

# Prisons: Britain's 'Social Dustbins'

## *Proposals to keep people with mental health problems out of prison*

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Britain's prisons have become 'social dustbins' for people with mental health problems and multiple needs. [Nearly half of the people kept in prison have at least three co-occurring mental health problems.](#) The equivalent proportion in the community is less than one per cent. Around 60,000 people with this profile enter prison each year.

Most worryingly, the majority of prisoners with mental health problems report that they were not receiving basic support from community services prior to imprisonment. It is clear that the holes in the safety net of services are too large for this group, so that they fall through into the criminal justice system easily and repeatedly.

[It costs £1.6 billion a year, at the very least, to process people with identified mental health problems through the criminal justice system](#) and these costs will be dramatically higher for those with unidentified needs. This points to a staggering and perverse misallocation of resources. Not only are these costs avoidable, but they could be re-directed to tighten the safety net of community services and result in more effective support and care for vulnerable people.

Revolving Doors makes these proposals for deep systemic change to keep people with mental health problems out of prison:

- 1 Targeted reform of community services is needed and should be driven by evidence of how and why vulnerable prisoners have fallen through the net**
- 2 A significant proportion of the £1.6 billion criminal justice resources spent on people with mental health problems should be re-invested to fund preventative measures outside the criminal justice system**
- 3 Early points in the criminal justice system should be used as opportunities for social inclusion with increased access to health and social care services to help target the risk factors associated with crime**
- 4 Community sentences should be enhanced with mental health support for those who continue to fall through the net, or whose offending behaviour is particularly entrenched**

Such reforms would require sustained strategic drive and political courage. The benefits would be felt in reduced crime, lower spend on offender management, services that genuinely reach and support our most vulnerable citizens and an end to our corrosive reliance on 'social dustbins'.

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## Tightening the Safety Net

**Targeted reform of community services is needed and should be driven by evidence of how and why vulnerable prisoners have fallen through the net**

Holes in the safety net of community services are allowing highly vulnerable people to fall straight through into the criminal justice system. Many people entering prison have received little of the support that might have prevented their offence:

### Holes in the Net of Services and Support

<b>50 per cent</b> are not registered with a GP.	<b>14 per cent</b> have never had a paid job.
<b>42 per cent</b> of men with psychotic disorder have received no help with mental or emotional problems in the previous year.	<b>79 per cent</b> of men with personality disorder have received no help with their mental or emotional problems in the previous year.
<b>33 per cent</b> lack a permanent address or are sleeping rough.	<b>68 per cent</b> are not in education, training or employment.
<b>46 per cent</b> of people arrested who have mental health problems and are unemployed are not receiving any form of benefit payment.	<b>81 per cent</b> of men drinking hazardously in the year before imprisonment received no help with their alcohol problem.

People are crashing through the net of services into a downward spiral of crisis, chaos and criminal behaviour, either because they cannot or are unwilling to engage with services. Many of our most vulnerable citizens are now to be found at some point inside the criminal justice system. Revolving Doors' work has shown consistently that people with multiple needs are placed at particular risk. This point has recently been acknowledged by Government:

*“Individual agencies ... often miss those who have multiple needs but need less help from any one service... Their contact with services is instead frequently driven by problematic behaviour resulting from their chaotic lives ... and management revolves around sanctions such as prison.”*

The emphasis of policy and investment has been on attempting to repair people's lives after the event. In particular, prisons are under considerable pressure to end the cycle of re-offending through rehabilitation programmes. While this is crucial work, **prisons cannot and should not be relied upon to underwrite community services**. The sheer scale of the problem makes this proposition unrealistic: one prison recently informed Revolving Doors that **60 per cent** of the 1000 annual referrals to its mental health service result in no further action. Where rehabilitation work is possible, it is undertaken in the full knowledge that holes in the safety net persist in the community services to which prisoners are returning.

There is a clear case for tightening the safety net of services so that vulnerable people can be supported effectively and with dignity in the community and outside the criminal justice system. We should use evidence of how and why prisoners have fallen through the net to design services and systems which reach and engage people before the downward spiral of crisis and crime grips them.

Evidence of system failure is currently locked away from community commissioners within prisons, so that they never see the full consequences of their decisions. If this evidence was routinely fed back to commissioners, they would gain several missing pieces in the commissioning jigsaw.

This approach would offer a lasting solution to the prison population crisis, but the benefits would be felt much more widely. Prisoners represent some of the most extreme cases of social exclusion nationally. If we use evidence of what went wrong in their journey towards prison to drive the transformation of community services, *non-offenders who also struggle with gaps in services or fragmented care would benefit equally.*

## Reinvesting in Solutions

**2 A significant proportion of the £1.6 billion criminal justice resources spent on people with mental health problems should be re-invested to fund preventative measures outside the criminal justice system**

Transforming services will require changes in the way we work, but it will also require more money. In a tight fiscal climate, we need to look at spending existing money differently. Society is currently pouring money into managing problems instead of investing in solutions. At a very conservative estimate, *£1.6 billion is spent annually arresting, convicting, imprisoning and supervising people with identified mental health problems*, rather than treating or supporting them (see annex). The figure for those with unidentified mental health problems will be dramatically higher. Scarce resources are locked in the wrong parts of the system and need to be assertively redistributed.

Relatively minor shifts would release the money needed to invest in and reform the services that could prevent offending. For example, *five per cent of the criminal justice system's expenditure could be reinvested to double the expenditure of Primary Care Trusts on mental health services.* The holes in community services identified on the previous page point to the key areas that need to be targeted. The best available methodology to ensure that funding is targeted most effectively is provided by Government's new framework of improved early intervention; multi-agency working; performance management; personalisation; and focus on 'what works'.

### The Justice Reinvestment Model

A concept developed in the USA, Justice Reinvestment describes efforts to use funds spent on imprisoning offenders more productively. In areas most affected by imprisonment, local community based initiatives have been designed to tackle the underlying problems which give rise to criminal behaviour. At the heart of this model is a strategic approach to the prevention of offending and re-offending, by collecting and analysing data to inform decisions about how and where best to allocate public funds to reduce crime. Communities with strong relationships between prisons and local authorities are better equipped to respond to problems such as housing deprivation, unemployment, substance use and mental illness and to address some of the social and economic factors that drive offending behaviour.

## Intervening Earlier

### 3 Early points in the criminal justice system should be used as opportunities for social inclusion, with increased access to health and social care services to help target the risk factors associated with crime

For many people with mental health problems, the Police have become their most likely point of contact with the system, rather than health and social care services. Revolving Doors found that people with mental health problems who have a history of involvement with the criminal justice system are three times more likely to be re-arrested than to be in contact with a social worker. **Between seven and fifteen per cent of people arrested are identified by the Police's Custody Officers as having a mental health disorder.** This figure is likely to represent a conservative estimate, given that the Police acknowledge that they are often ill-equipped to identify and respond to mental health needs effectively and only the most severe mental health problems are recorded.

#### Out-of-Court Disposals

The Police are often unable to access the kinds of health and social care services that could respond to the mental health needs of arrestees. As a result, people with mental health problems frequently receive purely punitive responses to their behaviour. For example, nine per cent of arrestees who are identified by the Police as having a mental health disorder are cautioned and six per cent are issued with a Penalty Notice for Disorder (PNDs).

Nationally, this represents an estimated 39,000 people per year. This is despite the Ministry of Justice's guidance that out-of-court disposals, including cautions and PNDs, ought not to be issued where "there are doubts as to the offender's mental health...".

**Neil** is a 47-year-old. He has a long history of mental health problems, very low intelligence levels and is an alcoholic. During a period of crisis, Neil isolated himself and began drinking heavily. The Police found him near his home, alone, smelling of alcohol and very confused. He claimed that he was going to rob an off-license, but had no intention of doing so. He was issued with a £40 Penalty Notice for Disorder (PND) for drunk and disorderly conduct. Two weeks later, Neil called the Police threatening to shoot his neighbour, but did not act upon this. He was issued with an £80 PND for wasting Police time. Neil does not understand what a PND is and has not paid them. He is convinced that he will be imprisoned.

While out-of-court disposals have been championed by the Government as an efficient method of tackling low-level crimes, they have been identified by some criminal justice experts as creating a fast track to prison for vulnerable people. PNDs issued to many people with mental health problems are unlikely to be paid owing to lack of funds, poor (or non-existent) financial management skills and limited capacity to engage with the system. In addition, they may lead to a further deterioration in the mental health of already vulnerable recipients.

Some out-of-court disposals, however, do have the potential to combine the proper administration of justice with support, thereby preventing the escalation of offending. Conditional Cautions, for example, can be used where the Crown Prosecution Service determines that there is sufficient evidence to prosecute and where a relevant condition can be issued. The Preston Nightsafe Project (see below) is an example of this new approach, whereby a rehabilitative health condition is required as part of the Caution. However, this model has not been extended to people with more complex

problems and chronic alcohol needs. The full potential of the Conditional Caution has, therefore, not been fully realised. For example, one Condition of a Conditional Caution could be that someone engages in a process of assessment and planning for their future health or social care, coupled with supported appointments with key services. Without such measures, police can never establish whether low level offenders have the support they need to stop offending.

### **Preston Nightsafe Project**

In order to tackle alcohol-related public order offences, conditional cautioning is being used to operate an Alcohol Awareness Scheme. Established in 2006, the Scheme offers a rehabilitative Condition, diverting perpetrators of alcohol-related offences to an intervention that responds to the nature of their offence. These sessions combine information and audience participation to make attendees analyse the consequences of their drinking, enabling them to take responsibility for it. To date over 100 Conditions have been offered.

### **Neighbourhood Policing**

By 2008, the Government aims to have a neighbourhood policing team in every area in England and Wales, providing teams of police community support officers, constables and sergeants working in local communities. In 2004, the Metropolitan Police introduced its version of neighbourhood policing, Safer Neighbourhood Teams (SNTs). SNTs and the wider neighbourhood policing initiative present an important opportunity to identify and respond to the unmet mental health needs of people before they are drawn into entrenched cycles of crisis, crime and mental illness. However, SNTs lack recourse to appropriate health and social care services and, therefore, cannot fulfil their potential in terms of preventing escalating mental illness and offending. In collaboration with the Metropolitan Police, Revolving Doors Agency and St. Mungo's have established a pilot project that is designed to bridge the gap in provision between SNTs and community health and social care services (see below).

### **Neighbourhood Link Worker Scheme**

The Neighbourhood Link Worker Scheme, operated by St. Mungo's and supported by Revolving Doors, has been established in partnership with the Metropolitan Police's Safer Neighbourhood Teams (SNTs). Mental health Link Workers work with three of Islington Police's SNTs to identify people *pre-arrest* whose unmet mental health needs put them at greater risk of low level offending and anti-social behaviour. Link Workers provide a combination of practical and emotional support, enabling people to access health and social care services, such as registration with a GP, drug and alcohol rehabilitation and housing support. Evidence about the unmet needs of those referred to the Scheme by the SNTs will be fed back to local commissioners, thereby informing their practice.

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## **Strengthening Community Sentencing**

### **4 Community sentences should be enhanced with mental health support for those who continue to fall through the net, or whose offending behaviour is particularly entrenched**

At a conservative estimate, 108,000 people with identified mental health problems appear before the UK's criminal courts per year. The majority do not require full diversion into the mental health system, and so need a response that can combine the administration of justice with packages of community-based support that can address previously unmet needs. Community orders ought to provide the ideal vehicle for this.

Despite evidence of increasing public demand for strong community sentencing and of lower reconviction rates among those serving community sentences, the potential of community sentencing for people with mental health problems is relatively untapped:

- Sentencers are not using the Mental Health Treatment Requirement of the Community Order or Suspended Sentence Orders. [The Mental Health Treatment Requirement has been used for less than one per cent of all requirements issued](#) – just 725 were issued in England and Wales in 2006, out of a total of 203,323 requirements.
- The recent Corston Report on “women with particular vulnerabilities in the criminal justice system” found that “although some sentencers are very reluctant indeed to give custodial sentences to low-level offending women or to remand them to custody lightly, sometimes they believe they simply have no alternative”.
- Non-custodial sentences do not appear to have displaced prison as a response to offending. In the past 10 years, a 25 per cent increase in the numbers starting a Probation Order annually has accompanied a 6 per cent increase in the numbers starting a prison sentence.
- Home Office statistics report that approximately 36 per cent of offenders commit non-violent crimes, such as theft, public order offences, prostitution and criminal damage. Many of these offenders would be eligible for a community sentence. However, they constitute an estimated 35 per cent of the prison population.

**Lorraine** is 19 and is currently serving her first prison sentence for criminal damage. Before coming to prison, Lorraine was living in a hostel. Lorraine reports hearing voices. When this happens she gets angry and damages things, by punching and kicking the walls and doors around her. Lorraine was seeing a counsellor before she was imprisoned, but she is unable to maintain contact with her counsellor during her sentence. Lorraine is finding this hard and, in response, she has started to cut herself and is now on suicide watch.

Funds currently expended on imprisoning people with mental health problems, who do not pose a serious risk to the public, could be much more effectively reinvested in a sentencing framework that provides viable alternatives to custody. Such a framework should include two key elements:

- Learning about the needs and histories of people processed through the courts should be systematically directed into community health and social care systems, thereby informing the development of a viable Mental Health Treatment Requirement for the Community Order that can be tailored to the individual’s needs and circumstances; and
- Community sentences for those with mental health problems should be redesigned as a bridge back into sustained engagement with community services. Voluntary organisations are well placed to provide this bridge, if properly involved.

Currently, most engagement between courts, community and health services is around specific risk and assessment-based imperatives. Community sentences need to be rethought as opportunities for social inclusion, rather than purely risk management tools. This would require collaborative commissioning across systems at a strategic level and problem-solving mechanisms to be put in place locally. Health and social care commissioning should be informed by evidence about the how and why people have fallen through the net of existing community provision and into the criminal justice system. The Government’s pilot Community Justice Courts and the US model of Mental Health Courts both provide promising examples of how such collaboration might produce improved outcomes and ultimately save money.

### Community Justice Courts

Based on New York's Red Hook court model, the Government is piloting a programme of Community Justice Courts. Established in 2005, the primary example is the North Liverpool Community Justice Centre. The Community Justice Centre is designed to combine the powers of a courtroom with a range of community services. The Court processes anti-social behaviour and low-level criminal cases and aims to make offenders repay their debt to the local community, while addressing the underlying issues that contribute to their offending behaviour. The court adopts a problem-solving approach, working with a range of services, such as drug and alcohol rehabilitation, housing advice and debt management support.

### Mental Health Courts

The US has established over 150 specialist 'Mental Health Courts', which process people with a broad range of needs, including "serious and persistent mental illness", co-occurring mental health and substance use needs, learning disabilities and less serious mental illnesses. Community mental health services work closely with the court to develop and implement coordinated packages on the basis of a holistic approach. Unlike other forms of community sentencing, treatment plans are highly individualised, often change and are based on the participant's response to treatment. A fiscal analysis of the Mental Health Court programme found that the resultant decrease in costs to the prison system more than offset the cost to health and social care services, thereby suggesting that the model could decrease the total cost to the taxpayer over time.

## Annex: Costs of Processing People Through the Criminal Justice System

Intervention	% issued to People with Identified Mental Health Problems	Total Expenditure / Total Cost (£m)	
		on everyone	on people with Identified Mental Health Problems
Arrest	12	398	48
Penalty Notices for Disorder (PNDs)	14	4	0.6
Cautions	9.4	9	0.85
Charge	14.7	136	20
Magistrates Courts	14.8	350	51.8
Crown Courts	15.4	171	26.3
Prisons*	28	3,771	1,056
Probation*	33	1,237	408
	<b>TOTAL</b>	<b>6,076</b>	<b>1,612</b>

\* includes the cost of National Offender Management Services' HQ

## References:

- Allen & Stern (2007) *Justice Reinvestment - A New Approach to Crime and Justice*
- Corston (2007) *The Corston Report: A review of women with particular vulnerabilities in the criminal justice system*. Home Office: London
- Council of State Governments, The (2005) *Guide to Mental Health Court Design and Implementation*
- Esmée Fairbairn Foundation (2004) *Rethinking Crime & Punishment: The Report*. London
- Finn et al (2000) *Mental Health, Multiple Needs and the Police*. London: Revolving Doors Agency
- HM Government (2006) *Reaching Out: An Action Plan for Social Exclusion*
- Home Office (2005) *Resettlement outcomes on release from prison 2003*
- Home Office (2005) *Neighbourhood Policing*
- Home Office (2006) *Unpublished figures*
- Home Office (2006) *Offender Management Caseload Statistics 2005*
- Home Office (2006) *Resource Accounts 2005-6*
- Home Office (2007) *Re-offending of adults: results from the 2004 cohort*
- Howard League for Penal Reform (2006) *Community Sentences Cut Crime Fact Sheet*
- Kutchinsky (2007) *Development Programme for Extending Offender Healthcare Support: Early Interventions Work Stream*. London: Revolving Doors Agency
- Lewis, Vennard et al (2003) *The resettlement of short term prisoners: an evaluation of seven pathfinders*.
- Mair et al, *The use and impact of the Community Order and the Suspended Sentence Order*, (2007) Centre for Crime and Justice Studies
- Metropolitan Police Authority, (2005) *NH Joint Review: Policing and Mental Health*
- Ministry of Justice (2007) *Population in Custody: Monthly Table*
- National Audit Office (2007) *NHS (England) Summarised Accounts 2005-6*. London
- National Audit Office (1999) *Criminal Justice: Working Together*
- Nicola Singleton et al (1998) *Psychiatric morbidity among prisoners in England and Wales*. London
- Niven & Stewart (2003) *Resettlement outcomes on release from prison*
- Office for Criminal Justice Reform (2007) *Out-of-court disposals for adults: A guide to alternatives to prosecution*.
- O'Shea et al (2003) *Snakes and Ladders: Findings from the Revolving Doors Agency Link Workers Schemes*. London: Revolving Doors Agency
- Preston Nightsafe Conditional Caution Alcohol Awareness Pilot Project (2007) *Process Evaluation, Stage 1 Report*
- Ridgely et al (2007) *Justice, Treatment and Cost: An evaluation of the fiscal impact of Allegheny County Mental Health Court*. USA: Rand Corporation
- Roberts & Garside (2005) *Punishment before Justice? Understanding Penalty Notices for Disorder*. London: Crime and Society Foundation
- Social Exclusion Unit (2002) *Reducing Re-Offending by Ex-Prisoners*. London

### Revolving Doors Agency

Since 1993, Revolving Doors Agency has been the UK's only charity dedicated to improving the lives of people with unmet mental health needs who have been arrested or imprisoned. Our mission is to create opportunities for people caught in the cycle of crisis, crime and mental illness to transform their lives. We achieve this mission by combining award-winning service development and research, national public policy work and inclusive service user involvement.

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