



Research Briefing: the impact of COVID-19 on people in the revolving door of crisis and crime

September 2020



About Revolving Doors Agency

Revolving Doors Agency is a national charity that aims to change systems and improve services for people 'in the revolving door' – people who come into repeat contact with the criminal justice system because of traumatic life events, persistent poverty, and multiple unmet needs such as mental ill-health, homelessness and substance misuse.

We work to create a smarter criminal justice system that makes the revolving door avoidable and escapable, resulting in safer communities. We do this by working alongside national and local decision-makers. We combine lived experience insight, robust research and system knowledge to create policy and practice solutions that work.

About this report

This report aims to expand our understanding of how COVID-19 is affecting people in the revolving door. It explores the lived experience of those who are navigating the pandemic and lockdown restrictions, whilst also being confronted with extreme poverty, trauma and multiple needs. The report is based on research conducted by Revolving Doors, captured through survey responses, telephone interviews, and online consultations and focus groups.

The report provides a glimpse into how people in the revolving door are managing. It is intended to support debate and policy development.

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I. What has the impact been?

Our research provides a snapshot of the daily realities for people in the revolving door since the COVID-19 lockdown measures began in March 2020. Although people's experiences are diverse, often due to difficult personal circumstances (e.g. domestic violence), there are a set of common issues which policy makers and services should consider in responding to the needs of those in the revolving door. These are set out below:

- **Poverty** – people in the revolving door are struggling to pay for daily necessities. COVID-19 has worsened the situation for many, and the consequences of the pandemic when combined with such poverty are likely to exacerbate poor physical and mental health, could increase their risk of experiencing homelessness and may lead to acquisitive crimes being committed to supplement their income.
- **Uncertainty** – people are anxious about the future, and how they will get the support they need to get by. People are dealing with daily anxiety, compounded by a lack of access to and consistency from local services. Those leaving prison are having to navigate last minute changes to resettlement plans, whilst accessing GP services and/or receiving support for substance use has been difficult for many.
- **Isolation** – people have struggled to maintain connections with their support networks, whether they are family, friends, or support services. For many, the increased sense of isolation which has resulted from the lockdown is leading to worsening mental health, and for some it has led to a lack of access to support services. Concerningly, our research indicates that some people are increasing their drug and/or alcohol intake to cope with poor mental health, isolation, and loneliness.
- **Housing instability** – people in the revolving door are living in precarious housing situations that mean they often have to move frequently and with short notice, exacerbating their risk of homelessness. For some, the lockdown meant they needed to escape domestic violence, for others the lack of a permanent address is far too commonplace.
- **Engagement** – people in the revolving door need different and more flexible approaches to be taken to support their engagement with services. As this flexibility is often not provided, many report difficulties in accessing basic services. Our research indicates that whilst some will benefit from phone contact, others will not. Further still, some will instead engage better through home visits or group activities. There should be a range of options available and service users should be presented with choices

The amount of unmet needs amongst the revolving door client group is likely to be on the rise, given service closures that resulted from the COVID-19 lockdown, as well as new or resurgent issues. For this reason, services need to explore what has changed, and how they can support people to access and maintain engagement with their services. This is the moment to check-in and ensure people can access the services they need, and if not to support them to do so. We need to:

- Tackle poverty and ensure people can afford daily necessities.
- Reduce uncertainty by planning support packages, building in COVID-19 related contingences, and making access to services easier.
- Decrease isolation by developing peer networks and spaces for people to socialise.

- Reduce housing instability by tackling street homelessness and hidden forms of homelessness (e.g. sofa surfing), alongside investment in support for victims of domestic abuse.
- Increase engagement of those in the revolving door with services by providing people with multiple engagement options and pro-actively seeking out the people who need support.

2. Methodology

Survey

An online survey was designed by the Revolving Doors team, in collaboration with our lived experience members who tested the survey to ensure its accessibility. The survey aimed to explore how COVID-19 and the associated lockdown had impacted people in the revolving door through comparing circumstances, activities, thoughts and feelings before and after 1st March 2020.

The survey was live for just over six weeks, between 5th June 2020 and 22nd July 2020. It was distributed through our partners, social media, and lived experience members. We received 57 valid responses, from people over 18 with experience of at least two of the following: mental ill health, problems with drugs and/or alcohol, domestic violence, homelessness, and contact with the criminal justice system.

Interviews

To further understand the trends that were emerging from the survey, we interviewed a small sample of the survey participants (2 men and 1 woman). In addition, we have included findings from our interviews with people with multiple and complex needs in Birmingham, conducted over the summer as part of the Birmingham Changing Futures Together evaluation. These interviews were also used to gain deeper insight and provide more detailed summaries of personal experiences underlying the trends uncovered through the survey.

Consultation and focus groups

To further explore the impact that COVID-19 has had on those in the revolving door, we worked alongside Revolving Doors Lived Experience Forum members to better understand their current circumstances, including contact with services and the criminal justice system. We also worked with The National Expert Citizens' Group (NECG), which is a lived experience representative group for people using services in the National Lottery Community Fund's Fulfilling Lives programme.¹ These lived experience consultations took place through:

- Three online sessions run with over 40 NECG members.
- Two online sessions with 21 Lived Experience Forum members to understand the potential impact of the Covid-19 related operating models in prison.
- Two online focus groups with seven men and seven women under probation supervision during lockdown (held separately to assess gender-specific issues).

¹ Fulfilling Lives aims to create system change to improve services for people who have experienced multiple disadvantage (two or more of; homelessness, substance/alcohol dependency, mental health issues and contact with the criminal justice system), <https://www.tnlcommunityfund.org.uk/funding/strategic-investments/multiple-needs>

3. The findings

This section provides an overview of the characteristics of survey respondents (section 3.1) before summarising our key findings relating to housing and living situations (3.2), income and living costs (3.3), experiences of the COVID-19 lockdown period (3.4), wellbeing (3.5) and contact with the criminal justice system (3.6). Case studies are used throughout this section to provide detailed examples of how COVID-19 has impacted people in the revolving door.

3.1. Overview of survey respondents

In total, 57 people facing multiple disadvantage responded to the survey. We monitored the diversity of our sample so that we could compare experiences for different groups. Respondents had a broad age range (see Table 1). There was also a good balance in terms of gender, 56% of respondents were male, 40% were female and 4% preferred to describe their gender as something else.

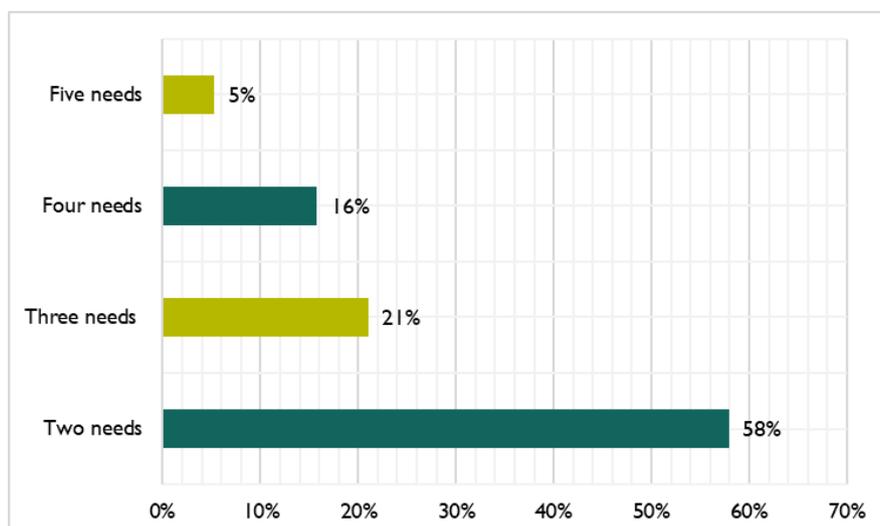
Table 1: Age of survey respondents

Age group	Percentage of respondents
18-25	11%
26-35	30%
36-45	33%
46-55	16%
56 and over	11%

Most survey respondents were White British (79%). 11% were Black (African/ Caribbean/ British) and 9% had mixed/ multiple ethnicities. Respondents were living across England in areas including Birmingham, Gloucester, Lincoln, Liverpool, London and Manchester. More than half of respondents (58%) considered themselves to have a disability and/or a long-term health condition.

Respondents had experienced at least two of the following issues in their lives: contact with the criminal justice system, mental ill-health, substance use, homelessness, and domestic violence. Figure 1 below provides an overview of the number of these issues that respondents reported experience of, to demonstrate the extent to which they had multiple and complex needs.

Figure 1: Respondents complexity of need (n=57)



Patterns in current and previous needs included that:

- Most respondents (79%) reported current or previous experience of mental ill-health.
- 68% had experience of the criminal justice system and just under half of respondents (49%) had experience of both the criminal justice system and mental ill-health.
- 42% of respondents reported experience of both problems with drugs and/or alcohol as well as mental-ill health.

Experiences of contracting COVID-19

It was important to understand the prevalence of COVID-19 amongst respondents. Although none of the survey respondents tested positive for COVID-19, 14% had symptoms but did not get tested. Half of the respondents with symptoms had a disability and/or long-term health condition. Half of the survey respondents who described their ethnicity as Black had symptoms. None of the individuals reporting symptoms ended up in hospital because of their symptoms.

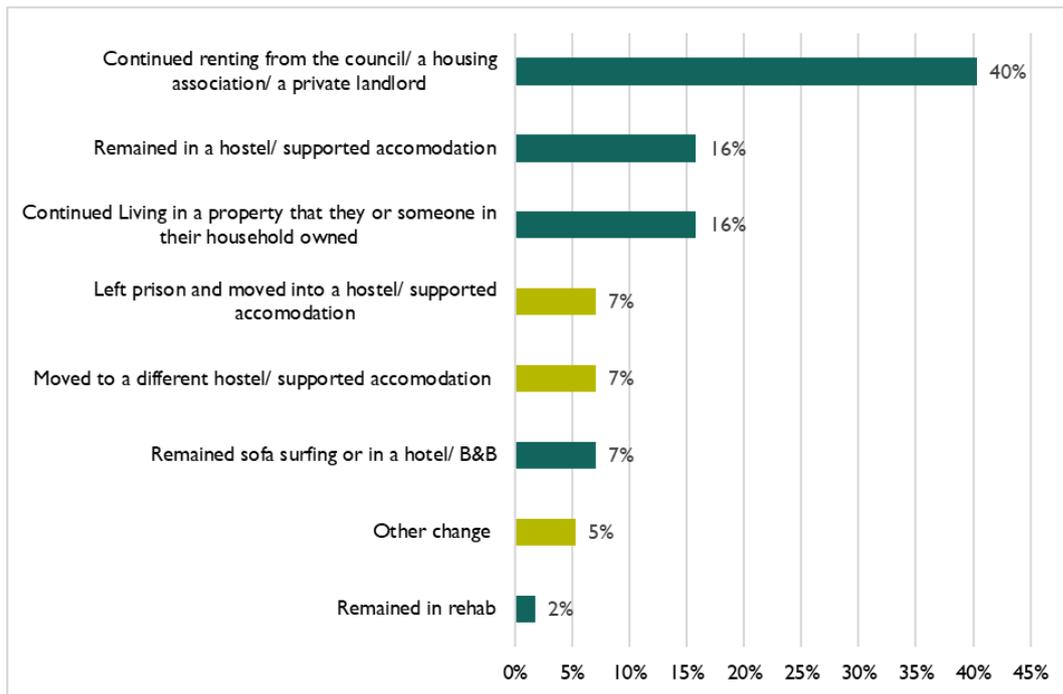
Around a third of respondents (35%) had family members or friends who had COVID-19 symptoms. Nearly half of those family members or friends that had COVID-19 symptoms ended up in hospital as a result.

3.2. Housing and living situation

We sought to understand whether people in the revolving door had experienced positive or negative changes to their housing and living situation because of COVID-19 and the associated lockdown.

Just under one fifth of respondents (19%) explained that their living situation had changed since 1st March 2020, at the start of the pandemic just before lockdown measures were introduced. One reason for this change in living situation was because respondents were released from prison into a hostel or supported accommodation (7%). Two respondents (4%) explained that they had to move because of domestic violence, only one respondent (2%) had moved into a hostel or supported accommodation after rough sleeping, and another had to move into a different hotel because of COVID-19. It was striking from our survey that 45% of respondents did not have stable accommodation during the lockdown period. Of those with unstable accommodation, 8% had caring responsibilities for a child under 18 or adult in their household.

Figure 2: Respondent's living situations after 1st March 2020 (n=57)



Alison's story provides an example of the severe impact lockdown has had on some people's living situation, as well as its impacts on employment, income, and mental wellbeing. Much of which was caused by the need to escape domestic violence.

Escaping Domestic Violence – Amanda's story

Amanda* lives in the West Midlands. She has been diagnosed with Borderline Personality Disorder, and Attention Deficit Hyperactivity Disorder. Amanda suspects she has autism and regularly experiences anxiety.

Amanda was hoping to begin a paid role in March as a support worker with a national youth charity that had previously supported her, but this was postponed because of lockdown. At the time of her interview, in July 2020, she was still unsure as to what would happen next or even if the position was still available:

'I've been trying to gain employment through lived experience...they sorted me a position as a support worker but then lockdown happened and it got postponed and I still haven't heard if I can start that position or if it's still available, no one's come back to me...and because that got postponed things started getting worse at home...it was really crap, I'm the sort of person who likes knowing what's going [on].'

Her partner, who she was living with at the time, stopped working because his job involved decorating, and it became unsafe for him to enter other people's properties. Combined with uncertainty about Amanda's new job, this caused them stress about money. Her partner began claiming Universal Credit but was frustrated with the situation and this impacted on their relationship:

'He started stressing, and communication broke down even though it wasn't great to start with...it all went to pot...I don't even know why my relationship ended as he won't speak to me.'

Amanda described her partner as ‘coercive and controlling’ and because of his behaviour, Amanda ended up moving out of the property and back into shared accommodation where she had previously lived. She had reported him to the police because of ‘serious gaslighting allegations’ and although she was able to make a statement quickly after doing so, and her ex-partner was taken in for questioning, she has unsure what would happen next because she was told that the police would not be taking the case forward.

Although the shared accommodation was familiar to her, she did not like living there because of the lack of privacy and as she sometimes felt unsafe. Amanda explained that living in the shared accommodation was having a negative impact on her mental health:

‘There’s no privacy whatsoever... I’m the only white female there...it’s detrimental to my mental health, it’s like being in an open prison...I’m keeping up my bids [for other properties].’

Amanda received Employment Support Allowance (ESA) and did not have any issues accessing this during the lockdown period. However, because she had to move out of her property at short notice, she had to buy some necessities from her first ESA payment, which meant that she ran out of money to buy food. She was able to access a foodbank, following a referral from her Crisis Skylight support worker, which she found very helpful; the foodbank delivered a package directly to her and Amanda was particularly grateful for the sanitary products that were included:

‘He’s still got quite a bit of my stuff, so I’ve had to replace some bits, the little bits that I’ve had to replace left me short...some of them [food parcels] have been really really good.’

Although Amanda was able to access her medication because she previously had online prescriptions, she had been unable to access mental health support during the lockdown period and struggled to get through to her GP to organise a telephone appointment:

‘My GP can’t really do anything [about mental health] until it goes back to face to face appointments, I’ve only ever been told to take my medication and carry on...’

Furthermore, her support worker at her supported accommodation was absent for health reasons (as this worker was at greater risk of complications if they contracted COVID-19) and she had not been offered an alternative. She wanted more proactive support with her situation, particularly regarding finding safer and more permanent housing. Amanda was also looking for specialist domestic violence support – but did not know how to go about accessing this.

‘I need some support with domestic violence, I’ve not been able to get support with my situation...I need advice from someone.’

The lockdown caused by COVID-19 had made Amanda feel increasingly lonely because of the lack of social interaction. She had also been taking more drugs than before because she felt overwhelmed by everything that was happening.

‘I have to keep busy, otherwise my brain goes to the dark side...the more overwhelmed I get the more drugs I take.’

3.3. Income and living costs

We wanted to learn more about the financial situation of people in the revolving door, and how this had been impacted by COVID-19. Therefore, the survey included questions about employment, welfare benefits and living costs before and after the lockdown period.

Employment

More than half of respondents (54%) were looking for work or not working because of a disability or long-term health condition, and their situation had not changed during the lockdown period.

Over a third (35%) did report changes to their employment situation. Reasons for changes included that respondents had:

- found work (including as key workers),
- not been able to continue with their employment or training,
- been furloughed or,
- started to work from home

18% of respondents considered themselves to be keyworkers. Three of these respondents were able to work from home, but two explained that they felt they had no option but to continue to work, despite their concerns about personal health and wellbeing.

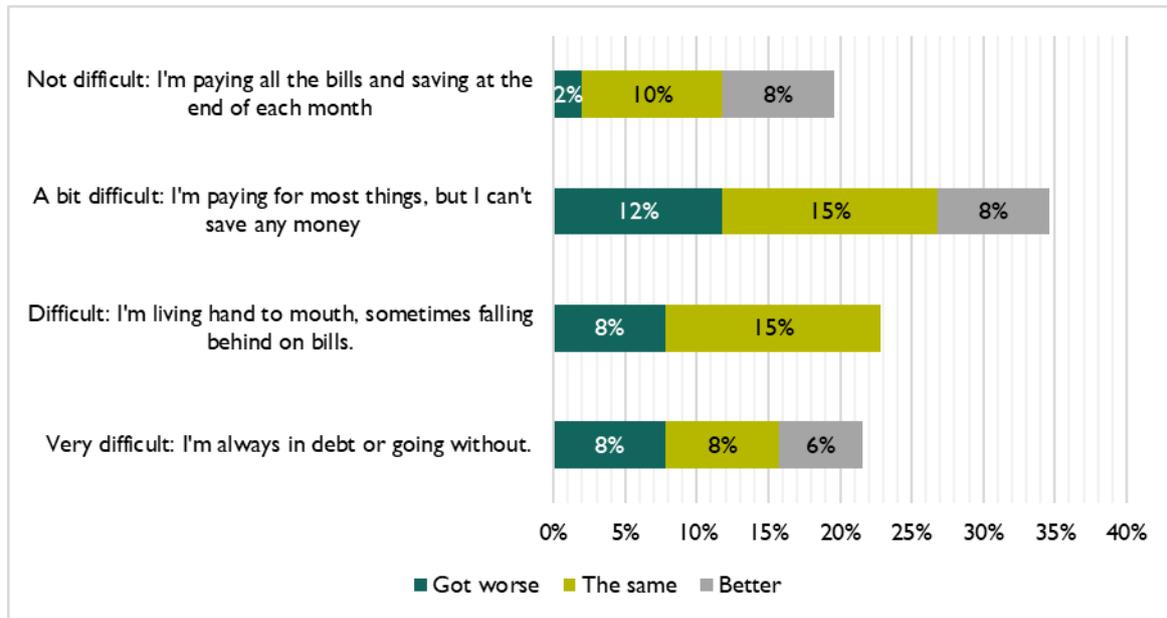
Welfare benefits

The majority of respondents (67%) received Universal Credit. 11% had started claiming Universal Credit since 1st March 2020; including respondents that had been furloughed and one person who had started a new job.

Living costs

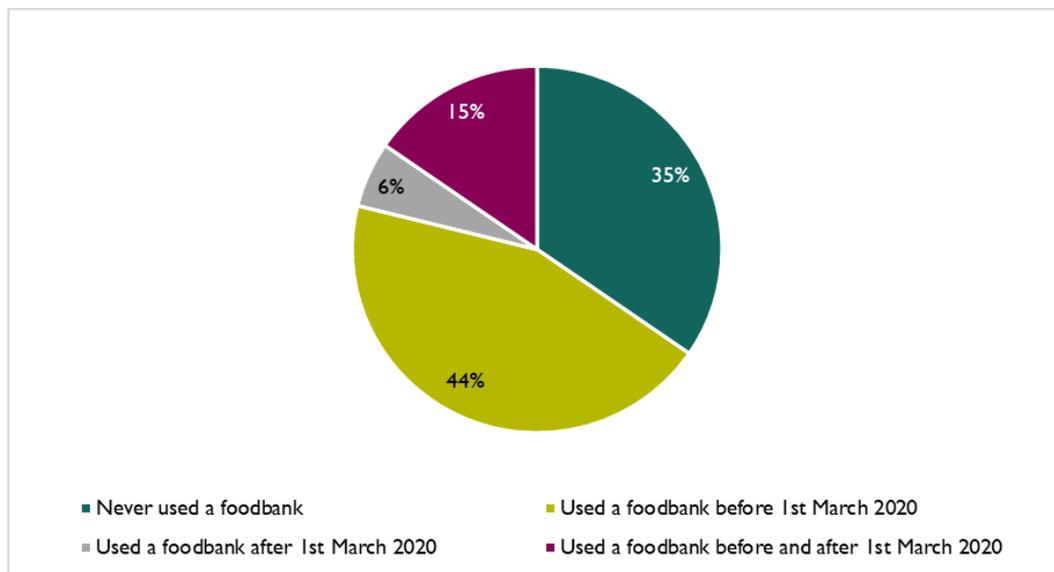
Covering living costs and saving money had been challenging for many respondents. Figure 3 shows respondents experiences of covering their living costs in the past two years and whether this has got worse, remained the same or improved since 1st March 2020. Only 20% of respondents were getting by without difficulty. Over a third (35%) could get by but could not save for the future, almost a quarter (23%) were falling being on bills and over one fifth (22%) were always in debt or going without. Those who said it had not been difficult were White British and did not have caring responsibilities, however the employment and housing situation of this group varied. Those who said it had been very difficult to cover their living costs were either renting their property, living in a hostel/ supported accommodation or sofa surfing.

Figure 3: Comparison of how difficult respondents had found it to pay for their living costs in the past two years, with whether this has changed since 1st March 2020 (n=51)



As Figure 4 shows, more than half of respondents (60%) had used a foodbank in the past, with 14% having used a foodbank both before and after lockdown. The 5% that had only started using a foodbank since 1st March 2020 were not working but reported varying housing and financial situations.

Figure 4: Comparing foodbank use, before and after 1st March 2020 (n=52)



3.4. Experiences of the COVID-19 lockdown period

We also asked questions about respondent's experience of the lockdown period associated with COVID-19 to understand more about their experience of accessing services and completing daily activities. In general, people had difficulty both understanding and following the government's public health guidance. They also struggled to go about many daily tasks, such as shopping for basic necessities.

The government guidance in relation to COVID-19 caused confusion for respondents, who reported difficulties in following this all the time. Just over half of all respondents (56%) were clear on the guidance in relation to COVID-19. Almost a quarter (23%) felt 'always' able to follow the guidance – compared to 30% who felt able to follow it 'often' and 28% who felt able to follow it 'sometimes'.² The people we spoke to have multiple un-met needs, and it is likely that they would require additional support to understand and comply with lockdown restrictions.

Respondents reported finding numerous tasks difficult during lockdown. As shown in Table 2 below, most commonly respondents struggled to shop for basic necessities and maintain social distancing rules. Amongst those respondents who struggled to get medical advice from a GP (33%), all but one reported having a long-term disability or health condition. All respondents that had struggled to access support groups for addiction were men and with one exception, all were aged over 46. The impact on the health and wellbeing for this group in not being able to access services is likely to be significant and should be carefully considered by policy makers and services alike.

Table 2: Overview the percentage of respondents that have struggled to complete different tasks since 1st March 2020 (n=57)

Task that respondents struggled with	% of respondents
Shopping for basic necessities	42%
Maintaining social distancing rules	37%
Getting medical advice from a GP	35%
Getting treatment for a pre-existing health problem	33%
Accessing mental health support	33%
Exercise	30%
Getting a dentist appointment for an emergency	21%
Getting prescriptions from a pharmacist	16%
Going to hospital for urgent health need (not related to COVID-19)	16%
Leaving the house to provide care	14%
Accessing support groups for addiction	12%
Travelling to work as unable to work at home	7%
Leaving the house to escape risk of harm	4%

3.5. Wellbeing

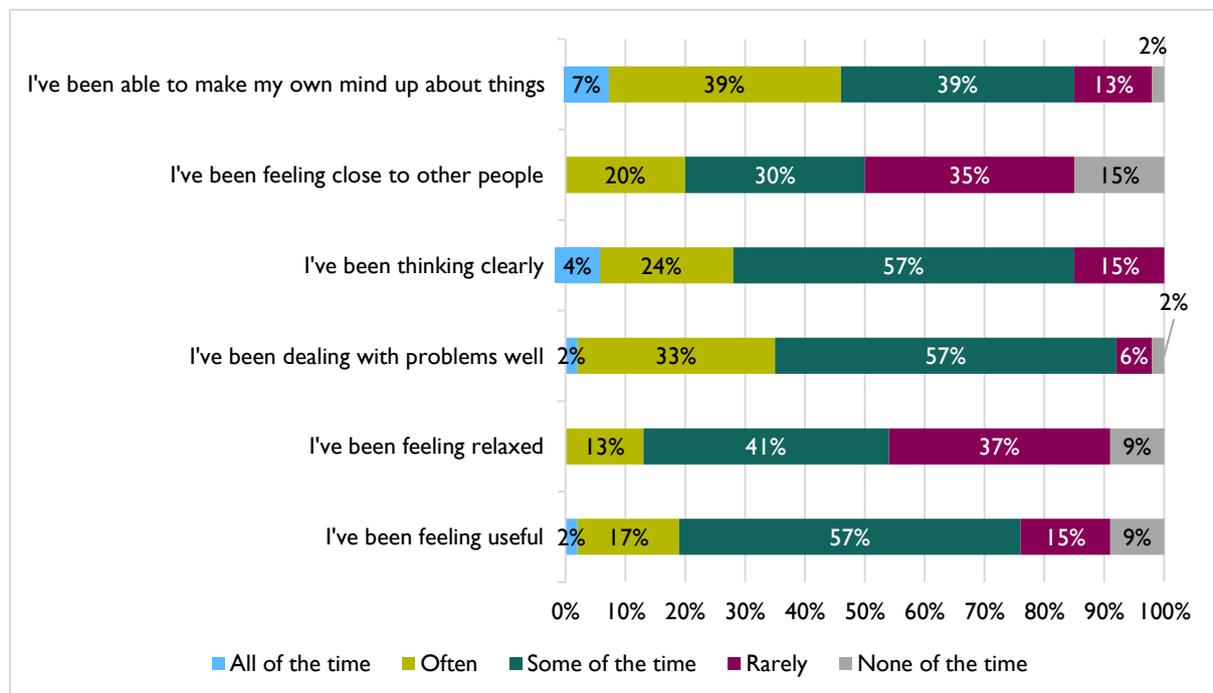
We wanted to find out more about the impact that COVID-19 and the associated lockdown had on the wellbeing of people in the revolving door. We used the validated wellbeing measure, the short Warwick Edinburgh Wellbeing Scale, to measure the wellbeing of respondents over the two-week period before they completed the survey. Responses are summarised in Figure 5 (below). We found that over the preceding two weeks:

- 46% had felt relaxed rarely or none of the time.
- 50% had felt close to other people rarely or none of the time.
- 46% had felt able to make their own mind up about things always or often.
- 35% had felt they had been dealing with problems well always or often.

² 19% of respondents gave no answer to this question.

Those who had struggled to make their own mind up about things tended to be in younger age groups (18-25 and 26-35), and those who had not or rarely felt close to other people usually lived in a hostel or supported accommodation.

Figure 5: Comparing respondents' thoughts and feelings using the Warwick Edinburgh Wellbeing Scale (WEMWEBS) (n=46)



Additionally, some of the pre-existing issues that respondents faced with addiction were being exacerbated by the conditions they experienced under lockdown. For example, 21% of respondents said that they had been drinking more since 1st March 2020, compared to 4% of respondents who said that they were taking more drugs and 9% of respondents who said that they were gambling more.

Michael's story illustrates how people with pre-existing and multiple needs are particularly vulnerable during lockdown conditions, in his case these conditions led to worsening his mental health and problems with increased drug use. His story illustrates the challenges in accessing services under lockdown conditions, and how a lack of communication and connection with these services exacerbated his sense of isolation.

The impact of lockdown on drug use and mental health – Michael's story

Michael* has experience of homelessness, mental ill-health and problems with drug use. He has also been to prison in the past. Michael was from the North West but was currently based in Birmingham. He had no local connections in Birmingham which left him feeling socially isolated and had proved a barrier with accessing accommodation.

Michael felt that the lockdown significantly hindered his progress with addressing his mental health needs and substance use. Although his support worker had put him in touch with the Community Mental Health Team, he was told appointments would be by telephone because of COVID-19, and he found it difficult to discuss certain subjects on the phone. He then ended up being taken off the service because they had struggled to contact him:

“That [the lockdown] affected my mental health in a big way...everything I wanted to do was put on hold because of the lockdown.”

Michael was supported to enter rehab just before the lockdown began. However, he ended up leaving treatment after six weeks, and he attributed his increased substance use to the boredom and lack of support available during the lockdown period – both from the rehab centre where he was based and more widely in his local area:

“When the lockdown came in a lot of people in treatment failed. There was no meetings for us to go to, there was no groups...our one to one sessions with our key workers all stopped, it was pure lockdown boredom...”

“Because I’ve been in treatment in different cities, I travel to go to NA meetings and AA meetings...I like to go different meetings it helps me, but the lockdown came in and I was stuck in one place.”

He did not find the online options effective, especially as the only way he could join sessions was on his small phone, making it difficult to engage:

‘I couldn’t get my head into the online stuff; I’ve never really been into online anything...we’re not used to doing it over the phone on a little screen.’

Lastly, Michael felt that the additional income he had because he was not spending his Universal Credit as normal (due to the restrictions), was a reason for his increased drug use, especially in the absence of support to address and reduce his substance use:

‘We’re all on benefits, we’ve all got money, we’re only used to having money for a short period of time because we’re addicts...so when we’ve got money saved up we don’t know what to do with it...that’s why I failed because I had money.’

Around a fifth of respondents (21%) explained that they had felt lonely often or always since 1st March 2020. All those who had regularly felt lonely had previous or current experience of mental ill-health and most had a disability or long-term health condition. 32% explained that they felt lonely sometimes and 12% said that they had felt lonely occasionally since 1st March 2020. Those who had ‘hardly ever’ felt lonely (7%) were all males living in a hostel or supported accommodation and most respondents who said that they never felt lonely (7%) were in the 26-35 age group, two of whom had continued working during the lockdown period.³

It was clear that for many getting support with mental health issues was of primary concern. Respondents left additional survey comments to explain the difficulty that they had getting in touch with mental health services during the lockdown period:

‘Getting in touch with mental health services has been a nightmare.’ (Survey respondent)

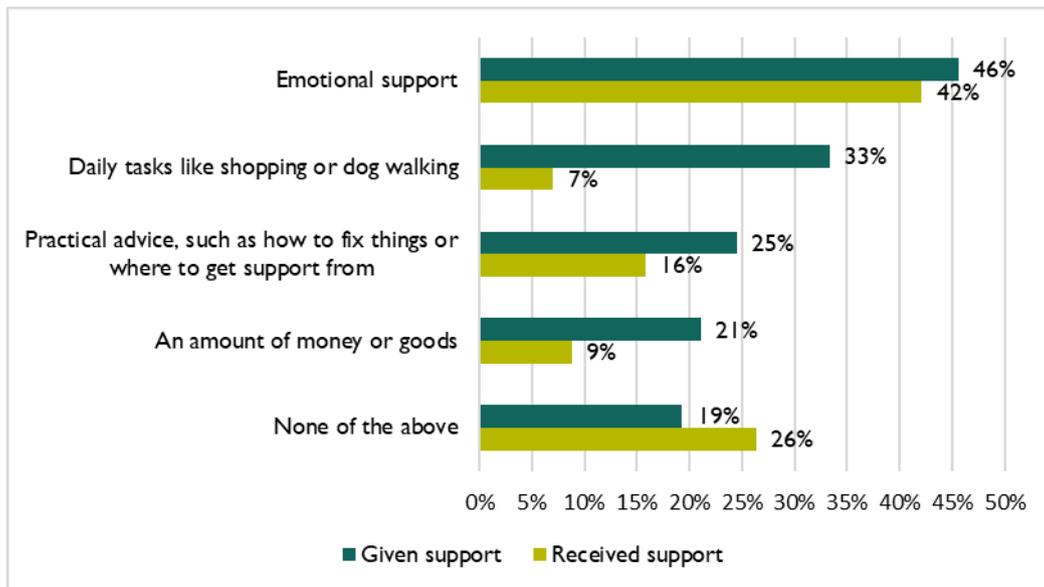
‘The mental health services just don’t contact you to update you, they leave you hanging and assume you to know when a lot of people with mental health struggle to follow the news as it’s distressing.’ (Survey respondent)

Survey respondents reported a mixed picture about receiving support from friends or neighbours during the lockdown period. As outlined in Figure 6, two-fifths (42%) had received emotional support, 7% had help with daily tasks, 16% had practical support, 9% had financial support, and a quarter (26%) had received help with none of these aspects.

³ 19% of respondents did not provide an answer to this question

In contrast, a greater proportion had given support to people in their community. Almost half (46%) had given emotional support, 33% had helped people with daily tasks, a quarter had provided practical advice, a fifth (21%) had provided financial support to others. Given the situation that many of the survey participants found themselves in, it is potentially surprising to see how much support they were able and prepared to offer others.

Figure 6: Comparison of support that respondents had given or received from friends or neighbours since 1st March 2020 (n=57)



As this section has explained, responses to the wellbeing questions varied. Thoughts and feelings differed, but around half of respondents had felt lonely often or sometimes since 1st March 2020. Access to mental health support was raised as a particular issue, but it was positive to see that many respondents had supported friends or neighbours during the lockdown period, despite the difficulties that they themselves were facing.

3.6. Contact with the criminal justice system

Lastly, we asked respondents about their contact with the criminal justice system, including with the police and probation services during the lockdown period.

Police

16% of respondents had reported a crime to the police since 1st March 2020. These respondents included males and females across all age groups throughout England. It was particularly concerning that one respondent recounted how it had taken three hours for the police to respond when her son was involved in a knife attack.

Daniel’s story illustrates the challenges that those in the revolving door have faced in their engagement with the police during the lockdown period. Daniel was arrested, detained, and charged during the lockdown period, and also experienced a video hearing which he found challenging. During this period, he also experienced unstable housing, was unable to see his children, experienced anxiety, and lacked support to help him manage multiple needs in his life. He thinks that if he had been able to register with a GP then he might have got his medication and in turn, his involvement in the criminal justice system could have been avoided.

Being arrested in lockdown: Daniel's story

Daniel* lives in the West Midlands. Although he felt able to deal with the lockdown at the beginning, he became confused as restrictions started to ease as he was unclear about what was possible or not. Daniel is waiting to move into a Housing First flat, but throughout the lockdown period his housing situation was unstable, having moved between staying with a friend and supported accommodation. His son has asthma, so he has not been able to see his children, which has also been stressful:

'I've lost a lot of weight...stress, the anxiety about what's going on and then being in your house all day, drinking became a problem again, I started going back to what I used to... my room in supported accommodation is smaller than a prison cell – I was just looking at four walls, I didn't know what to do.'

The first time Daniel encountered the police during the lockdown period he was intoxicated. Rather than taking him to a police station they drove him home. He found this to be a positive experience and better than previous encounters that he has had:

'Everyone was on the same level, they [the police] were nicer than what they'd been in the past...they were more understanding because of everything that was going on.'

However, Daniel was arrested in July after walking into a shop with a knife in his hand after he rushed to the shop when he realised that he did not have all the ingredients he needed whilst cooking. He explained that he did not understand the reason for this behaviour. He was in a cell for four days over the weekend after his arrest and was only allowed out for 20 minutes for his interview. He did ask to exercise during the period but was not allowed. He ended up having a hearing by video link and speaking to his solicitor by telephone, for which he got no advance notice:

'I've been arrested before, you're normally in there for two days and then taken to the courts at 8am, but this time I was in there for so long...and then they told me that it was video link and I had to stay there until the afternoon...'

Daniel preferred appearing in court in person than by video link because of the contact this gave him with the judge and his solicitor:

'I didn't like it by video link...there's no personal thing about it ...on a video they can't see your demeanour, clothes, energy...no one can see your expressions...it's a big thing, when you speak to someone on the phone they can't see how you feel and your eyes...they just hear your voice.'

Daniel had an Liaison and Diversion (L&D) worker for around one year before his arrest, and his worker came to the police station (after Daniel's mum contacted them) and made sure the courts got his L&D reports, which he did not think would have happened without the support of this L&D worker. He will be going to go back to court soon to do his pre-sentence report with probation services.

Daniel is currently under probation supervision but did not have contact with his probation officer during the lockdown period. Before this, he was seeing them once a fortnight in person. When he contacted probation to query this, they informed him that they had been using the wrong phone number for him and that he had a new probation officer, who he was yet to hear from.

The other issue Daniel has faced is registering with a GP after moving areas, which he had not been able to do in the lockdown period. This meant that Daniel could not get access to his medication because his repeat prescription was due for review.

'My mental health has definitely deteriorated...accessing medication was the biggest problem.'

Overall, Daniel felt that he would not have been arrested if there had not been a lockdown period because he would have been able to access medication and keep busy:

'Being arrested wouldn't have happened if there wasn't a lockdown. The first thing is I would have been on the medication, secondly, I wouldn't have been in the mindset, I would have been doing what I was doing prior to the lockdown which was good...It's put me back, now I've got a court case.'

Prison

18% of respondents had been released from prison since 1st March 2020, all of whom were White British men aged between 26 to 55. All had previous or current experience of mental health issues, or previous or current experience of problems with drugs and/or alcohol. As discussed earlier in the report, all except one were released into a hostel or supported accommodation. The one person that was not, went to live in a property they or someone in their household owned.

Nearly half of those survey respondents that were released from prison since 1st March 2020 had found work. Most of those who were released from prison and had not found work reported having a long-term disability.

Survey respondents that had been released from prison during the lockdown period reported different thoughts and feelings, and had different experiences of the lockdown period, rather than showing similarities in their behaviours and wellbeing.

Rob's story is an example of someone who was released from prison during the lockdown period. His release plans were completely changed by COVID-19, causing him extreme anxiety and exacerbating Rob's pre-existing mental health issues. His sense of feeling socially isolated also continued upon release. Rob feels that he has some good support around him but is keen to move out of the approved premise he was released to in order get his life back on track.

Being released from prison during the lockdown period: Rob's story

Rob* was released from prison during the lockdown period into approved premises in the North East of England, following a 12-month prison sentence. He was previously in full-time employment and had stable housing.

He has a history of mental health issues, including previous suicide attempts. As a result of his mental ill-health, Rob was receiving support from a psychologist, which continued by weekly telephone calls during the lockdown period. However, this was described as a check-in rather than an opportunity to progress with the action plan that was previously developed:

'We drew up a little plan and then the COVID happened so we couldn't do that plan it was just like a weekly check-in, it was a nightmare that way. Everything stopped in prison, we were basically locked up for 23 hours a day, it was hell in there, but I don't like mixing with people, so I liked not having contact.'

Rob also explained that his mental health had deteriorated because of the social isolation and a lack of support network upon release, exacerbated by lockdown conditions. He also found it scary seeing everything so different when he was released because of the changes caused by the restrictions:

'I lost everything in the home and because of got no friends of family or anything left, I'm relying on myself a hell of a lot and my mental health has deteriorated...It was really stressful, it was like it was a different country...leaving the prison was so scary, seeing people with a mask on was like watching a film.'

Staff at the approved premises he was living in were described as supportive and although his probation officer recently changed, Rob described a positive experience of probation services to

date because his initial probation officer was found to be understanding and generally easy to contact:

'She saw me as a person and tried to help me from beginning to end and I needed that help, so I didn't stumble'

However, he did not develop an exit plan until four weeks until he was due to be released which made him extremely anxious about what would happen next:

'It's supposed to be 13 weeks that you start your exit plan, it didn't happen until four weeks before I was released...it caused huge anxieties, I couldn't ask anybody, no one would know, because of the COVID thing I couldn't get in touch with her [my probation officer], I complained, I was told it was nothing to worry about, it was quite common but I did worry because I had no home to go to and no one to fall back on'

Rob did not want to return to the area that he previously lived in because of his conviction and so he had to find somewhere else to live upon release. His anxieties were compounded by the 'scare stories' he had heard from others in prison about probation officers and approved premises:

'My offender manager started saying that I was going to this approved premises in January, so I knew where I was going [upon release] I just didn't know what would happen moving on from here.'

Rob got a lift to his approved premises from a mental health support worker, which he was grateful of, and he explained that without this it would have been a daunting experience:

'If I didn't get a lift to the approved premises I don't know what I would have done, I had to be there at 12, I didn't get released until 10 and I didn't know what bus to get, I was panicking'

Rob had not had any financial problems since being released, as he saved up prior to being released, using his phone and canteen money, and he also was able to access an of his Universal Credit payment soon after release from prison:

'It hasn't been a problem [finances]...I started saving at the beginning of COVID, it equalled up to about £173...I got a lift to the AP so I didn't have to spend any money on buses, as soon as I was here I applied for Universal Credit, the next day I got an advance, I've got enough money to last [the month].'

However, he did not have any fresh clothes and was still wearing shoes that he was given in prison, he did not know how to go about obtaining new clothes shoes.

'I need clothes, until today, when somebody gave me a pair of tracksuits they didn't want, I've been walking around in prison issued clothes and I'm still wearing prison issued shoes, and it's very embarrassing so it would be helpful for someone to say where to get this.'

Going forward, Rob hoped to receive support to move out of the approved premises into his own property in a different area *'that is going to be safe but is also a fresh start.'*

Probation

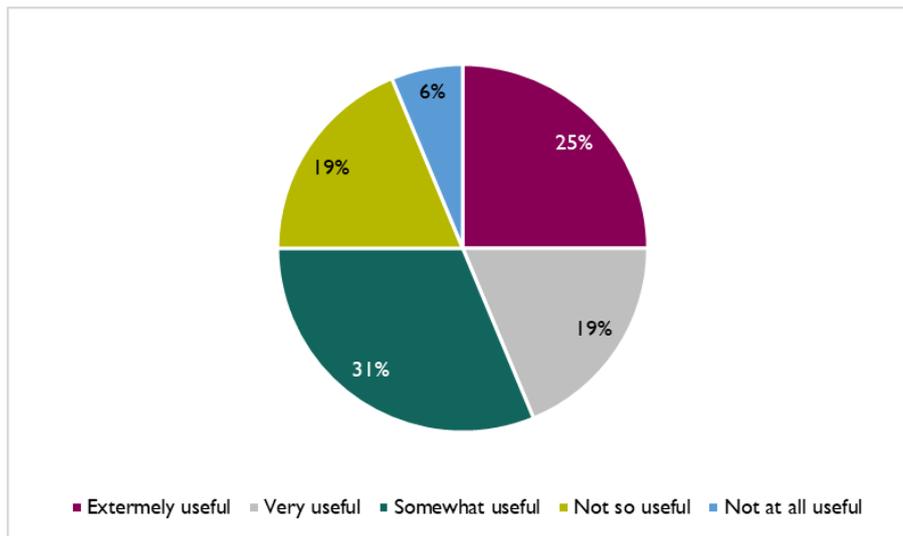
30% of respondents were under probation supervision at the time of survey completion, and with one exception, all had received telephone contact with probation services since 1st March 2020. Written comments provided by survey respondents indicated a mixed picture about their contact with probation services under the lockdown period, these included that:

- Their experience of probation services was positive because they had a good probation officer.
- They had just finished their probation order and were given 'zero support', but they have not always had this experience and previous had worked with probation officers who 'really tried to help.'

- They were promised funding for training by their probation officer, but this never happened.

There were also mixed responses from survey respondents to the questions about whether they found telephone supervision useful. As Figure 7 below shows, 75% of survey respondents who had received telephone contact from probation services found it somewhat, very or extremely useful. In contrast, 25% found it either not so useful or not useful at all.

Figure 7: Views of probation telephone contact since 1st March 2020 (n=16)



The way in which probation officers engaged with people during the lockdown has had mixed feedback, there are positives and negatives that need to be assessed further. It notable that the quality of the the probation officer's engagement with the service user was more often down to the perceived quality of their relationship and the provision of genuine support, rather than the method of communication they used. Ultimately people under supervision wanted a consistent and supportive service, underpinned by a positive relationship with their officer.

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