of this report .....	5
<b>2. The prisons</b> .....	7
<i>Pact</i> 's first night in custody service .....	7
The comparison prisons .....	10
<b>3. Prisoners' concerns on arrival</b> .....	13
Feelings and worries on arrival at prison .....	13
Worries inside and outside prison .....	14
Differences between prisons .....	17
Thoughts of suicide and self-harm .....	17
Prisoners who were most worried .....	20
The influence of previous prison experience .....	22
<b>4. Input of <i>pact</i></b> .....	27
Levels of <i>pact</i> input .....	27
The kinds of help received from <i>pact</i> .....	30
Views of the <i>pact</i> role .....	33
Comparison between <i>pact</i> and non- <i>pact</i> prisons .....	34
<b>5. Other factors</b> .....	37
Relations with other prisoners .....	37
Attitudes of prison officers .....	39
First night environment and facilities .....	42
Quality of healthcare .....	44
Provision of information .....	46
Prisoners' suggestions for improving first night services .....	48
<b>6. First night services in Scotland</b> .....	51
<b>7. Conclusion and recommendations</b> .....	57
<b>References</b> .....	63
<b>Appendix 1</b> .....	65
<b>Appendix 2</b> .....	67
<b>Appendix 3</b> .....	69



## Foreword

The Wates Foundation has been delighted to help *pact* provide its excellent First Night Service and to see this report by the Prison Reform Trust. It will, I am sure be a document that will help policy develop in this vital area. The 'bottom line' is "This service has a proven capacity to ameliorate the distress experienced by prisoners on their first night in custody". But along the way, the report has some interesting insights.

It is the very experienced as well as the first timer who are most vulnerable. The quality of the first night 'suite' can lead to problems after transfer to the normal wing. Too much information can be as bemusing as too little. But time and again it is the emphasis on the family relationship that comes through. And this is where *pact* with its experience of running visitors' centres 'adds value' in a way in which, perhaps, uniformed staff could not. *Pact* is appreciated because it follows through after the first officially allowed phone call. It is also valued because its staff and volunteers are like normal people on the street and don't use Prison Service jargon.

As we know, most suicides occur in the first few days of imprisonment. The care provided on the first night is crucial. This helpful report pulls together various conclusions from the insights drawn from a variety of establishments. With hindsight the themes are obvious enough: keep the families 'in the loop'; even with all the pressures associated with overcrowding and fast throughput, care on the first night will save time and trouble later on; all individuals will have different needs; the voluntary sector has an important role even in the best run prisons and work best when they are integrated into the whole system.

This is, above all, research to be acted upon. It was brave of *pact* to commission it and help us all to move forward.

John N. Wates  
Chair, Wates Foundation



## Acknowledgements

The Prison Reform Trust wishes to thank the Wates Foundation for supporting the research and publication of this report.

The authors are indebted to many people for their contributions to the project. The governors at each of the prisons were gracious in providing the Prison Reform Trust with access and in facilitating our visits. PRT's practical needs were met by staff who were unfailingly generous with their time, including Wendy Bayley, Julian Gabriel, Bob Motel, Gareth Savage, Donna Skinner, and John Todd.

The *pact* managers and staff gave much-needed support to the review. They included: Andy Keen-Downs, Director of *pact*; Sandra Duhaney at Holloway; Mark Williamson at Wandsworth; and Christine O'Neill at Exeter.

We thank the interview participants for the care and detail with which they answered the questions, and their preparedness to talk about difficult issues. We are also grateful to the Insiders and Connections workers who described their work and helped us to prepare for the interviews.

We would like also to thank our colleagues at PRT who supported the work including Juliet Lyon, Geoff Dobson, Tony Callaghan, Peter Osei, and Catharine Riseborough.



# 1 Introduction

## Aims and objectives of *pact's* first night in custody services

The Prison Advice & Care Trust (*pact*) is an independent national charity working with prisoners and with prisoners' families. Its mission is:

To support prisoners and their families to make a fresh start and to minimise the harm that can be caused by imprisonment to offenders, families and communities.

*Pact* runs its first night services in three prisons: HMP Exeter, HMP Holloway, and HMP Wandsworth. The aims of the first night services are to:

- Reduce the likelihood of prisoners attempting suicide or harming themselves during their first 72 hours in custody.
- Reduce the anxiety faced by prisoners to enable them to cope better with the emotional impact of imprisonment.
- Reduce the anxiety faced by prisoners' families and loved ones.
- Support the maintenance of contact and visits between prisoners and families.
- Ensure that information about resources and support available to new prisoners is provided.

The pilot first night service in HMP Holloway was evaluated in 2002 (Grimshaw et al., 2002). Since then, there has been no further review of the work, although the Howard League for Penal Reform conducted some research into Holloway's first night in custody centre (Howard League for Penal Reform, 2006). In January 2007, *pact* asked the Prison Reform Trust (PRT) to carry out an independent review of its first night services. This review was supported by the Wates Foundation.

This report presents the findings of the PRT review, and includes recommendations for the development of the first night service.

## Independent review by the Prison Reform Trust

The aim of the review was to assess the impact of the *pact* first night service, within the context of a broad understanding of how people cope during the first few days after they enter prison. Hence the key questions addressed by the review were:

---



*What are the most common and the most serious concerns people have upon entering prison?*

*How do pact's first night services seek to address these concerns, and to what extent are they effective in doing so?*

*What other kinds of first night services are in operation?*

To assess the value of alternative models of first night support, PRT conducted fieldwork in three 'comparison' prisons and a prison in Scotland as well as in the three prisons that have the *pact* service. The three comparison prisons were selected to match approximately the three prisons working with *pact*; these are thus referred to as CompW, CompH and CompE in this report. (See Section 2 for a description of all seven prisons included in the study.)

In each prison, the PRT researchers were shown around the reception, first night and induction units, and discussed the procedures with prison staff. PRT interviewed *pact* managers and staff about the aims of the first night services and the key aspects of the *pact* role. In addition, PRT held informal group discussions with *pact* workers, prisoners and prison staff, which explored the concerns people have on entering custody, and how their needs can be met.

The main element of the fieldwork was one-to-one interviews with about 15 prisoners (henceforth referred to as participants) in each prison. All had recently entered custody. The interviews explored the participants' feelings and worries on arrival at prison, the help they received during their first few days in custody, and the value of this help. In the three prisons working with *pact*, the interviews also included questions about whether the participant had seen a *pact* worker and, if so, what help they received. The full interview form is presented in the appendix.

## **Interviews with prisoners**

PRT asked each prison to select about 15 people who had been at the prison for between two and six weeks, including some first-time prisoners. A total of 91 participants were interviewed across the six English prisons. Most had arrived within the past three months, and almost half had no previous prison experience. Of the 91 participants, 42 were on remand when they arrived; 37 were sentenced; seven were convicted and unsentenced; and five had been recalled.

There were stark contrasts between the groups interviewed across the prisons. In Wandsworth, nine participants had been to prison at least six times previously. In CompH, no one interviewed had been to prison more than twice previously; and nine of the 15 had never been to prison before.

Almost three-quarters (65/91) were white; 15 were black; six were mixed race; three were Asian and two listed their ethnic status as other. The proportion of participants

from white ethnic backgrounds ranged from 50 per cent (at Holloway) to 100 per cent (at Exeter). Four-fifths stated that they were British, but here again there were variations between the prisons. In Exeter, all of the men PRT spoke to were British, and in Holloway seven of the 16 participants were foreign national prisoners.

Although 91 participants were interviewed in England, the comparatively small number PRT spoke to in each prison makes it difficult to generalise findings to the wider population. Indeed, in certain respects, the samples differed widely. For example, at the time of the interviews, under half of the population at CompH were remanded, whereas 87 per cent of the women interviewed were on remand at reception.

## **Background to the project: the transition into custody**

The review was partly intended to look at how prisons can reduce the anxiety some prisoners feel on entry to prison. Factors that contribute to distress have been analysed by other prisons research. For example, Alison Liebling's team at the Prisons Research Centre, Cambridge, analysed the causes and effects of stress in local prisons. Liebling found that levels of distress were much higher in some prisons than in others, and that distress levels among prisoners could be traced both to aspects of the regime and to the characteristics of the people sent to that prison.

A national survey by Jenny Shaw found that a third of the self-inflicted deaths in custody between 1999 and 2000 occurred within the first week of custody (Shaw et al., 2004). Liebling vividly illustrated the typical experience of someone coming to prison:

*Prisoners were at their most distressed on entry into custody. They were often in a very poor state of mind, were incapable of absorbing information, and were sometimes terrified. They came in with 30 or more others, were frequently withdrawing from drugs, and often spent long periods in holding rooms. They were often well aware that they had 'messed up their lives, again'. Phone calls, when they were available, only worked if families happened to be in. One newly appointed suicide prevention coordinator said, 'I didn't expect to see so much self-harm and sadness in a jail. It has been very difficult and stressful'. (Liebling et al., 2005)*

Most prisoners have some emotional and social problems (SEU, 2002). Liebling described the characteristics of prisoners that tend to increase their stress levels as 'imported vulnerability'. She showed that imported vulnerability affected the way newly arrived prisoners responded to the prison environment: "These instabilities render individuals especially sensitive to isolation, inactivity, frustration and lack of safety" (Liebling et al., 2005).

Levels of imported vulnerability differ from one prison to another. Thus, for example, at one of the prisons in her study, a quarter of prisoners said that they had previously attempted suicide, whereas this was true of one in ten at another of the prisons.

Mark Ratcliffe (2005), reporting on a pilot reception programme in HMP Leeds, found high levels of distress among people coming to prison for the first time, but also that the levels of frustration and hopelessness were particularly high among repeat offenders.

Joel Harvey (2007) focused on young men entering prison. He found that how they coped with the loss of control was a strong influence on their levels of distress in the first 48 hours. Many roles the person had played outside are taken away, or dramatically changed, by imprisonment:

*Prisoners presented themselves as midway between two separate worlds, as they neither relinquished their hopes for the lives from which they had been torn, nor yet accepted their existence within a new enclosed order.* (Harvey, 2007: 31)

Harvey found that when prison took away the person's ability to play a responsible role outside, the effect was to increase their dependency and lower their self esteem:

*Prisoners found it difficult not to be able to control what was happening "on the out" and feared the impact that this might have when they were eventually released. This inability to control the world they had left dominated their thoughts on their first night and contributed to their feelings of uncertainty.* (Harvey, 2007: 41)

Harvey found that the young men who were most distressed by prison were those who felt that they had no control over their lives; those who found it difficult to adapt; and those who felt unsafe.

The Safer Prisons Evaluation concluded that much could be done by the receiving prison to reduce the prisoners' anxiety levels:

*Highly vulnerable prisoners were significantly less distressed when they were in prisons where they spent less time locked in a cell; where they had employment in the prison; where association was less frequently cancelled; where they were doing offending behaviour courses; and where they had regular and good quality contact with their families.* (Liebling et al., 2005)

Peer support is another initiative that shows promise in reducing stress for newly arriving prisoners. In recent years, prisons have significantly expanded the role of prisoners in the tasks of providing care. The key example is the Listeners scheme. Prisoner volunteers provide peer support to other prisoners who are in despair and suicidal. The idea is described in a Prison Service guide to good practice:

*The Listener scheme is a system whereby selected prisoners are trained and supported by Samaritans, using their same guidelines, to listen in complete confidence to their fellow prisoners who may be in crisis, feel suicidal or who need a confidential sympathetic ear. The objectives of such a scheme are to assist in preventing suicide, reducing self-harm and generally to help alleviate the feelings of those in distress.* (HMPS, 2001: 8)

'Insiders' is a distinct peer support scheme, targeted at reception (see HMPS, 2003). Prisoners are trained to provide information, advice and assistance to new prisoners during the first few days of custody. Insiders are also referred to as 'Buddies' or, in CompH, 'Connections Workers'. These schemes are intended to complement Listeners, by reducing the stress of entry into prison – but not to provide specialist peer support to people who are potentially suicidal. Crucially, Insiders do not work under a code of confidentiality, and they can inform staff if they have concerns about something a prisoner has told them.

## Structure of this report

Following this introduction, the next section sets the key findings in context by describing the first night services and facilities in all six English prisons.

Sections three to five present different aspects of the findings of the 91 interviews conducted with prisoner participants in the three *pact* and three comparison prisons. Section three describes the range of worries and concerns that the participants reported having on arrival in custody. This includes consideration of that sub-group of participants who appeared to have the highest level of need. Section four looks at the extent to which and ways in which participants in the prisons working with *pact* were helped by *pact*. Section five considers factors other than the presence or absence of *pact* that affected prisoners' experiences during their first few days in custody: namely, relations with other prisoners; the attitudes of prison officers; the environment and facilities of the first night unit; the quality of healthcare; and the availability of information.

Section six presents the findings of the research conducted in Scotland, and draws some points of comparison between the findings from the Scottish prison and those from the English prisons.

Section seven concludes the report by, first, reiterating the key findings to emerge from the research; secondly, drawing out some of the major implications of these findings; and, thirdly, presenting a series of recommendations for the development and expansion of first night services.



## 2 The prisons

### ***Pact's* first night in custody services**

*Pact* began its first night services in 2000 in Holloway prison, where it was already running the visitors' centre. The first night services had two paid staff and six volunteers who interviewed women as they came through reception, and identified prisoners who were most seriously distressed. *Pact* provided advice, help, and emotional support. The pilot project was evaluated by King's College, London, in 2002 (Grimshaw et al., 2002).

In 2005, Holloway prison, after consulting with *pact* workers, established a dedicated first night suite. As women came into the prison, they were taken to the first night suite, where they received more information and help from *pact*, specially trained prison officers, medical staff and Insiders.

In 2003-2004 *pact* initiated a collaborative project with Exeter prison to apply the first night service model to a male local prison. In Exeter, *pact* ran the visitors' centre, and its role extended to providing a family support service and supervised children's play area. The Exeter first night unit was similar to the Holloway model, but featured a more central role for Insiders.

Establishing *pact's* first night services in Wandsworth prison presented a very different set of problems. Wandsworth is nearly three times as large as Exeter and the numbers of people coming into the prison on any given night makes it impossible to provide a personal advice and support service to every one of them. The service in Wandsworth was only a year old when PRT began its review, and the model was still being refined. However, as at Holloway and Exeter, *pact* staff worked closely with prison officers and medical staff to provide advice and support to prisoners on a wing intended to accommodate prisoners for the first few days of custody.

### **Prisons where *pact* provides first night services**

#### **EXETER**

Exeter prison had a population of about 530 at the time of PRT's fieldwork. The first night centre is not overnight accommodation, but a stage that all prisoners are meant to pass through between reception and the induction wing. *Pact* worked closely with Insiders in developing the service. New prisoners are taken through a process that integrates the roles of four partners: an officer for cell-sharing risk assessment, a nurse, an Insider and *pact*.

The process is co-ordinated by the Insiders to ensure that each new prisoner sees all four partners. Insiders provide information about the prison and go through a checklist to determine whether the man has any immediate problems. In this way, they can refer the new prisoner to the *pact* worker if that link has not already been made. There is little

duplication among the four partners and there is a healthy degree of collaborative working, for example, discussing concerns about an individual's risk of suicide.

*Pact* also operates the visitors' centre and ran a family support programme. These projects are well-integrated. However, at the time of PRT's visit, the funding for *pact's* first night services at Exeter was unstable.

## **HOLLOWAY**

Holloway prison's capacity is 478 and it serves the courts of central London. As a result, women move through the prison quickly, with many staying for less than two weeks. Holloway was one of the first prisons to establish a dedicated first night centre, which accommodates 17. The environment was designed to be as welcoming, personal, and non-institutional as possible (for example, it is carpeted). Prisoners needing detoxification are housed on a specialised unit. Holloway also has a mother and baby unit.

In the seven years since it was established, *pact's* first night in custody service in Holloway has worked with over 11,500 women prisoners. *Pact* also runs, through the visitors centre, one-to-one family support and family support groups.

## **WANDSWORTH**

The Wandsworth first night unit was fairly new when PRT began its fieldwork in March 2007. The prison holds over 1,500 men, and receives about 45 new prisoners per day. Prisoners are quickly taken through the reception processes and then moved across to the first night centre. Vulnerable prisoners are accommodated separately, on a Vulnerable Prisoner Unit.

On the first night unit, new prisoners follow a set structure, so that they are seen by Insiders, are assessed for cell-sharing risk levels, see the doctor or nurse, and are then assigned a cell for the night. An induction programme begins the next morning.

*Pact's* role was also changing during the PRT fieldwork. When it was originally set up, *pact* had a desk in reception and tried to see all prisoners as they came through. At first, the *pact* team tried to interview every prisoner as he came in. But the high turnover meant that this approach was unsustainable. A *pact* worker could not address the often complicated needs of one prisoner and speak individually to all the prisoners after they were seen by induction officers.

While PRT was there, a new system was put in place whereby the induction officers, conducting their interviews, explained the role of *pact* and then asked the prisoner if he would like to speak to them. Hence, *pact* was working with all new prisoners who made an explicit request for their first night service. In more quiet periods, the *pact* workers go to some of those who declined. This is, in part, a double check (a prisoner might not have told the officer that he wanted to be seen) and, in part, a way of offering a service to someone whose need had only just arisen.

In Wandsworth, where there are so many staff in induction, the role of *pact* workers had to be very clearly understood. A wing manager explained the relationship between officers and *pact* workers to PRT:

*It's good, now. There were problems in the beginning. It wasn't really clear how they were meant to fit in. Even now, if there is an officer who doesn't know pact, they can wonder what they are doing here. But it's much better now, we have worked together. For example, we have a form which officers will fill out and it streamlines the process so pact workers will target the most needy cases.*

### **Pact workers' views on their roles**

The role of *pact* workers is similar in the three first night in custody centres. *Pact* workers:

- identify the prisoners' needs
- ask what worries them most
- refer them to appropriate services
- liaise with families and
- follow up individuals who need longer term support.

In Exeter and Holloway, *pact* workers try to speak personally to each prisoner on their first night. In Wandsworth, because of its high turnover, *pact* workers were dependent on officers who identified which prisoners were in need of *pact's* services. Even so, the turnover in Wandsworth, coupled with the depth of some individuals' needs, can leave *pact* workers feeling overwhelmed. Undoubtedly, some who really need their services are missed.

Many local prisons assess prisoners' needs and sometimes refer them to relevant agencies. A very small number of prisons in England and Wales have designated 'Family Liaison Officers'. And it is the norm in local prisons to allow people a brief telephone call on reception. Such practical help leads to these questions:

- What is the particular value of *pact*?
- What role(s) do *pact* workers play that is not already covered by prison staff?

In each of the prisons working with *pact*, PRT spoke to the *pact* workers about the work they do. Terminology reveals some important characteristics of the contribution made by *pact*. Officers 'receive' prisoners from the courts. A *pact* worker described how she 'greet' the women as they arrive. In reception, an officer assesses the prisoner's level of risk. *Pact* workers talk to the person to identify their needs.

Crucially, *pact* workers liaise with families. Their link with the prisoners' families often begins with basic information (about where the prisoner is, how to arrange a visit, or deciphering Prison Service jargon). But working with families often goes far beyond providing information, to helping the family to manage the problems that arise when the person is sent to prison. Having made contact, *pact* also provides ongoing support to



families; as, for example, in Holloway where there is a family support group. The fact that *pact* also runs the visitors' centre enables them to provide long-term advice and support and to maintain personal contact when the family comes to visit.

*Pact* workers also gave their perspective on the services which they provide for prisoners. The less formal approach typical of voluntary agencies influences their working relationships with prisoners. One *pact* worker explained that she believed it was important that she was there to let prisoners know that there is someone in the prison who cares personally about them; who will agree to do something for them, and then actually do it; who will let them know it was done; and will do all of this with a friendly and non-judgemental attitude. She felt that *pact* helped prisoners, 'not to feel so isolated and faceless.'

## The comparison prisons

### CompE

The population at CompE during the fieldwork was just over 500. Reception deals with about 30 per day. A large proportion of its prisoners are short-term and have been to CompE many times previously. As in other local prisons, the intention is to run a quick reception process and move new prisoners onto the dedicated first night unit.

The first night unit was designed and decorated to look different, and more welcoming, than a prison wing. It has a capacity of 22 and the average stay is 48 hours. Staff are dedicated to induction work, and provide pamphlets and spoken information about the prison. Listeners and Insiders are available to work with any prisoner who requests one. Prisoners needing detoxification are placed on a special wing for that purpose.

### CompH

CompH is fairly new, and its appearance is spacious and attractive. Its capacity is 450. On the day of PRT's first visit, 19 prisoners were discharged, a number an officer described as 'fairly low'. The prison has a large catchment area which includes air and sea ports.

Almost half of the population are foreign national prisoners. This high proportion poses particular problems for CompH. The prison has attempted to cope with language difficulties by maintaining a list of all the languages spoken by staff and resident prisoners. Many of the UK citizens have problems of long-term drug dependency. A manager said to PRT that these tended to be the prisoners who persistently returned.

The reception process is brief: cell risk assessment, assessed risk of suicide, a quick check by a nurse, introduction to a Connections Worker (Insider) and distribution of pamphlets about how the prison works. Prisoners are quickly moved across to the induction wing, where they are settled in for the night. The induction programme begins the following morning.

The Insiders at CompH are called 'Connections Workers'. The scheme was designed to have 16 trained workers, but the rapid turnover meant that at the time of PRT's interviews, only five were active. Two of them were assigned to reception and told PRT

that they often missed some of the women who came through. The reception Connection Worker would then try to visit the induction unit the following morning to catch up with anyone she had not seen.

PRT discussed the reception and induction process with a Listener. She said she was often called upon to support women who had newly arrived. She observed that what seemed to drive many women to breaking point was a lack of simple information which they ought to have received. She described the desperation of some women who had not been told how to make a phone call.

### **CompW**

CompW holds over 1,400 men. The reception process is brief. There is a wing dedicated to first night services, which has a capacity of 78, mostly in double cells. Vulnerable prisoners are managed separately.

In theory, new prisoners are held on the first night unit for one night only, and receive a first-stage induction the following morning (including an assessment of their urgent needs). On the second day, they are moved again, to a second stage induction wing; and from there, they are assigned a place on normal location.

On the first night unit, prisoners are interviewed, or seen informally by:

- The chaplain
- CARATs workers
- The Resettlement Officer
- The first night officer
- Insiders

The first stage induction sets out prison policies, including drugs, race relations, discipline, suicide prevention, and violence reduction. There is no other regime on the unit and prisoners are otherwise locked behind their doors.

A first night officer conducts an interview, following a set protocol, which checks on the person's risk of harming themselves, drug dependency needs, and problems with housing or family relations.

PRT spoke to the Insiders who were assigned to the first night unit. The Insiders felt trusted and valued by the prison staff on the wing and the first night staff clearly worked closely with Insiders in welcoming new prisoners. Part of the Insider role was to supply the new prisoner with a smokers' or non-smokers' pack, an information pack, and their breakfast. The Insiders told PRT that prisoners would often tell them about problems which they would not have told an officer. They believed the Insider role was focused strictly on information about the inside: if a prisoner were to ask about anything to do with the outside, the Insider would refer that prisoner to an officer.



## 3 Prisoners' concerns on arrival

This section explores the problems that worry prisoners in their first few days. The evidence presented applies to both the *pact* and comparison prisons.

### Feelings and worries on arrival at prison

The first question PRT asked participants was:

*How were you feeling when you first came to this prison?*

People reported a wide range of emotions upon entering prison, from utter desperation to general acceptance of the situation. A majority – 53 out of 91 (58 per cent) - reported feeling at least some anxiety or distress on arrival.

Eighteen people – about one in five - said that they had felt all right or 'normal'. Three explained that their main feeling was relief; two of whom said that they had been held in the police cells for a few days. The remaining 20 participants did not speak in general terms about their emotional state on arrival. Examples of responses to the question about general feelings on arrival are provided in Box 3.1.

#### **Box 3.1 Examples of comments about feelings on arrival at prison**

*Horrendous. I had never anticipated I would be in prison. And I felt lost. Very, very scared.*

*Destroyed, panicking, worrying ... crying, disbelief.*

*Apprehensive, scared, worried, sad. Everything, apart from joy.*

*I feel bad because I never been to prison. My first time. ... In reception – I never seen such a thing like that ... Strip all the things off my body.*

*Pretty low ... Suicidal actually, to tell you the truth.*

*In a bit of a daze, really.*

*Withdrawing from heroin ... Pretty sick.*

*Like I normally do; felt all right.... I knew I was coming back here ... I'm institutionalised!*

*I was looking forward to getting here. You've got a chance when you get here if you have any concerns, drugs, family. Whether anything could be done is a different story, but you are asked.*

*Every time I've been here, the officers are so polite and helpful I wasn't nervous or anything.*

*I was fine. I knew what I was expecting.*

PRT explored the concerns people had when they entered prison further by asking:

*When you first came in, was there anything about this prison that you were thinking about or worried about?*

*When you first came in, was there anything to do with what you had left outside that you were thinking about or worried about?*

These open questions enabled the participants to describe pressing problems in their own terms. Over half (48/91: 53 per cent) said that they had worries about what they would find in prison, while over three-quarters (70/91: 77 per cent) said that they came in with worries about the outside. Important differences emerged between prisons; in particular, the proportion of prisoners who cited worries inside ranged from 20 per cent in Exeter to 87 per cent in Wandsworth.

We discuss the worries prisoners reported in two sections, first those concerns about life inside the prison; then, those that had to do with the outside world.

## Worries inside and outside prison

### Inside worries

As presented above, worries about the inside were mentioned less often than those outside. The most common worries prisoners expressed about the inside were:

- not knowing what to expect; a sense of the unknown
- how other prisoners would react
- drug and alcohol problems, such as withdrawal symptoms
- physical and mental health (including two women who were pregnant on arrival)
- scared that prison would be as it appears on TV or film
- apprehension about being locked up
- personal welfare, such as coping with diet, noise, poor hygiene

The anxieties of facing the unknown featured strongly. Eight participants - all first-time prisoners - mentioned a fear that prison would be like it is portrayed on television or in films. Four were women who specifically mentioned the TV series 'Bad Girls'.

Only seven said they were apprehensive about the physical constraints of prison life. One woman mentioned being claustrophobic and said she was 'scared of getting locked up'; another said she was thinking that, 'I'll be in an enclosed place – no movement, no freedom'. A male prisoner commented, 'Already, I didn't know what the outside look like. Once on Sunday, they allow you out to take the fresh air.'

Knowing about prison life – how to get by day to day, how people are likely to behave – can clearly reduce the anxiety one might feel upon entering the prison. And many of the worries about life inside were predominantly reported by first-time prisoners. There are obvious links, for example, between a lack of previous experience and a fear that prison will be as it is on TV, or not knowing how one will react to being locked up. However,

other concerns could be equally typical of those who had previous custodial experience (withdrawal from drugs and wider health problems are two examples).

### **Outside worries**

Regarding outside concerns, family problems were mentioned much more frequently than any other - by 56 participants (62 per cent). Concerns about their children or occasionally grandchildren were cited by 28; 16 mentioned their parents; and 15 mentioned their spouse, partner or boyfriend/girlfriend. The main areas of concern about families included: letting them know what had happened; ensuring that the family was ok; and trying to maintain contact with them. Several foreign national prisoners interviewed were particularly anxious that they had not been able to contact family members on their arrival in prison.

Fifteen participants focused on the problems of being separated. For example, one man said that on reception he was:

*Upset cos of the situation and being away from the wife and child ... This is the first time we've been apart.*

Others described particular problems, such as wondering how their family would cope without them. One in ten said they were very worried about arranging visits. Others (including some British nationals) said that arranging visits was not a problem that applied to them, because their family lived too far away or were unable to travel.

*My ... mother can't visit me. My wife suffers from schizophrenia, and she can't make the journey.*

*They live [150 miles away]. It's difficult for the family to visit. ... They have managed to come, but they didn't get home till midnight.*

In addition to these, a few wondered aloud what their families would think of them; or expressed anxiety about family members who were unwell.

Other outside worries were reported. A few participants spoke generally about the likely impact of imprisonment on their lives and their life chances. For example:

*[I was worried about] probably losing everything I have.*

*[I was worried that] I'll not take any step to better my life.*

*[Friends who have gone to prison have] come out ten times worsen ... You learn new criminal skills in jail ... [but] I don't wanna come out worsen; I just wanna come out better.*

Other outside problems included housing, money and property. The main housing concern was whether their current accommodation could be maintained while they were in custody. (Two participants said that they were worried about how their mortgage would be paid.) Twelve participants mentioned worries about unresolved legal issues. One

woman wondered about how her imprisonment might influence a forthcoming prosecution of rape in which she was the victim. For about one in ten participants, employment – that is, the prospect of losing current employment and/or having difficulty finding a new job on release – was an acute concern.

### Specific areas of concern

Participants were also presented with a list of specific areas and asked how much they were worried about each item. Table 3.1 shows the proportion of prisoners who reported feeling 'very worried' about each area.

**Table 3.1** *Areas that prisoners were most concerned about*

Area	Number	Percent of sample
Feeling low, upset	36	40
Letting family know where you are	32	35
Finding out if family are okay	31	34
Money worries	31	34
Housing problems	28	31
Getting your property	27	30
Health problems	19	21
Had no tobacco	17	18
Needing someone to talk to	14	15
Needing protection from other inmates	12	13
Helping family arrange visits	11	12
Coming off drugs	8	9
Arranging care for children/other relatives	7	8
Alcohol problems	4	4

A third (33/91: 36 per cent) said that in addition to these, they had other worries, which included, for example, a fish pond requiring maintenance, a car left in a public car park, and not getting a meal when arriving late to the prison.

Here again, concerns about the family were very widespread; particular worries were about being reassured the family was ok and that they knew the prisoner's whereabouts. The second most common theme had to do with social problems, such as housing, money, and property.

Only about one in eight participants said they were very worried about needing protection from other prisoners. Women participants were far more likely than men to say they were 'very worried' about needing protection. None of the 23 male first-time prisoners said they were very worried about needing protection from other prisoners, in contrast to half of the 20 women first-time prisoners.

## Differences between prisons

In all six prisons, four of the items on the list - letting the family know where they were, money, property, and feeling upset - were among the most common concerns. But there were some strong differences. For example, feeling upset was a serious worry for almost 90 per cent at CompH; yet not a single person interviewed at Exeter said they were very worried about feeling upset. The proportion who said they were very worried about letting the family know where they were ranged from a fifth of participants at CompE to almost two thirds at Holloway. Money was a cause of serious worry for over half at the women's prison CompH and only 13 per cent at Exeter. Property was cited as a serious concern by only one in four at Holloway, and by two-thirds at its comparison prison, CompH.

These disparities may reflect the small size of the sample at each individual prison. But it is a possibility worth exploring further that different populations reflect these needs in different ways, so that one prison should be doing more to target problems with debt, while another should be more focused on housing, and still another, on emotional well-being.

## Thoughts of suicide and self-harm

All participants, whatever their answers to the preceding questions about worries on arrival, were asked directly if they had had any thoughts of suicide or self-harm during the first few days they had spent in the prison. Most participants said that they had not, and some were adamant:

*No. Only a weak person harms themselves.*

*No. Never do that. Never do that. That's for weak people.*

*No, I wouldn't think of it.*

Eleven of the 91 prisoners interviewed (12 per cent) said that they had considered or attempted suicide. A disproportionate number, four of them, were at one prison, Wandsworth. One of the 11 commented, 'It [suicide] was going through my mind ... I couldn't take it. I was in a nightmare'. Two said that their suicidal thoughts were a direct result of the withdrawal symptoms they were experiencing.

A different aspect of suicidal thinking which emerged through the interviews was that, for some, the risk of a suicide attempt rose or fell dramatically over a period of time. As one prisoner explained to PRT:

*Things like thinking, 'I'm going to kill myself,' come out of the blue. It doesn't happen because you're thinking about it, planning it – but because of all the stress.*



The situations described to PRT showed very wide-ranging circumstances: One interview was delayed because the participant was in the hospital wing after having cut his arms. Officers expressed their concern that he might continue to harm himself. He said in interview that during his second week in the prison, 'my head went'.

Another man said that he had felt suicidal just before coming to the prison:

*In the police cell I thought, 'That's my life, over.' Withdrawal symptoms, food poisoning: just give me the rope. It only lasted a day. That is why I kept smoking: to try to calm myself down. I've come through it – it only lasted 24 hours.*

For another prisoner, the prospect of being moved to another prison had triggered suicidal thoughts: 'I felt low as it was, and then they were going to smack me in the face like that.'

A woman prisoner said she 'used to be a self-harmer', and that this 'goes up and down'. Another woman said that after she had been in the prison for about a month, she was put on a suicide watch, because she was so worried about her home and particularly her children. Although she did not really want to end her life, she said, 'It just came across my mind ... I felt the walls were closing in on me ... I was having bad dreams ... the small, confined space.'

It is beyond the scope of this review to estimate the proportion of prisoners for whom the risk of self-inflicted death changes over time. However, these examples show that the challenge of identifying a prisoner at risk is compounded by the episodic nature of suicidal thinking.

Still other prisoners were somewhat equivocal in their answers to the question about whether they had had thoughts of suicide or self-harm. One, for example, replied: 'Not really. It's a tough thing. I'm in for something that could be five years. My mum asked them to keep an eye on me.' Another said that she had not considered suicide, but she sometimes thought, 'it is better if I die when I was young because I have so many problems ... All the time it comes in my head.'

Of the 11 participants who said that they had felt suicidal on arrival, just over half said that they received help at the time. It appears that the help (if any) offered to the potentially suicidal or self-harming participants had varied widely. Some made it clear that they had not sought help, or did not believe that genuine help was available.

One woman who described herself as suicidal on entering prison, having tried to kill herself at the police station, said that the nurse on reception noticed that she had cut her wrists, but simply gave her some spray for the cuts and (it seemed) did not pass on information about the suicide attempt to officers on the wing.

A woman who described herself as someone who formerly harmed herself said that whenever she attempted to talk about this to the doctor, she was told that she was fine and only looking for medication.

A male participant described the officers' response to his suicidal feelings as follows:

*Someone asked me and I told them I was feeling low. They chuck you in an isolation wing with a Perspex door for observation, with no amenities. Like a goldfish bowl, everyone can see you; subhuman.*

PRT asked who had provided help to those who were supported through the crisis, and the responses were evenly divided among the following sources: Listeners, prison staff, and others, with one explicitly citing the chaplain. Four participants said they had talked to Listeners when feeling very depressed, which was helpful – but another said that the Listener on her wing was known to betray the confidences of those who came to her for help. A Muslim participant said he had been helped to resist suicidal thoughts by the Imam and other Muslim prisoners. Some mentioned help received informally from other prisoners:

*We [prisoners] help each other ... You'd be amazed – we're the scum of the earth ... but there are people here I'd trust with my life.*

The support *pact* workers could give to someone in distress is illustrated in Personal Story A:

### Personal Story A

#### Mr A

##### a. Background:

convicted unsentenced  
previous experience = 3-5 times  
Asian man, dual national, did not give age

Mr A was very distressed at the time of the PRT interview, and wing staff asked if they could keep an eye on him during the interview itself. Mr A described a previous prison experience that haunted him:

*I was so stressed out in [another prison]. My cell mate hanged himself. I had flashbacks. I had tried to help him, lift him up. By the time the officers came, he was dead. When I was here, I tried to hang myself. I was released when the evidence showed I had done nothing.*

##### b. Circumstances on arrival:

Asked to describe how he was feeling when he came to this prison this time, Mr A explained:

*I was going to hurt myself. I can't take it. Same nightmare. I'm not here. I'm a zombie. It's a nightmare. Medication is giving me dry mouth. I can't sleep. I am a broken man.*

**c. Worries & needs:**

Mr A's worries were all about the outside. He was contesting the finding of guilt against him, and finding that process very upsetting. It was particularly emotional for him as members of his own family were testifying against him. Asked if he was feeling suicidal at the time of the PRT interview, Mr A replied:

*I was not thinking about it. I was so stressed from court. And I found myself back in here.*

**d. *pact* support:**

Mr A was asked whether he had been helped by *pact* while at the prison. Initially uncertain about who *pact* was, he expressed his gratitude for their support:

*I think there's a lady. Very nice. God bless. She was very helpful. She tried to help. She tried to contact my family. Specially the lady from *pact*. She was very helpful; very willing to help. When I tried to explain, she did understand. When I said I'm worried about my kids, she said, 'I'll phone them for you,' and she came back with an answer and that gave me relief.*

## Prisoners who were most worried

The interviews enabled PRT to identify some of the characteristics of prisoners who came in with particularly high levels of need. We did this by scoring the prisoners' responses on the basis of a list of factors:

- Worries about the outside
- Worries about the prison
- Needing protection from other prisoners
- Needing to let their family know where they were
- Childcare worries
- Knowing that family are ok
- Arranging visits
- Feeling upset
- Needing to talk to someone
- Housing concerns
- Suicidal thoughts

Applying a threshold for all of the 91 participants in England would have meant that the high need group would be disproportionately composed of women. Thus, PRT used a different cut-off mark for male prisoners to approximate the balance in the interview

sample (two to one male to female). The high need group comprised 21, 15 of whom were male. Twelve were in prisons working with *pact*, and nine were in comparison prisons.

Over a quarter of those with no previous prison experience were rated in the high need group, as were 38 per cent of prisoners with much previous prison experience. None of the prisoners who had been in prison once or twice previously, and only one of the 11 who had three to five previous prison terms were rated as high need. The analysis suggests that prisoners with high levels of need are very likely to be those with no previous prison experience or with much previous experience of custody.

**Table 3.2 Previous prison experience in the high need group**

	Never	1 - 2 times	3 - 5 times	Much prison experience	Total participants
Prison experience (number)	43	16	11	21	91
High need group	12(28%)	0	1(9%)	8(38%)	21(23%)

Legal status was another indicator, as prisoners on remand were much more likely to present high levels of need than sentenced prisoners. Of the 42 on remand, almost a third were in the high need group, as compared to only five of 37 (14 per cent) of sentenced prisoners. Prisoners holding foreign nationality were slightly more likely to be in the high need group, as just under one in three prisoners holding foreign nationality were identified as high need, in contrast to 21 per cent of UK prisoners interviewed.

*Pact's* work with people with high needs can be seen in the example of Personal Story B.

**Personal Story B**

**Ms B**

**a. Background:**  
remanded, arrived three days ago  
previous experience = none  
32 year old  
British Asian woman

**b. Circumstances on arrival:**  
She said she was 'quite upset' when she arrived, as the previous two days had been spent in police cells. She had not seen her boyfriend since then and had not had a chance to speak to any of her family. She was also worried about what the prison would be like, as a guard at the magistrates court told her it was one of the worst prisons.

**c. Worries & needs:**

She was very worried about her boyfriend and family. She felt she needed someone to talk to and was very upset. She was also very worried at the prospect of being moved from the first-night centre to the main wings.

*What's the point of giving people false hopes by putting them in [the first-night centre]? You're put on there to help you calm down, but by Monday you're going to have to go through all the rigmarole again, all the emotions.*

Ms B was granted bail, but the prison was not informed by the courts in time to release her that day. She knew her family was outside the gate, but she was not able to speak to them.

**d. *pact* support:**

A *pact* worker made a phone call to her boyfriend. Her sister was with him, so Ms B was able to speak to her as well. Her sister was crying, but they had to cut the conversation short. She didn't get to finish the conversation. This stayed on her mind afterwards – that her sister was upset, and she couldn't explain things to her.

Ms B said that the *pact* worker was 'quite helpful' but rushed (not her fault).

*They're very helpful: to the point that they can help you, they do – but there's only so much they can do. It's not their fault – it's the system. If someone's been in police custody, they should have the opportunity to see people, or talk to them. If you want to make phone calls to explain, the £2 limit is not much.*

A slight majority of the high need group (12/21) said that their problems had not been resolved in the first few days of imprisonment. Five said they had been solved and two said they did not need help with their problems. Four of the five who said their problems had been solved were in the prisons working with *pact* (for more on the input of *pact*, see Section Four).

## The influence of previous prison experience

The high need group was comprised almost exclusively of first-time prisoners, and those with five or more previous times in custody ('very experienced prisoners'). This suggests that services for these prisoners could be better targeted by evidence about how their needs differ. Table 3.3 shows how the sources of anxiety compared for first-time and very experienced prisoners.

These figures show the common ground and differences between first-time prisoners and very experienced prisoners. A broad observation is that first-time prisoners were more likely to report being anxious than very experienced prisoners.

**Table 3.3 Worries of prisoners, comparing very experienced prisoners (over five times previous in custody) with first-time prisoners (never in prison before)**

		Over five times (n=21)	Never (n=43)	
Rank	Outside worry	62%	Outside worry	81%
	Inside worry	57%	Inside worry	65%
1	Money	33%	Feeling upset	53%
2	Let family know	33%	Let family know	49%
3	Family ok	29%	Family ok	47%
4	Housing	29%	Property	39%
5	Tobacco	24%	Money	35%
6	Feeling upset	24%	Need someone to talk to	28%
7	Health	19%	Housing	28%
8	Property	19%	Protection	23%
9	Drugs	19%	Health	19%
10	Need someone to talk to	10%	Visits	16%
11	Protection	10%	Tobacco	12%
12	Visits	5%	Childcare	7%
13	Childcare	5%	Drugs	5%
14	Alcohol	0%	Alcohol	0%

To summarise the table:

Whether they were first-time prisoners or had substantial previous experience, participants were likely to state that they had worries about their families.

More first-time prisoners than very experienced prisoners said they had worries outside. They were also much more likely to say they had worries outside than inside the prison.

Far more first-time prisoners than very experienced prisoners said that feeling low or upset had made them very worried.

Although many prisoners said they were worried about money problems, this was the most common worry for very experienced prisoners and was only the fifth most common among first-time prisoners.

Compared to other sources of worry, very experienced prisoners were more likely than first-time prisoners to list housing problems and a lack of tobacco as a serious problem.

Compared to first-time prisoners, very experienced prisoners were far more likely to say they were very worried about drug problems.

The role of *pact* in providing advice and help to first-time prisoners is shown in Personal Story C:

### Personal Story C

#### Ms C

##### **a. Background:**

sentenced = 10 weeks

previous experience of custody = none

21 year old woman

##### **b. Circumstances on arrival:**

Ms C said she was feeling 'all right' when she came in, because she got a short sentence. But with no previous experience, she didn't know what to expect. She had not had time to think about it, as it only took 10 minutes from the court to the prison. She had not thought about prison before because her solicitor had said she would get a community sentence. She was 'shocked' when she got the sentence, but thought – she should just get on with it. 'It's 10 weeks – it's a short sentence.'

##### **c. Worries & needs:**

Ms C she that she was 'very worried' about: property, letting her family know where she was, and housing. She felt strongly that the phone call she had been allowed was too short. Two minutes had not been enough to give the person she called all the necessary information. She said she felt like they only gave her one minute, and it cut out automatically before she had time to tell the person her prison number.

She had no money, so she couldn't get credit for further time on the phone. She had to wait till the second week to get phone credit, and she was here two weeks before she got her first canteen – so she didn't get her own toiletries, etc. 'It's hard if you've got no money for phone calls.' She wanted to call the housing office but couldn't. She had a £2 credit on her pin, which she was told she had to use within 48 hours. She phoned her Dad and it was gone.

##### **d. *pact* support:**

Ms C mentioned unprompted that she had seen *pact*. When asked if she knew the woman worked for *pact*, she said that the woman she saw told her she was from *pact*; otherwise, Ms C would have thought she worked for the prison.

*Pact* was really helpful. She spoke to them when she first came into reception. They rang her father, gave him her prison number, address, and told him that she needed money and details of how to send it. They phoned her boyfriend as well and helped set up visits. Every time *pact* spoke to her dad the *pact* worker came back and told Ms C, so she knew she had nothing to worry about – the money was coming.

*Pact* saw her on the first night unit, and then came to see her when she moved to normal location. Ms C said that *pact* was, 'definitely the most helpful out of the whole prison. If you ask an officer to make a phone call, you don't know what happens – they can just disappear.' The *pact* worker came back and told her everything that was happening.

She believed that if you want an officer to make a phone call in an emergency, he must ask a Senior Officer who has to agree it – and it takes so long that it's not worth it, and the SO might not agree. She stated that the staff had not allowed her a phone call, not even by the time of the interview.

**e. Independent status of *pact*:**

Asked if it made a difference to her to know that the *pact* worker was not prison staff, Ms B said it did not matter. She added that she didn't mind who made the calls or helped. If an officer had done it, it would have felt the same.

*They all carry keys, so you can't tell who is an officer. SOs sometimes wear "normal" clothes.*

The PRT survey of 91 people who had recently arrived in prison found that three-quarters came in with serious worries about the outside: wondering how their families would cope without them; anxious about things they had not had time to do before being taken into custody; thinking about how their relationships would survive without regular, personal contact. As might be expected, first-time prisoners were more likely than those with more experience to express worries about life inside the prison. However, they were also far more likely to cite worries about the outside world than concerns about life in prison. This balance of concerns strongly suggests that the services prisoners receive on arrival to prison should be focused on addressing urgent problems the prisoner has left unresolved outside. Helping the prisoner to manage these problems may be a key to reducing their distress in the early days of custody.





## 4 Input of *pact*

This section looks at what was said by participants in the three prisons working with *pact* about the service and its impact on them.

### Level of *pact* input

A central question in this review is whether people who have recently come into prison have been helped by *pact*. That question is complicated by a number of factors. The first is that not all of the prisoners interviewed in prisons where *pact* is working had been seen by *pact*. Second, there was some confusion among a few of the participants about who they spoke to on the first night.

In order to provide a useful service, it is not necessary for a *pact* worker to speak to every prisoner as they arrive. However, it is a matter of some concern that 19 – about 40 per cent – of the prisoners PRT interviewed in Exeter, Holloway and Wandsworth had not (apparently) been seen by *pact*. Just over half of them were first-time prisoners. Why were so many prisoners not seen?

For six of the 19, the lack of contact with *pact* was easily explained. Three said that they did not need help; two had not needed help on arrival but had needs that emerged weeks later; and one had received help from a different voluntary agency.

For another group of six, the circumstances of their arrival seemed to provide a partial explanation for the lack of contact. For example, some had been sent directly to healthcare, to a vulnerable prisoner unit, or to the detoxification unit. Equally, the time of arrival may have been the reason they were missed by *pact* (one said he had arrived at mid-day, which was before the *pact* workers were on duty). However, while logistical factors could explain why they were not seen, some of this group reported needs which *pact* is there to address. It could be argued that they ought to have been referred to a *pact* worker by staff.

For three who had not apparently been seen, there was confusion about who *pact* was. Others, who were almost certainly interviewed by *pact*, could not recall having met them. Asked directly whether they knew who *pact* was, 14 of the 46 interviewed in prisons working with *pact* said that they did not. We believe that this reflects the high levels of distress and sense of disorientation some people experience upon entry into prison.

Finally, five participants who had not been seen by *pact* told PRT that they would have wanted *pact's* services but were not told about the agency. PRT could find no reasons to show why these people had been missed. One man said his cellmate told him that *pact* could help him contact his family. He said he had 'no idea' why they had not spoken to him. Another said:

*I asked to see them because they can phone out. I wanted to find out information. But I didn't see the woman. I asked a screw, but I never saw the pact woman.*

Some other participants interviewed did not recognise the name '*pact*', but (when prompted) did remember seeing a worker from an external organisation who offered help on the first night. Including those who were prompted, 27 participants – that is, a little under 60 per cent of those interviewed in the prisons working with *pact* – reported having seen a *pact* worker.

The numbers who saw *pact* varied from prison to prison: 12 out of 16 Holloway participants, compared to 9 of 15 in Exeter, and 6 of 15 in Wandsworth. The relatively high number of Holloway participants who had seen *pact* may have reflected a certain selection bias: some of these participants were identified for interview by the *pact* workers themselves. (The participants in the other two prisons were entirely selected by prison officers.) It is likely also that the relatively low number who had seen *pact* among the Wandsworth participants reflected the much lower ratio of *pact* workers to prison receptions in this prison compared to the other two (see Section 2).

Participants in the three prisons working with *pact* were asked what kind of help they had received. Almost nine in ten (24/27) of those who recalled being seen by *pact* said they had been helped, which represents a high level of satisfaction. And 10 of the 25 (40 per cent) who could talk about the help they had received indicated that *pact's* help had been very valuable (see Table 4.1).

Three of the 27 who said that they had been seen by *pact* did not say that they found *pact* helpful. One complained that a *pact* worker was going to do a questionnaire with him but then failed to do so. He added that when he mentioned his wish to telephone his relative, 'she went straight off and I never saw her again'. One could not remember and one did not provide a clear answer to the question about *pact* input.

Of course, some prisoners come in with problems which *pact* is not equipped to meet. For example, five of the 46 interviewed in prisons working with *pact* said that they were very worried about drug problems such as withdrawing from drug dependency. While *pact* is not designed as a drug treatment programme, someone who is primarily worried about withdrawal symptoms might also need to resolve family problems, as shown by Personal Story D.

## Personal Story D

### Mr D

#### a. Background:

sentenced = 2 months  
previous experience = 'a few'  
30 year old white British man

#### b. Circumstances on arrival:

Mr D described his mood on arrival at the prison:

*I was all right. I'd been here before; I knew what to expect. I was doing treatment on the out, but I walked out. I came in here not thinking straight. I knew I wouldn't get a decent detox, like Subutex or like that. The detox is rubbish. They've changed it. I took myself off detox. I didn't want to prolong the rattle.*

#### c. Worries & needs:

Mr D said that as an experienced prisoner he didn't need help, but he recognised that the way the prison worked with him could be very important for first-time prisoners.

*Because I'd been in before, I knew most of that. How you operate the phones and stuff. It's okay nowadays. If I was thinking back, they do a lot more now than years ago. Now they weigh people up, especially the young, first time.*

#### d. pact support:

While his knowledge of the prison system and lack of concerns outside had meant he didn't need help from the prison, Mr D told PRT that he was grateful for the help he had received from pact:

*I asked them to phone my mother and let her know I was okay. I wasn't talking to my family before – relapsing. Just so they knew where I was. Yeah. They phoned up and came back and told us I had phone money. But I didn't want to phone up direct. I didn't know what I could say.*

The pact worker had been able to make indirect contact for a person whose particular situation meant that he would not have been comfortable were he given the opportunity to telephone by himself. Asked if he still needed help from pact, he responded:

*No. That was all I wanted. Let them know I was here.*

#### e. Independent status of pact:

Mr D felt it was important that he had the option of turning to someone who was not an officer:

*Some officers are all right, but you get some who say they'll do it and then don't. But telling them [pact] meant I knew they would do it. I know that, but others might not. An officer has loads of other things to do and might just forget.*

Table 4.1 shows the numbers at each prison who had seen *pact* and indicated that they had received a lot of help, some help, or no help.

**Table 4.1 Amount of help received from *pact* (participants who saw *pact* only)**

Amount of help received	Holloway	Exeter	Wandsworth	Total
A lot of help	4	2	4	10
Some help	8	5	1	14
No help	0	1	0	1
Couldn't remember	0	0	1	1
No response	0	1	0	0

### Outcomes for high need prisoners

As discussed in Section 2 of the report, 21 participants were identified as having a particularly high level of need. Twelve of this 'high need' group were interviewed in prisons working with *pact*. Eight of these said that *pact* had helped them; (one did not want help and two were not seen by *pact*). While these provide some indication of the benefit that *pact* can provide for prisoners with serious needs, the small numbers involved preclude any conclusive finding.

## The kinds of help received from *pact*

From what was said about the kinds of help received from the *pact* workers, it was clear that participants tended to view *pact* as fulfilling one or more of three main functions:

- practical help, for example by making a telephone call to family or allowing the prisoner to make a telephone call, and by assisting with applications or queries
- liaison with family and friends: that is, not simply a one-off telephone call on behalf of the individual, but providing information, assisting with further contacts and/or providing feedback on contacts
- emotional support – by listening to, comforting and encouraging the individual.

Of the 24 participants who received and valued help from *pact*, all indicated that practical assistance had been an element of *pact's* input. In 15 cases, the help received had been of a practical kind only. Liaison was an aspect of *pact's* input in seven cases; and emotional support featured in four cases.

Unsurprisingly – because, almost by definition, liaison and emotional support imply greater input than practical assistance – those who spoke of receiving the most help from *pact* tended to be those who spoke in terms of liaison and emotional support. This relationship

between levels and kinds of help received is demonstrated in Table 4.2. Some examples of comments by participants who felt that they had received a significant amount of help from *pact* are provided Box 4.1.

**Table 4.2** Levels and kinds of help received from *pact*

Amount of help received	Practical	Practical + liaison	Practical + emotional	Practical + liaison + emotional
A lot	1	5	2	2
Some	14	0	0	0
Total	15	5	2	2

Those participants who had received help from *pact* were asked if they would have liked more help. 14 said no: they had received all the help they wanted or had asked for. For example:

*No. She done everything.*

*I think they done well.*

*No. That was all I wanted. Let [my family] know I was here.*

Only four participants said they would have liked more help, and one said 'maybe'. There was no response from the others.

Of those participants who would have liked more help, three were women with quite different perspectives on what *pact* could or should offer. One had particular concerns about her husband who had been remanded in prison and was about to be sentenced: she wanted help getting in touch with him. Another commented that the *pact* worker had been 'quite helpful' but 'rushed', and was clearly limited in what she could do simply because of the way prison operated. The third said that she would have liked follow-up contact with the *pact* worker who had given her great emotional support on her difficult first night in custody but had not seen her since. In contrast, another female participant who also had had emotional support when distraught on her first night – 'she comforts you like you are at home' – spoke about having received follow-up help from the *pact* worker who, she said, continued to visit her on her landing to check that she was all right.

Through PRT's interviews and observations, we detected a slight difference in the understanding *pact* workers and prisoners have of the role. All of the 24 participants who were helped by *pact* spoke about receiving practical assistance, whereas only four also spoke about emotional support. The *pact* workers, in discussions with PRT, tended to

**Box 4.1**      **Examples of significant help received from *pact***

**Case 1: Practical help**

Mr F was extremely worried, on entering prison, that he would lose his flat. He spoke to the *pact* worker about this:

*She sorted it all out. Then she came at dinner time and told me it was all sorted. It was such a relief. I was panicking. It calmed me right down. That was a load of weight off me mind. The magistrates got no idea.*

**Case 2: Practical help and liaison**

Mr G was feeling 'shocked' when he arrived because he was not expecting a custodial sentence. He said he was 'a bit' worried about his girlfriend, but once he got his phone credit he rang her and felt reassured. But his £2 credit ran out and he had no money to phone his family to tell them where he was. He described the *pact* worker as 'an independent lady [who] comes along, makes sure things are ok, that you've got everything, got your phone calls'. The *pact* worker phoned his mother then went back to Mr G to confirm that she had got through. Mr G stressed that the *pact* worker 'talked to me – and that's quite important.' The last time he came in, he didn't have medication with him and she went out of her way to see him and make sure he was ok. He commented, 'She don't treat you like an inmate, she treats you like a person ... Less intimidating, definitely.'

**Case 3: Practical help and liaison**

Participant H said the *pact* worker called him into her office and asked if there was anything she could do. He wasn't too sure who she was, but she explained. He asked if she would phone his mum, who is in her 60s, disabled, and lives alone. He's her only child. He asked the *pact* worker to say to her: 'I'm here, and I'm sorry, but it was on the cards.'

Later that evening, the *pact* worker came round and put a note under his door: 'just to confirm I've spoken to your mother, she sends her love ... she's bearing up. Has taken it all right.' Later Mr H received a letter from his mother, which she said she was writing two hours after getting the call from the prison. Mr H felt very grateful for the *pact* worker's help, and hopes he wasn't 'too abrupt' when he spoke to her.

**Case 4: Practical help, liaison and emotional support**

For Ms J, who had never been in prison before, her first night in custody was 'a nightmare'. Some of the officers in reception were very rude, and 'all this flooded into my mind – oh God, what's this going to be like? If the officers are like this, what are the prisoners going to be like?' She couldn't stop crying.

The one person who made it ok was the *pact* worker: 'She was like my safety net – I didn't want to leave her. ... She almost became mummy-like that day – really put my mind at rest.' The *pact* worker rang her partner and let her talk to him. He said not to worry about their house and their son, and that he was coming to see her. He said the *pact* worker had rung him earlier and been really nice: she had given him information about visiting, what he could bring etc, and that Ms J was in an emotional state but she was trying to calm her down. Ms J felt that the *pact* worker 'was brilliant, basically ... People like her really, really, really, really, really, really make a difference.'

emphasise the emotional support function. The difference in perspective could mean that *pact* workers over-estimate the significance of the emotional support they provide. Equally, this could reflect the wish of some prisoners to avoid talking about emotional needs, to maintain a tough image. In any case, it is indisputable that the emotional help provided by *pact* to some prisoners is critically important. Further, the distinction between emotional and practical support is abstract: in practice, PRT observed a loop between them. When someone is in distress, they are unlikely to be receptive to practical suggestions. Only after their emotions have settled are they able to take in information and make decisions. Prisoners who were upset by outside worries were relieved to hear that the problems had been resolved. This capacity to meet both emotional and practical needs is characteristic of *pact*'s contribution.

## Views of the *pact* role

The 27 participants who had seen *pact* were asked if it had made a difference to them that the *pact* workers were not prison officers, and not in uniform. The majority – 15 participants - viewed the non-uniformed status of the *pact* workers as probably or definitely helpful, compared to seven who were quite clear that the status made no difference. (The others gave no response.)

Those who welcomed the non-uniformed status of the *pact* workers explained this in terms of *pact* workers being more respectful and easier to talk to than officers. A point that was stressed by some was that talking to a *pact* worker was like talking to someone outside prison:

*It was lovely. She was very friendly. No uniform on – just a normal human being that talked to you with respect. Lovely smiley face. ... [With officers] .... there's that thing of us and them. [But with pact workers] you feel, what a relief ... You get on a proper wavelength with them.*

*[The pact worker] didn't look official ... You don't have to rack your brain to use the perfect words ... She's like somebody you see on the road – have a nice conversation with... The dressing part is a big help – because she just looked like herself – in the street, homegirl, friendly.*

*Uniform can be a bit intimidating, on your first night as well... The fact that [the pact worker] tells you she's from an outside body – you feel she's here to help you ... She don't treat you like an inmate, she treats you like a person.*

*Officers have seen everything. Pact wouldn't judge anybody. It was like someone on the street. Everyone here wants to know what you did. She couldn't be less interested. That cheered me up big stuff.*

Some participants spoke about the *pact* workers being more understanding than prison officers, and one talked of the former keeping things 'more private' than the latter.



Seven said that it made no difference that *pact* was an outside agency: what mattered to them was getting the help they needed. As one said: 'It's always nice to be offered help, whether they are in uniform or not'. Another felt that there was little to distinguish the *pact* workers from prison officers: 'They all carry keys'.

## Comparison between *pact* and non-*pact* prisons

The small numbers of prisoners interviewed meant that it is not possible to demonstrate that prisoners arriving in prisons working with *pact* are definitely less stressed than in the comparison prisons. However, one area in which *pact* demonstrably makes a difference to participants' early experience of custody is with respect to contact with family members. As discussed in Section 3, many participants in all the prisons were worried, on entering custody, about family members and, more specifically, about the prospect of having limited contact with family. During their first few days in custody, participants in the comparison prisons tended to experience more difficulties and consequent frustration in making contact with family than those in the prisons working with *pact*.

A striking example of the difficulty of contacting family – in which the problems relate not only to the practicalities of making a telephone call from prison, but also the associated emotional pressures – was provided by a prisoner in CompE, who said of his elderly and frail parents:

*I can't find a way to tell them [I am in prison]. I was thinking of writing them a letter, but how can I put it? So that has been a big worry. They said, 'You got a free phone call.' I said I didn't want it then. They said, 'Well, you can come get it within a week.' I went back and they said 'You're too late. You'll have to pay for it yourself.' But I have no money.*

This individual also said that if a *pact*-type service had been available in the prison, 'I could have spoken to them about my family. Six weeks in and I am still in the same place. I haven't solved it.'

It is common practice, in local prisons, to allow new arrivals one phone call (this is sometimes in the form of a £2 phone credit, which is then repaid by the prisoner). However, a brief phone call was often insufficient to resolve the issue of contact – as in the case cited above. Some prisoners said they were unable to get through on their initial call and were then not given another opportunity to make a free call. Others said that it took as much as two weeks or longer to get the PIN that allowed calls to be made on one's own money. Delays in the canteen system, which could also reduce a new prisoner's opportunities to use the phone, were also reported. Such complaints tended to be raised more frequently in the comparison prisons (though not exclusively).

The cost of overseas calls was a particular concern to foreign national prisoners. A South African woman in CompH said that when you come off the phone, you immediately think of all the things you failed to say, and 'it's mind-bending'. Another South African woman interviewed said that not being able to speak with her daughter was 'absolutely unbearable'. An example of *pact's* work with a prisoner holding foreign nationality is Personal Story E.

## Personal Story E

### Ms E

#### a. Background:

convicted unsentenced  
previous experience = none  
foreign nationality  
38 year old woman

#### b. Circumstances on arrival:

*I was crying ... I didn't even understand everything ... But there is a lady who helped me to calm down, maked me feel I was at home ... I think they're going to beat us every day or not to let us communicate with anyone or to do anything at all.*

Ms E was very worried, but said that the *pact* worker 'helped me a lot'. The *pact* worker frequently stopped by to see how she was doing, how she was coping, told her not to worry, and explained what would happen when she went to court.

In terms of life outside, Ms E was most worried about her house, and about getting in touch with friends, to see how things are going. She was also anxious about her need for medical treatment. But at the time of the interview, she had received treatment.

#### c. Worries & needs:

Ms E stated that she was 'very worried' about: Money, property, letting her family know, protection from other inmates, care for her children, learning if her family were ok, arranging visits, feeling upset, needing someone to talk to, her housing, and her health. She expressed an urgent need to phone her family abroad.

#### d. *pact* support:

When she first arrived at Holloway, the *pact* worker personally brought her to the first night unit and explained that she would be there only briefly and then move. 'I said, "Oh God, what am I going to do?"' The *pact* worker wanted to take her straight to where she was going to be so she could get used to it, 'but it wasn't their way'. Ms E observed that because the first night unit was so different, she would have preferred to go straight to normal location – not to get used to one place, and then change.

Even though Ms E was on normal location when interviewed a month later, the *pact* worker had continued to pop in to her landing to check on her. '[She] helped me a lot. ... She comforts you like you are at home.' She has also made phone calls so she can let people know where Ms E is.

Ms E said that if she has a problem, she will wait for the *pact* worker and ask for her help. 'If she can help me, she helps.' She spoke at length about the support the *pact* worker had given her. The *pact* worker contacted her friends, and was still helping her to track down one person at the time of the interview.

**e. Independent status of *pact*:**

Asked if she thought it made a difference to her to know that the *pact* worker did not work for the Prison Service, Ms E replied, 'Yes. The way she's doing her things is not the way an officer does. So it's good that she's not an officer.'

Several times, Ms E asked PRT to thank the *pact* worker, and *pact* itself, on her behalf, because they're doing a very, very good job. She added that she is sure other people appreciate *pact*.

## 5 Other factors

New prisoners' experiences of the first few days in prison were affected by a wide range of factors, quite apart from whether *pact's* services were available or not. Through PRT's analysis of the interviews, five factors in particular emerge as broader aspects likely to influence the person's initial impressions of the prison:

- Relations with other prisoners
- Attitudes of prison officers
- The environment and facilities in the first night unit
- Quality of healthcare initially received
- Level of information provided about the prison

Each area has a positive and a negative dimension: for example, officers could be perceived as helpful and supportive or unhelpful and rude; healthcare could have been judged therapeutic, or to have left them still anxious about ill-health. Participants' views varied widely. They may have been very positive or very negative about the area in question. They might also have felt that a particular factor was crucial, or unimportant. Similarly, different participants in a single prison sometimes had completely opposed perceptions of the same basic features of prison life. This is likely to partially reflect inconsistencies in the treatment received by different individuals, but also differences in the individuals' needs and expectations.

Each factor will be discussed in turn. This will be followed by a brief consideration of participants' suggestions about improvements that could be made to the treatment of prisoners during their first few days in custody.

### Relations with other prisoners

For a number of participants across all the prisons, the development of supportive relations with other prisoners appeared to have made a significant, positive impact on their initial experience of prison life. Some spoke about getting help from Listeners, Insiders, wing cleaners/orderlies and canteen workers who specifically sought to give support and encouragement to new arrivals and those who were under particular stress. But participants also found that informal contacts with fellow prisoners could be very helpful or risky.

A prisoner in Wandsworth described a Listener coming to introduce himself: 'I think that was extremely nice of him. I thanked him.' Another Wandsworth prisoner said that it was often better to ask an Insider or Listener for help with something rather than an officer, because 'many of the officers don't know much'.

PRT asked explicitly about Insiders (prisoners trained to provide new prisoners with information about how the prison works). As expected, people with substantial previous

experience of prisons were less likely to need the help that Insiders can provide. Fourteen of 91 said that they were helped by Insiders. Of these, 10 had no previous prison experience, as compared to one who had much previous experience.

Participants at the prisons working with *pact* were more likely to say that they had been helped by *pact* than by Insiders. Of the 46 interviewed at those prisons, 24 said they were helped by a *pact* worker and nine said they were helped by an Insider. This is not a criticism of the way Insiders work, because the participant may not have been seen by an Insider, or not needed the specific kind of advice they can provide. However, of the 14 who said they were helped by an Insider, nine were at a prison working with *pact* and five were at a comparison prison. Despite the small numbers, this gives the impression that prisoners were more likely to believe that they had been helped by an Insider if they were in a prison working with *pact*.

Newly arrived prisoners tended to report that they had been helped or given advice informally, by other prisoners. Several participants spoke of having close relationships with particular individuals who had helped them during their first few days inside.

In some cases, the significant individual was someone they had known before – usually a co-defendant. One first-time prisoner said that having his co-defendant on the same wing had helped him enormously. The co-defendant had explained how things worked and had helped him get a job. Generally, he said, being in prison had been, ‘better than I thought it would be. But that’s only due to my co-d [co-defendant] being here.’

In CompH, PRT interviewed a mother and her daughter, who had been arrested together and were on the same wing. They provided support for each other – with the daughter, in particular, saying that her mother had helped her when she had felt suicidal, and the mother saying that on arriving at prison, ‘I was upset but couldn’t really show how upset I was because I had to stay strong for [my daughter].’

A Colombian participant said that the first thing he had looked for on arriving at the prison was other Colombians – and he was ‘very lucky’ to find someone straight away, who has helped him a lot. A woman in CompH said that an officer had introduced her to two or three other prisoners who were roughly her age and had committed similar offences – and this had made her feel that she had people to talk to. ‘You learn a lot more from prisoners [than from officers],’ she added.

A participant in Exeter commented:

*I was very keen on having a single cell. I’ve never shared my living space with anybody. Oddly, I was put in with someone for the first few days. And he was such a help to me. After the first couple of days an officer told me I’d never be put in with someone incompatible. You need someone to be there to talk to.*

As a result, the participant said he would recommend that a first-time prisoner should never be put in a single cell – but also that the reason for this should always be explained to the individual. When he was initially told that he would be sharing, he had been ‘distraught’.

Very few participants described their relations with other prisoners as a negative aspect of their first few days in custody. However, some did express caution and anxiety. A man in CompW said he wanted to avoid speaking to other prisoners, and was scared of encountering a member of the gang which had previously attacked him in another prison. A Holloway participant – a Russian, first-time prisoner – said that when she first arrived in the prison, others were asking her questions. 'I was kind of nervous honestly – you never know ... There's a kind of big barrier you have to pass, because before you always hear prison is really dangerous.' However, she had since got to know some of the Insiders who had helped her, and had realised that 'not everybody's mean here'.

A 49-year-old CompH participant, also a first-time prisoner, said that when she had looked at the others on her first day, 'I couldn't believe how young they are ... I felt so confident – because I was older ... I wasn't going to be bullied by five or six older lesbians.' She came to realise that she could actually become 'a bit of a mummy figure' for some of her fellow-prisoners.

## Attitudes of prison officers

All participants were explicitly asked about how they felt they had been treated by officers when they arrived at the prison, but several also spontaneously mentioned officers' attitudes at other stages of the interview. Overall, 50 (57 per cent) of the participants spoke in broadly positive terms about officers' attitudes, while 12 (14 per cent) were largely negative and the remaining 26 (30 per cent) were either neutral or stressed that the officers were very mixed. (Three missing responses have been excluded.)

Views on officers differed both within and between prisons. Exeter had the highest proportion of participants who were broadly positive (71 per cent). In CompW, 29 per cent were broadly negative. CompH had 27 per cent broadly negative participants, but also had a high proportion of broadly positive comments (67 per cent). As applies to the other parts of this study, the small sample size means that these results cannot be seen as generalisable to the full populations of the prisons.

Many participants felt that their treatment by officers had a significant – positive or negative – bearing on their day-to-day experiences of custody. Themes that tended to emerge in the positive comments made about officers were that they were relaxed and friendly in their dealings with prisoners; that they treated prisoners with respect; and that they provided help with practical issues.

Conversely, the themes that emerged in the negative comments were officers' rude, bullying or disrespectful manner and, in some cases, their obstructiveness in relation to practical matters. (See boxes 5.1 and 5.2 for examples of positive and negative comments respectively.) In five of the six prisons, participants commented that prison officers could have made more effort to treat newly arrived prisoners with greater respect and sensitivity. Several complained that officers do not treat prisoners as 'human beings': one said that while some officers are all right, there are others who 'should take a chill pill before they come to work, so they're not treating us like rats, so they're treating us like

human beings'. This serves as a reminder that one aspect of the *pact* worker's input that was greatly welcomed by some participants was the way (as one participant expressed it) 'she don't treat you like an inmate, she treats you like a person'.

Many participants strongly emphasised that there was enormous variation in how individual officers treated them: indeed, very few participants appeared to think that officers were uniformly 'good' or 'bad'. A small number argued that the nature of the relationship between the officer and the prisoner is such that the normal rules of social interaction do not necessarily apply; for example:

*I think [officers treat me] like I would expect: very curt, short and sharp. I'm the boss, you're the student. Now I don't have a problem. It's a shock tactic, then the explanation. You have to be humble-ised pretty quick. You don't deserve respect as prisoners but if you're rude to them, you have to expect trouble back.*

#### Box 5.1 Positive comments about officers

- Yeah, brilliant. They were really cool. Specially when you come in and the officers explain things – just tell you the facts and make it humorous.
- [I was treated by officers] with respect. They treat you as they wish to be treated. A lot of them in here, I'm on a first name basis. They speak to me like I'm a friend.
- Officers, they were all right. Trying to look after me. I don't have a problem with officers. My problem is being locked up in a prison.
- Since I've been here, staff have been brilliant. I got banged up at seven, eight o'clock at night. Next morning, speaking to staff, they've gone out of their way to help me. Visits are meant to be one hour. My family come a long way. An officer helped me through the apps process to get longer visits, through PVOs [privileged visits].
- They're kind. They're nice. The officers are nice people.
- Officers on [this unit] are fantastic. Specially for me, because I've made many attempts on my life ... Officers are so under-valued by society.
- The staff are approachable, whereas in [S- Prison] you'd be in two minds whether to approach them or not ... They do try to relate to your situation as much as they can.

### **Box 5.2 Negative comments about officers**

- I think you learn to adapt to how you'll spend your sentence. Even though it is wrong, you start to accept the way the guards treat you.
- [Treatment is] very poor indeed. The problem is their attitude. ... [Although] there are a couple who are really compassionate and down to earth ... Getting called smackhead and things like that – doesn't help.
- They think we're kind of animals... They treat me like an animal ... If they treat you like a human being, that's fair enough ... They can't judge you – what you're in here for... They just wind you up.
- [If you ask officers for help with anything] it's: it's 'fill in an application'. Everything is 'fill in an application' ... [When he asked one officer for help with getting some property] he threw an application form at me and said, 'Fill that in and sod off to your cell'. ... We're prisoners; we're here to be punished – but at the end of the day we're still human.
- [After meeting some very rude officers in Reception] all this flooded into my mind: Oh God, what's this going to be like? If the officers are like this, what are the prisoners going to be like? ... [Some officers] treat everyone like a criminal – but they are human beings.
- [A lot of the officers] haven't a clue how to speak to women. ... When you come in, you are basically classed like scum of the earth ... They are very cold and calculated, like they enjoy humiliating you, speaking down to you.
- [The officers] 'just could've been more helpful ... I know it's not a hotel, but they could be a little more welcoming when you come in – I think they class everyone the same. I'm not saying they were horrible – but it was like a cattle market – they just move you a long ... A little bit more helpful.'



## First night environment and facilities

In all six prisons, new arrivals generally stayed on a separate wing or landing for the first night or few nights in custody (see Section 2 for details). Help of various kinds was made available on all the first night units, but the general facilities, physical environment and regime on the units varied from prison to prison.

Participants cited a range of practical problems they faced, including hygiene, diet, clean clothing, and exercise. The most common concerns were a lack access to a shower, and food. Some of their needs clearly reflected the effect of overcrowding in lowering standards. One described being placed in a cell on the induction wing with four others. For almost four hours, the five of them were left in the single cell, without explanation, while officers were working to complete the reception process for other newly arrived prisoners.

The harshest criticisms were voiced by the CompW participants who described cells in a 'disgusting state' and 'noisy and cramped', and reported a lack of bedding and clean clothes. One participant spoke about cockroaches, and another said that it was 'dehumanizing' having a toilet at the end of the bed in a shared cell (a point that was also made by a CompE participant).

Six of the 15 CompW participants spoke about the extremely limited shower facilities on the first night unit – which could mean waiting up to a week for a shower. This was particularly difficult for those who had come to the prison after a few days in a police cell, or those who had been suffering withdrawals. Similarly, a woman participant said that she had been in police cells for three days, 'so I needed a shower desperately'. On the evening she arrived in reception, she asked for a shower and was told she could have one in the morning.

Participants in Exeter and CompW also criticised the lack of time for association and exercise on the first night unit.

Not all participants expressed views on the quality of the environment and facilities in the first night units; and the views that did emerge were mixed. In all the prisons but CompW and Exeter, some participants spoke of the stay on the first night unit as being helpful. Among the most positive were two women in CompH – both first-time prisoners – who stressed that the clean and welcoming environment of the first night unit had meant a great deal to them, as described in Box 5.3.

None of the other participants were as strong in their praise of the first night facilities as the two quoted in Box 5.3. But some others talked, for example, of the first night unit being 'very cosy' and a place where you could 'calm down' (both Holloway); and, 'a comfortable environment for first-time prisoners' (CompE). Another participant described arriving on the first night unit in Wandsworth and immediately being provided with bedding, a shower and so on: 'Everything's catered for ... [although] after that you're on your own.'

### Box 5.3 A welcoming environment

Ms J told the interviewer that when she was shown into her room, she found that the bed was made, and there were toiletries and curtains; and an officer asked if she wanted water. Seeing this, she breathed 'a sigh of relief'. There was 'a big fluffy towel and a small towel.' Now Ms J has a job in Induction, and because she knows how much these things matter, she tries to make it the same for others.

When Ms J came into her room, the girls who had cleaned it had folded down the bed and put the shampoos out nicely. 'It was like a welcome to me – it was a wonderful thing to do – made a huge difference – specially after three days in a police station.' While the care taken over the bed and shampoos was just 'a little gesture', it was very important, because when you enter prison, 'you become dehumanised in a way.'

From the interviews with the Holloway participants in particular, a clear dilemma emerged in relation to the provision of high-quality first night facilities. In Holloway, the first night accommodation differs quite markedly from that in the rest of the prison: for example, the cells and corridor are carpeted, there are curtains, and the beds are pine rather than metal.

This, some indicated, can make the move from the first night unit into a regular wing very difficult. The gap between conditions on first night centres and normal location echoes a finding of Harvey's study. While first night units can help to relieve the stress of the transition, it can be upsetting to settle in, only to be moved again.

A Holloway participant stated emphatically that several first-time prisoners found it a 'shock' to move from the first night unit to normal location. The first night unit, she said, gives a 'false sense of security' about what life in prison is like. One prisoner was 'screaming' when she was taken off the unit, and had then to be put on suicide watch. Another respondent said that moving people from the first night unit, where they might have been able to relax and make friends, is 'not fair ... It's like playing with people's emotions.' A third Holloway participant asked PRT:

*What's the point of giving people false hopes by putting them in [the first night unit]? ... You're put on there to help you clam down, but by Monday [or when you are moved] you're going to have to go through all the rigmarole again, all the emotions.*

Also in Holloway, a first-time prisoner said that she had been particularly distressed when she was brought (by the *pact* worker) to the first night unit and was told that she would be there for two nights only: 'I said, "Oh God, what am I going to do?"' She was extremely worried that just as she learnt how the system worked, she would be moved and would have to start all over again.

A participant in Exeter directly addressed the dilemma associated with providing special accommodation for new arrivals: 'You shouldn't let people settle then upheave them. But you can't just throw people on the main wing because of what people get up to.'

## Quality of healthcare

The quality of healthcare received in prison, particularly during the first few days in custody, was mentioned by several prisoners either spontaneously or in response to the specific question of whether they had any particular concerns relating to health on their arrival at prison.

A very small number of participants spoke positively and confidently about initial healthcare. A participant in CompH said that on arrival, she spoke to a nurse about her health problems, and the nurse, 'made me feel secure'. The next day, she saw a doctor; information from her doctor outside was faxed to the prison; and she got her medication within two days: it was 'fantastic'.

However, comments of this kind were the exception rather than the rule: in all six prisons, a number of participants spoke of receiving inadequate care. The main complaints were: that required medication was not made available; that it took a long time to see a doctor or nurse; that the health professionals tended to have a rude or dismissive manner.

One woman said that the way healthcare was delivered undermined her self-esteem still further. She explained that, 'the treatment by healthcare is another way of feeling you've no value – you're worthless'.

While some of the participants had concerns relating to treatment for drug withdrawals or maintenance prescribing, others described a range of physical health or mental health problems for which they were seeking help. Some examples of the criticisms of healthcare are provided in Box 5.4.

#### **Box 5.4 Problems with healthcare initially received**

**Ms K** was several months pregnant when admitted to Holloway. She was suffering from anaemia – a condition which had worsened during her pregnancy. She had tablets for the anaemia, but was told that they had to be issued by the doctor, and he failed to do so. The issue became ‘one whole bag of politics’, with the nurse saying one thing and the chemist saying another. Ms K finally spoke to a governor and, after two weeks, it was sorted out. Meanwhile, she was still waiting – after almost four weeks in custody – for cream for her very dry and itchy skin.

**Ms L** said that the healthcare provided at CompH was ‘very very bad’. When she arrived, she was taken off HRT for ‘no reason at all’. This was ‘very stupid’, given that she was ‘already suicidal’, and going off the HRT meant she was ‘plunged into menopause’. Finally, after fighting for it, and her husband writing to the governor, she got back on the HRT after five weeks. She was also suffering from bad headaches, and it took weeks to see the doctor for painkillers. Generally, the healthcare treatment was ‘another way of feeling you’ve no value – you’re worthless’.

**Ms M** described the healthcare at CompH as ‘terrible’. It took one or two weeks for her to see the nurse; the nurse then said she should see the doctor and that took another two weeks. When she saw the doctor, she was with him for all of 60 seconds, and he was very rude (as are some of the nurses). She told him that she needed a special diet, and he said that was nothing to do with him and she should speak to the officers about it; the officers said it was nothing to do with them and she should speak to the doctor about it. She was still waiting for cream for her eczema and eye drops.

**Mr N**, a prisoner in CompW, said that he needed help with his withdrawal symptoms, but the healthcare is ‘diabolical’. When he asked for help, he was only given paracetamol, which he is allergic to. Although the health staff are employed by the NHS, they act like prison officers. He has seen people cutting themselves and suicidal because they are not helped with their withdrawals.

**Mr O** said he had been ‘really depressed’ when he was admitted to Wandsworth, and had just attempted suicide. When he was arrested he had anti-depressants in his possession, and the doctor at the police station gave him a script for them – but he was refused them when he arrived at the prison. He put in numerous applications to have the anti-depressants reinstated but nothing happened; and at the time of the interview (two and a half weeks after admission) he was still waiting. He also had a broken hand and was waiting to see the doctor about that.

After arriving at Wandsworth, **Mr P** had to wait five days to be issued the anti-depressant medication he had been taking. He was subsequently put on a double dose of the anti-depressants, because he was considered suicidal. The doctor would not write a letter to say that he needed a special mattress, despite receiving confirmation from his doctor outside that he had a trapped nerve in his back. Mr P asked to see the mental health team as soon as he entered the prison, but (almost five weeks later) had not yet seen anyone. He had been told he was on a very long waiting list. ‘I thought they’d be a bit more helpful.’

## Provision of information

Informing new prisoners about the way the prison works is a vital part of the first few days of custody and is the central purpose of induction programmes. Induction is designed to inform prisoners about prison life, race relations, the facilities available, where to turn for assistance, formal procedures (such as how to submit a request), what opportunities are available (such as education, gym, and prison workshops), as well as the prison rules. But imparting information can be extremely difficult during this time, when both prisoners and staff are under such pressure. People new to prison can easily feel overwhelmed by all that they need to learn.

A small number of participants reported that the prison had done a good job of explaining the details of prison life. Three participants in Wandsworth, for example, talked about the induction course being helpful and informative. One of them said that he had been 'really shocked' that the prison 'bothered to do it ... It's reassuring for them people that needed it.' At CompH, a woman said that the induction course had offered the chance to ask questions, which were all answered. She added that the literature prisoners were given about the prison was 'fantastic'; and she still continued to refer to it.

However, other participants – across all six prisons – voiced criticisms of the information provided (or lack of it). A Wandsworth participant said that the induction was rushed and covered too much material, with the result that it was 'confusing'; similarly, a woman in CompH talked of being 'bombarded' with too much information, which was difficult to take in.

Others complained of too little rather than too much information. The suggestion that more information is needed when someone arrives could appear odd when that is what the induction process is designed to do. Although PRT's interviews cannot fully explain the apparent anomaly, relevant factors may be that information was being provided when it was not yet relevant to the person's needs; that new prisoners had a limited capacity for taking on new information; and that information might be provided in ways that are difficult for some prisoners to access.

People may find it far easier to take in information when they have a need for it, rather than in the abstract.

One woman told PRT that it had taken her 'ages' to work things out. For example, she did not know that you could arrange for special children's visits in the gym, with toys and longer time. She had only learned this because she saw it on a poster and asked about it.

Other respondents perceived a contrast between the information given on arrival, and the lack of explanation afterwards:

*All the info you get the next day. They go through all the prison rules. Ask if you've got any questions. After that, that's your lot. If you don't ask, you get nothing. You're just a cog in a big wheel.*

[There should be] *a lot more advice. Not just people coming round the first day. Early days, you get a chance to ask questions, but now that I know what to ask, there's no one.*

People who arrive in a distressed emotional state may not be receptive to information, as suggested by these two quotes:

*They should slow down a bit, so it's not so confusing. When you come in it's fast and confusing.*

*I wasn't in a right state of mind to think about anything than myself.*

Moreover, if people lack information, this may increase their distress, as indicated by this respondent:

*You need someone to explain what it's like. Otherwise – you're going to harm yourself or harm someone, or be in a mental hospital. All these things – like wife, mortgage, kid – they're all hitting your head at once. These sort of things need to be looked at: outside things, and how you're feeling inside. Or things like thinking I'm going to kill myself come out of the blue. It doesn't happen because you're thinking about it, planning it – but because of all the stress. If you get help, you don't have to go through these things.*

An Exeter participant who was put on to the vulnerable prisoner unit spoke vividly about the initial confusion of arriving at the prison and not knowing what was happening:

*I went through the normal Reception; through B Wing. After a short time – two o'clock – I was taken to the waiting room. I left the waiting room at eight o'clock, when I was taken here [VPU]. During that period I saw about four people for about ten minutes each. I spent an awful long time on my own, waiting. That was bad enough. But the worst was, I didn't know what was happening. I didn't know how long I would wait or what I was waiting for. And all the time I was alone. It was awful, a terrible experience.*

The method of communicating information may pose problems:

A participant in CompW described 'the only thing that's pissed me off', which was that it took him a long time to sort out the basic procedures relating to visits, due to being 'not a good reader'. For example, he did not realise that he should put his PIN number on the letter he sent, or that he could have asked his mother to bring money for him to get chocolates out of the machine, when she visited.

Prison Service Order 2855 (Prisoners with Disabilities) explicitly states that information must be made available in a variety of formats, in order 'to help overcome learning difficulties'. This PSO also states: "Prisoners with disabilities need to have access to an induction programme adapted to meet their needs." (PSO 2855, para 2.1) But, as is made clear in a forthcoming PRT report on the provision of information to prisoners, learning disabilities are often hidden, and therefore prisoners who have struggle to

understand written formats may be processed through induction without gaining the practical knowledge they need to cope with prison life.

In CompH, the induction was largely given through an information pack. In addition to potential problems of literacy and foreign languages, the written word was no substitute for person-to-person explanations. New prisoners may have many questions that have not been answered in an information pack. Six CompH participants said that they were not told about prison policies and procedures. One said that on her first morning she saw others going to breakfast in their pyjamas. She assumed this was allowed because she had not been told otherwise. She said she was 'shouted at' by officers for wearing pyjamas. She suggested that the experience of coming to the prison would be much improved if somebody sat down with new arrivals to explain the system.

At Wandsworth, a participant drew a parallel with the PRT interview to suggest tailoring the information provided to the individual needs of the prisoner:

*It would have been nice to have somebody sit down and go through a list like you have done. I can imagine some one coming straight here from the courts would be extremely distressed.*

Indeed, responding to individual needs was a discrete theme, one aspect of which was that reception was a time when people were in particular need of someone to talk to:

*[You need] someone to talk to. ... When you talk to someone you feel much better. You need someone to be there. Especially knowledge of how this prison works. I suppose I mean someone who doesn't look like an officer with authority. Someone you deemed to be on your level. When you speak to someone not in authority you can open up and tell them your worries.*

This point was made also by a CompE participant who said that it would have been very useful to:

*Have a prisoner to welcome you, to listen to your concerns, and go through the procedures, so you don't have to go without. I've gone without basic amenities, like tea, coffee, sugar, because no one told me you could ask for an emergency canteen.*

## **Prisoners' suggestions for improving first night services**

PRT asked the participants:

*Was there anything about the first night unit that could have been done better?*

*Based on your experience of coming to this prison, do you think that new prisoners should be given more help or advice? Please say what kind of help or advice.*

The most important suggestions made by the prisoners interviewed by PRT about how to improve first night services can be summarised briefly:

---

**Meeting immediate practical needs:**

- ensure that all prisoners coming in have something to eat, an opportunity to shower, and a clean cell

**Meeting prisoners' needs for information:**

- ensure that information about the prison is available on a continuous basis right through the person's time inside, and not only during the first 24 hours;
- taking account of people in distress, work on different ways of delivering the information

**Respond to people's individual needs:**

- make specific provision for addressing the problems people have left unresolved outside, as one means of reducing their anxieties on entry;
- expand the provision of people from the voluntary sector and Insiders so that any prisoner who wants to speak privately to someone has a chance to do so

**Speed up the process of clearing prisoners' pin numbers:**

- build on the recognition that worries about the family and unresolved problems outside increase anxiety during reception by increasing the access to telephones during the first few days.





## 6 First night services in Scotland

HMP Edinburgh has been commended in recent years for the support it gives to prisoners on arrival. Induction Officer Stuart Wright received a Butler Trust Award in 2007 for his development of the prison's peer support programme (Flanagan, 2007). Other prisons in Scotland, such as HMP Barlinnie, now offer first night services as well.

This section of the report will describe the induction process at HMP Edinburgh as an example of good practice in the use of peer support. The Scottish Prison Service protocol for the operation of this scheme at Edinburgh (SPS, 2006) describes the key elements of the peer support role:

- meet & greet new prisoners in the reception area
- support the meeters & greeters on the three admission halls
- delivery of induction on the vulnerable prisoner hall
- induction meet & greet and presentation of core policies, internal and external partners in the remand hall
- distribution of induction information leaflets
- maintenance of prisoner notice boards
- distribution of link centre appointment slips
- general duties within the induction department.

The protocol explains that use of peer support workers for these tasks has increased attendance at the prison's induction programme and frees paid staff from having to provide repetitive information. Peer support workers are specifically selected for their maturity and social confidence; existing skills and delivery of presentations; and evidence of a natural willingness to help, to undertake training as appropriate, and to undertake voluntary elements of the role such as evening and weekend work. Staff take potential peer support workers' offence types and sentence lengths into account and (according to the protocol) preference is given to first offenders. Staff also monitor each worker for four to five weeks to ensure the workers have no ulterior motives in taking up the post.

A peer support worker is assigned full time to the prison's reception area. He speaks with all new prisoners upon admission and gives them an information booklet relating to their hall. Each prisoner is moved to an admissions hall, depending on his status (untried; vulnerable; serving a short-term sentence; or serving a long-term sentence). Each hall has its own information booklet specific to the hall's regime and type of prisoner.

In addition to reception, each admissions hall has a dedicated 'meeter and greeter'. These are also paid posts, though not all peer support workers do this full time. The induction officer has set up prisoner information points in each admissions hall as well as in the prison's links centre, with plans to extend these to other parts of the prison. (There are also plans for a modified version to be made available in the visitors' centre). These information points are computer terminals loaded with information from the prison's information booklets, but with more detail and links to other sections and contacts. The

information points have the potential to include information from other sources, such as details about assistance available from agencies outside the prison.

After reception, all prisoners serving more than 30 days are invited to take part in the prison's induction programme. This takes place over one week, though a shorter version is available for prisoners who recently completed the full induction (for example at another prison or on a previous sentence). Peer support workers deliver induction alongside the Induction Officer regarding complaints, race relations, bullying, suicide prevention, electronic tagging, alerting tools (assessments of educational needs), and fire awareness. Peer support workers also deliver an induction to prisoners in the remand hall two days a week and in the vulnerable prisoner unit. The induction officer is currently developing a series of 'talking books' for induction on CD-ROM for use at the prisoner information points, including translations into six languages.

The induction officer said this model of peer support workers benefited from the full backing of the prison's senior management. The officer was himself clearly innovative and motivated; this raises the question about the extent to which the prison's induction programme and peer support model depends on the motivation and initiative of a single member of staff.

The main functions of peer support workers at HMP Edinburgh are to answer questions and to provide basic information to prisoners at the earliest possible stage from a source credible to them. This in turn leaves prison staff more time to complete admissions procedures and interviews such as health checks and the core screen assessment of needs. The interviews below show how prisoners at Edinburgh responded to this model.

### **The prisoners' perspective**

As in the prisons in England, PRT interviewed 15 people who had arrived in HMP Edinburgh about two to six weeks previously. A third of them said that when they first arrived, they felt all right. This explanation was typical:

*[I felt] fine. I'd been expecting it; indeed, I expected longer. I was glad it was over and done with.*

Six felt shock or depression:

*Completely gutted!*

*A bit numb, and shell-shocked. I had been told odds were 50-50 I'd get prison.*

Three said that they were worried about what it would be like:

*I was quite nervous. I was all right, but wondering what was going to happen.*

One could not recall details about his first couple of days in custody:

*I was intoxicated when I came in and I can't remember. It's all a blur.*

Others may also have been feeling the effects of alcohol or drugs, which may have limited their capacity to engage with the reception process.

As in the prisons in England, the participants in Scotland were very likely to state that they were worried about the situation outside when they arrived. Almost three quarters of those interviewed said that they had worries about the outside.

The single most important area of concern about the outside was the prisoners' families:

*How the boys would react.*

*My family, seeing my kids.*

While HMP Edinburgh has a family liaison service, this points to the particular urgency of resolving family tensions at the time of entry into prison.

Just over half of the 15 described worries about life inside the prison. Areas of concern were mostly about the risk that they would be exploited or harmed by other prisoners. About one in three mentioned this fear. Some were first-time prisoners who were worried about how strangers would react to them; others, experienced prisoners, worried about running into people they knew.

### **Specific areas of concern**

The list of specific areas of possible concern are presented in Table 6.1 in order of priority, from those most likely to be a source of concern to those which were a concern to the least number of participants.

**Table 6.1 Areas of possible concern**

	<b>Not worried</b>	<b>A bit worried</b>	<b>Very worried</b>
Feeling upset	7	6	2
Property	9	3	3
Needing protection	11	3	1
Visits	11	3	1
Need someone to talk to	12	0	3
Drugs	12	2	1
Money	12	2	1
Housing	12	3	0
Tobacco	13	0	2
Alcohol	13	1	1
Health	13	2	0
Letting family know	14	0	1
Family ok	14	1	0
Childcare	15	0	0

Five specific problems seemed uppermost in the men's minds in the early days in custody:

- Feeling low or upset
- Getting their property sorted out
- Needing protection from other prisoners
- Arranging for visits
- Needing someone to talk to

Feeling low

*It's just depression for the first couple of days. You're away from your family.*

Property

*I brought a bag in but I was told I couldn't bring in the rest (even the lawyer and social workers told me to bring in toiletries, books, etc).*

Protection

*You don't know if you need protection. It's a big worry when you get people shouting at you.*

Visits

*[It is the] distance: my family is several hundred miles away.*

Someone to talk to

*You ask yourself, 'Can I trust that person or not?'*

Many were worried about how their family would cope with their loved one in prison or how difficult it would be to keep a relationship going on the little time available for visits. The specific topics about families in the list (for example, letting them know where the prisoner was and arranging childcare) were less relevant. This was particularly true of those prisoners who had expected a prison sentence and had had opportunities to discuss it with their families in advance:

*I had everything organised as I had been able to plan ahead.*

None of the 15 prisoners interviewed in Scotland said that they had felt suicidal or thought of harming themselves during their first few days of custody.

The second half of the interview focused on the participants' views on help they received during the first few days. About one in five said that they did not have any problems that needed attention. Seven prisoners - almost half those interviewed - said that they would have appreciated more help. Interestingly these seven were more likely to have had previous prison experience: only two were first-time prisoners. Five of them had said they were feeling upset on arrival, and four said they had worries about their property (which could include personal property outside the prison and the safe-keeping of their belongings inside).

In many ways, the prisoners interviewed in Scotland voiced similar experiences of entering prison to those expressed in England. For example, a majority had concerns about problems outside which they had not resolved; concerns about their families dominated their thinking; and many found the first few days bewildering.

The area that showed the greatest contrast to the prisons in England was the new prisoners' assessment of the help they had received from the peer support workers. In England and Wales, a minority of prisoners said that they found this helpful, despite the fact that Insiders functioned in all of the prisons studied. In Scotland, 13 of the 15 said that the peer support workers had helped them (one said he had not apparently seen a peer support worker; the other said he had no need, since he could get the information he needed from the booklets).

Many participants expressed particular praise for the way the peer support workers went about their role:

*The first few hours are the hardest, but it really helped to have [peer support] there.*

*The peer guardian explained a lot, put my mind at ease. Helped a lot!*

*He was a cracker, a really good bloke, and others on induction have been great. A lot of information went over my head.*

*Reception peer support worker told me everything I needed to know: exactly what to expect. He befriended me; when I said I was hungry, he even got me a sandwich! He knows how to come across to you.*

Participants were also likely to say that they valued the fact that the peer supporter was a fellow prisoner:

*Definitely helped. Coming to an officer is one thing, but coming from someone in the same situation as you, you can relate to them. He will also be locked up at night, eating the same food; looking at things from the same perspective. You listen more, because they've been in the same situation.*

*Definitely! He's a con as well. I've noticed that staff won't help you that much, so peer support can help you get on with day to day stuff: courses, forms. They are there to ask questions, chase up applications, etc. It's a way of finding out what you need and getting information.*

Participants were asked if they had any suggestions about how to improve the first night services. Most of those interviewed offered one or two ideas. Two felt that the induction (giving information about the prison) could have been given earlier:

*It would help to have induction sooner rather than waiting a week. Otherwise you just go back and forth to staff, who can get irritable with you (not all, but some).*

One participant pointed out that providing important information in written format was unhelpful to some prisoners. More careful explanation was needed:

*Screws could have been better. I was asking about the visits and they said, 'Hand in a form.' When I handed it in, they said, 'No, it's every fortnight.' It should be on the notice board instead of handing everyone a booklet and saying read that. Especially for people like myself who's dyslexic. So I think they could be better organised. It should be explained, not slung in your face.*

Finally, participants mentioned the restricted time that was available to talk to their families. One said the prison could:

*Give you a wee bit more time on the phone. It's a lot of people for three phones. I never got on the phone till the last five minutes. They don't phone your parents: that is up to you. I got a big family and they all want to talk to me.*

Prisoners in Edinburgh experienced similar concerns to those in any other prison. Rather like the prisons in England, the emphasis in induction tended to be on preparing the prisoner for managing the prison environment rather than resolving urgent problems left outside. The main difference from prisoners in England appeared to be in the type of support they received. Prisoners in Scotland clearly appreciated input from the peer support workers and valued the fact that these were prisoners like themselves. Peer support workers seemed to have contacted and offered support to almost every person received into the prison. The induction officer and senior managers actively encouraged and developed this model of support for new prisoners.

## 7 Conclusion & recommendations

### Key findings

#### Prisoners' needs on arrival

Over three-quarters of the prisoners interviewed by PRT (70/91: 77 per cent) said that they had worries about the outside when they arrived in prison. Most had concerns about their families, including: letting them know what had happened; ensuring that their family was ok; and trying to maintain contact with them.

The high proportion of prisoners who come in with worries about family relations is a clear demonstration of the need for the unique services that *pact* can provide, by providing liaison and emotional support for prisoners and their families.

First-time prisoners were more likely than others to say they had worries outside. Although over half of first-time prisoners said they were worried about life inside the prison, they were much more likely to say they had worries outside.

PRT identified a group of prisoners they interviewed who had particularly high levels of need. Over one in four (28 per cent) of those with no previous prison experience were rated in the high need group, as were 38 per cent of prisoners who had been to prison more than five times previously.

Far more first-time prisoners than very experienced prisoners said that feeling low or upset had made them very worried.

Compared to first-time prisoners, very experienced prisoners were far more likely to say they were very worried about drug problems.

Eleven of the 91 prisoners interviewed (12 per cent) said that they had considered or attempted suicide upon arriving in prison. For some, the risk of a suicide attempt rose or fell dramatically over a period of time.

#### *Pact's* input

Twenty seven participants – that is, a little under 60 per cent of those interviewed in the prisons working with *pact* – reported having seen a *pact* worker.

Almost nine in ten (24/27) of those who recalled being seen by *pact* said they had been helped, which represents a high level of satisfaction. Of the 12 high need prisoners interviewed in the prisons working with *pact*, eight said that *pact* had helped them; two had not been seen by *pact*; and one did not want help.



Participants tended to view *pact* as fulfilling one or more of three main functions:

- practical help, for example by making a telephone call to family or allowing the prisoner to make a telephone call, and by assisting with applications or queries
- liaison with family and friends: not simply a one-off telephone call, but providing information, assisting with further contacts and/or providing feedback on contacts
- emotional support – by listening to, comforting and encouraging the individual.

During their first few days in custody, participants in the prisons working with *pact* tended to experience fewer difficulties and less frustration in making contact with family than those in the comparison prisons.

Nineteen of the 46 prisoners interviewed in the prisons working with *pact* had not been seen by *pact*. Half of them were in prison for their first time. Over a quarter of these prisoners might have made use of *pact's* input, but were not seen due to logistical factors; and for another quarter, there was no explanation for the lack of contact.

### **Other factors**

The standards in the first night environment attracted positive and negative comments. Participants cited a range of practical problems they faced, including hygiene, diet, clean clothing, and exercise. The most common concerns were a lack access to a shower, and food. But a small number reported that the cleanliness and welcoming atmosphere had meant a great deal to them.

Some participants said it was stressful for them to be moved from the first night centre to normal location. An interesting question about the operation of first night units is whether the standards there should be markedly better than normal prison wings. There is a clear dilemma here: on the one hand, the relaxed and (comparatively) pleasant atmosphere on first night units can ease the transition from outside life to custody; on the other hand, the short stay, followed by a move to a main wing can exacerbate the prisoner's anxieties. This dilemma cannot be resolved by *pact* alone; but *pact* workers may be in a position to work with prison staff in addressing it – for example, by ensuring that prisoners are aware from the outset that they will stay on the first night unit for a short period only; that they understand why they are temporarily accommodated there; and that they are reassured and supported if they have any particular worries about moving off the unit.

### **Implications of the findings**

*Pact* worked best when its role was well-defined and widely understood by the prison managers and staff with whom it worked. It was also most efficient when its particular input was fully integrated into a complementary approach to welcoming people into prison.

This review has shown that, on arrival, new prisoners vary widely in their level of need and the specific nature of their problems. While many people find the experience upsetting, there are also practical concerns that require immediate attention.

There were advantages to *pact's* being able to speak individually to everyone who came into prison. Voluntary sector agencies tend to give people individual attention, and this can help to reduce the stress of entering prison.

But over 40 per cent of the participants interviewed had not been seen by a *pact* worker. While there were legitimate reasons for missing some of these (for example, those who did not need *pact's* help), the proportion seems high and suggests that more could be done to ensure that new prisoners have access to *pact*. At the time of the fieldwork in Wandsworth, the induction unit had introduced a new screening procedure to refer prisoners who indicated a desire to speak to *pact*. This appears to be a useful approach, especially if *pact* workers have an opportunity to check with other prisoners informally about whether they would like *pact's* help.

This review has presented some evidence that the people coming into prison who have the greatest needs are likely to be those who have never been in prison before, or people who have substantial previous prison experience. Although both of these groups had concerns about their families, other needs differ. For example, first-time prisoners were more likely than other prisoners to be very upset, and also more likely to have fears about life inside. Clearly, though, there are other prisoners who have problems that *pact* can address. And not all first-time prisoners or highly experienced prisoners are vulnerable.

Participants' descriptions of the kinds of help they received from the *pact* first-night services clearly demonstrate that this help – where it is received – is almost always valued. Hence these services have a proven capacity to ameliorate the distress experienced by prisoners on their first night in custody.

The help received from *pact* often takes the form of relatively straightforward assistance with practical matters, such as facilitating a telephone call or helping with an application. Sometimes it is through the provision of practical help that *pact* workers are also able to offer a more profound level of support; nevertheless the practicalities are often, in themselves, highly important. This suggests that certain aspects of the *pact* role could be shared with prison staff on first night units. The interviews showed that while a majority of participants said that they valued the fact that *pact* workers were independent of the prison, a sizeable minority regarded the status of *pact* workers as unimportant: for these individuals what mattered was that they received the help they wanted – not the person who delivered the support. To the extent that prison staff can help provide the practical assistance that most prisoners require, this will provide more scope for *pact* to fulfil other roles, such as liaison and emotional support for prisoners who have the greatest needs.

A related point is that the presence (or absence) of *pact* is only one of many different factors that impact on a prisoner's experience and sense of well-being during the first few days in custody. These factors range from the relatively mundane but nevertheless highly important – such as the availability of showers, or the time taken to process prisoners' pin numbers – to the more intangible and all-encompassing – such as the quality of relations between prisoners, or between prisoners and staff. This again highlights the importance of *pact* operating as part of an integrated team: working alongside officers and also prisoner support (e.g. Insiders) in more generalised efforts to improve conditions, facilities and support for new prisoners.

Entering prison is, for most people, a distressing experience. Some of the stress can be reduced by respectful treatment from officers, timely and accessible information, and opportunities to resolve urgent practical problems. However, at a deeper level, some pressures of imprisonment reflect the separation of the person from the outside world and the roles they had when they were there. This loss remains with the prisoner throughout their time in prison.

The shift from being responsible for personal, family and social duties to being extremely dependent on others is difficult to get through. The challenge of supporting someone through the first few days could usefully focus on helping people accept the loss of their outside responsibilities, even if it is only temporary.

In this sense, *pact's* first night services are essentially targeted at providing short-term crisis intervention for as many new prisoners as possible. *Pact* could usefully define their services in the time-limited terms of this transition. During the first 48 hours, people in prison need to take steps to resolve the most urgent problems. But the transition is also a process of accepting that many of their responsibilities will need to be taken on by others. *Pact's* first night services can help with both of these steps, but longer term problems should be handed on to other relevant agencies.

## Recommendations

### Recommendations for the Prison Service and the Ministry of Justice

- ▷ Local prisons should increase opportunities for contact with families during the first few days. In particular, a gap of two weeks between the first phone call and the next is excessive and puts unnecessary strains on family relationships.
- ▷ All local prisons should have specific first night services. Given the high number of prisoners who, on arrival, have pressing family concerns, consideration should be given to extending the work of *pact* and other voluntary sector agencies. Local prisons should develop models based on good practice, and ensure that the services are fully resourced.

- ▶ The specific services that *pact* provides in liaising with families should be replicated more widely and local prisons may wish to draw on *pact's* expertise in developing their first night services.
- ▶ All local prisons should ensure that people have access to a shower, a clean cell, and something to eat on the first night in custody.
- ▶ Information about the prison must be available in a wide range of formats (and prisoners should have opportunities to ask for further information verbally) right through the person's time inside, and not only during the first 24 hours.

### **Recommendations for prisons working with *pact's* first night in custody services**

- ▶ *Pact* staff and prison officers should work closely together to increase opportunities for meeting the practical needs of newly arrived prisoners.
- ▶ Which prisoners get priority for *pact's* first night services should be decided in collaboration with prison officers.
- ▶ Where possible, *pact* should work with prison staff in supporting prisoners who find it difficult to move from a first night unit to normal location.

### **Recommendations for *pact***

- ▶ The specific roles *pact* performs in first night units must be clearly stated and more widely publicised. While *pact* has a leaflet describing its services, it is aimed at prisoners and their families, not staff; moreover, it is evident that not all prisoners are aware of the presence of *pact*, despite the leaflet.
- ▶ *Pact's* first night services need to be closely integrated into the prison's arrangements for reception and induction.
- ▶ The pressure of numbers entering custody is such that *pact* should prioritise those with the greatest need for its help. The system to ensure that *pact* sees those who would benefit most from their service will depend on the internal arrangements of the individual prison, but should include a balance of the following options:
  - screening of all arrivals by prison officers, who refer to *pact* those in the greatest need
  - *pact* can ensure that there are systems to enable induction staff, wing officers, Insiders, Listeners, and others to refer individuals to *pact*

- publicising the service in reception and first night units, encouraging prisoners with particular needs to self-refer. (If numbers of self-referrals are too great, *pact* workers will need to screen them to identify those with the greatest need)
  - introduction of a system whereby *pact* workers are informed by reception of all new arrivals who are first timers and those with multiple previous prison experiences. *Pact* would see all such individuals, and take additional referrals from staff as required.
- ▷ *Pact* workers should be alert to the particular sets of needs that typify first-time prisoners and those with multiple previous experiences of prison.

## REFERENCES

- Flanagan, J. (2007) "Best inmate induction." Financial Times 17 August 2007.
- Grimshaw, R, King, J, Salmon, S, and Kilvington, A (2002) 'Evaluation of the First Night in Custody Project, HMP Holloway: Final report', London: Prison Advice and Care Trust.
- Harvey, J (2007) Young men in prison: Surviving and adapting to life inside, Cullompton: Willan Publishing.
- HM Prison Service (2001) 'Good practice guide for peer support schemes', London: HM Prison Service; online: <http://www.hmprisonservice.gov.uk/assets/documents/100004C3peer-support.pdf>
- HM Prison Service (2003) 'Good practice guide for Insiders peer support schemes,' London: H M Prison Service; online: <http://www.hmprisonservice.gov.uk/assets/documents/100004C4InsidersBookletFinal.pdf>
- Howard League for Penal Reform (2006) Care, concern and carpets: How women's prisons can use first night in custody centres to reduce distress, London: Howard League.
- Liebling, A; with Tait, S, Durie, L, Stiles, A, and Harvey, J (2005) Safer Locals Evaluation, Prison Service Journal: November, 2005, Number 162; also online: [http://www.hmprisonservice.gov.uk/assets/documents/100014F8safer\\_locals\\_evaluation.doc](http://www.hmprisonservice.gov.uk/assets/documents/100014F8safer_locals_evaluation.doc)
- Ratcliffe, M (2005) 'Safer Custody Detoxification Treatment and Therapeutic Programme,' online: [www.kcl.ac.uk/depsta/rel/ccjs/ratcliffe-deaths-in-custody.ppt](http://www.kcl.ac.uk/depsta/rel/ccjs/ratcliffe-deaths-in-custody.ppt)
- Scottish Prison Service (2006) Protocol for the Operation of the Induction Peer Support Scheme within HMP Edinburgh, Edinburgh: SPS Internal Document.
- Shaw, J, Appleby, L, Baker, D, Hunt, I, and Moloney, A (2004) 'Suicide by prisoners: National clinical survey,' British Journal of Psychiatry (2004), 184, 263 – 267.
- SEU (2002), Reducing re-offending by ex-prisoners, London: Office of the Deputy Prime Minister.



## Appendix 1:

### Characteristics of the prisons (statistics reflect the prison at the time of the PRT fieldwork)

Prison	Population	Remanded	Recalled	Convicted unsentenced	Sentenced	Median age
Exeter	488					48
CompE	512	60%				
Holloway	478	31%	5%	17%	47%	41
CompH	431	47%		12%	41%	
Wandsworth	1475	16%	5%	14%	60%	51
CompW	1447	44%	13%	15%	28%	

Prison	Asian	Black	White	Chinese/Other	Mixed	Foreign Nationality
Exeter	0	4%	92%	1%	2%	11%
CompE			80%			
Holloway	4%	21%	65%	4%	6%	29%
CompH	5%	25%	63%	4%	4%	39%
Wandsworth	9%	26%	56%	3%	5%	
CompW	12.0%	9.0%	70.0%	3.0%	6.0%	

Prison	1st Night Unit capacity	Insider scheme	Active Insiders
Exeter	NR	yes	5
CompE	22	yes	1
Holloway	17	yes	4
CompH	NR	yes	
Wandsworth	20	yes	3
CompW	78	yes	7





## Appendix 2:

### Prisoner Participants

Arrival (weeks)	max 32 weeks	Frequency	Percent
	12 +	10	11
	6 to 11	12	13
	2 to 5	51	56
	1 or less	16	18
	no data	2	0
	Total	91	

Status		Frequency	Percent
	sentenced	37	41
	recalled	5	5
	convicted unsentenced	7	8
	remand	42	46
	Total	91	100

Sentence length		Frequency	Percent	Valid Percent
	Over 10 yrs to life	2	1	5
	3 to 9 years	6	1	14
	1 yr to 2 yrs 3 mths	5	1	12
	6 to 9 months	9	1	21
	3 to 5 months	16	3	37
	2 months and less	5	3	12
	SubTotal	43	47	100
	Not relevant	44	48	
	No data	4	4	
	SubTotal	48	53	
	Total	91	100	

Previous times in prison		Frequency	Percent
	Much prison experience	21	23
	three to five times	11	12
	once or twice	16	18
	None	43	47
	<b>Total</b>	91	100

Nationality		Frequency	Percent
	Foreign nationality	16	18
	UK	75	82
	<b>Total</b>	91	100

Ethnicity		Frequency	Percent
	Chinese & Other	2	2
	Mixed	6	7
	White	65	71
	Black	15	16
	Asian	3	3
	<b>Total</b>	91	100

Age Ranges		Frequency	Percent
	18 - 21 yrs	11	12
	22 - 30 yrs	30	33
	31 - 40 yrs	30	33
	41 - 50 yrs	9	10
	Over 50	10	11
	<b>Subtotal</b>	90	99
	Missing data	1	1
	<b>Total</b>	91	100

## Appendix 3:

# CONFIDENTIAL

## INTERVIEW FORM

### PRISON REFORM TRUST

#### 1ST NIGHT IN CUSTODY

Improving the ways prisons support people when they first come in

#### Consent form

##### **The project**

This project is a review of the help given to people when they first come to prison. The project is being carried out by the Prison Reform Trust.

##### **Purpose of the interview**

As researchers for the Prison Reform Trust, we are interviewing prisoners about their experiences of coming into this prison. We want to know about what help you were given, what worked well, what didn't work, and how things could be improved.

##### **Confidentiality**

We will not include any names of prisoners in any report on our interviews. However, the Prison Reform Trust researchers must inform prison staff if a prisoner says they are thinking of harming themselves or someone else, or if they tell us about criminal activity or any information about a child at risk. If something you say must be reported, then we will discuss with you how this will be done.

##### **Names of Researchers**

Jessica Jacobson, Kimmett Edgar, Nancy Loucks

**Please tick the relevant boxes:**

1. I understand why the researchers want to talk to me.
2. I have had a chance to ask questions.
3. I am taking part by choice and I know I do not have to. I also know that I can stop at any time, without giving any reason, without my parole, rights of care, or privileges being affected. All I need to do is tell the researcher if I want to stop.
4. I am also free not to answer any particular question put to me.
5. I understand that my name will not be included in anything PRT writes about this project.
6. I agree to take part in this project.

\_\_\_\_\_  
Name of participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name of researcher

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**Interview Schedule**

1. Approximately how long ago did you arrive at this prison?

2. When you came to this prison, were you ...?

- Remanded
- Convicted but unsentenced
- Licence recall
- Sentenced

3. [If sentenced]

How long is your sentence?

4. Were you ever in this prison before?

How long ago?

5. Have you been in any other prisons before?

How many times have you been in prison before?

How long ago was the most recent before this?

6. Please can you tell me how old you are?

7. What is your nationality?

8. How would you describe your ethnic origin?  
[e.g. white, Asian, black, mixed etc]

9. How were you feeling during the time when you first came to this prison?

10. When you first came in, was there anything about this prison that you were thinking about or worried about?

- [Prompt: What were you thinking about or worried about?]

11. When you first came in, was there anything to do with what you had left outside that you were thinking about or worried about?

- [Prompt: What were you thinking about or worried about?]

12. I will read a list of things you might have been worried about. Please tell me if you were not worried, a little or very worried about each one:

Problem

Money worries

Had no tobacco

Getting your property

Needing protection from other prisoners

Letting family know where you are

Organising care for children/other relatives

Finding out if family are OK

Helping family arrange visits

Feeling low; upset

Needing someone to talk to

Loss of transferred property

Housing problems

Coming off drugs

Alcohol problems

Health problems

Any other

[space for added comments]

13. During your first two days in the prison, did you have any thoughts about harming yourself or suicide?

- [If yes] What kind of thoughts? What happened?
- [If yes, prompt:] What kind of help were you given, and by whom?
- Do you need more help? Of what kind?

14. When you first came in, how were you treated by officers?

---

15. When you came into the prison, did you spend time on the first night unit?

[Make a note of local terminology]

- How many nights did you spend there?
- Who did you talk to there?
- What help did you get?
- Did the help or advice resolve the problems? How?
- Would you have wanted any more help?
- Was there anything about the first night unit that could have been done better?

16. [prisons working with *pact* only] Did you get any help from *pact* workers [explain if needed]?

If No:

- Do you know the people from *pact*?

If Yes:

- What help did you get from *pact*?
- Would you have liked any more help from *pact*?
- Did it make any difference to you to be talking to people who were not prison officers?
- What difference did it make?

17. Did you get any help from Insiders [explain if needed]?

- Please explain how they helped.

18. [comparison prisons]

Would it have made a difference to receive help/advice from people who were not prison staff?

- If yes, how would this have made a difference?

19. Based on your experience of coming to this prison, do you think that new prisoners should be given more help or advice? Please say what kind of help or advice.

