



Titan Prisons and mental health

On 5 December 2007, Lord Carter produced his review 'Securing the future: Proposals for the efficient and sustainable use of custody in England and Wales', which he describes as 'a long-term strategy as well as suggestions for measures to manage the immediate pressures that the prison system faces' (Carter, 2007, p. iii).

The headline feature of the review, and currently the subject of a government consultation, are the proposals for building three new 'Titan Prisons' each of which would hold 2,500 prisoners, with the first to be built and operational by 2012. They are described in the proposals as a cost-effective way to manage the prison population and modernise the prison estate.

Titan prisons have been criticised from almost all quarters. They have been roundly condemned as badly conceived and flying in the face of a plethora of evidence that says that prisons of this size would make the current criminal justice system worse and exacerbate its problems.

This paper summarises the policy background to Titan Prisons, and considers the cases for and against them in the context of mental health. It is based on our response to the Ministry of Justice consultation, which ends on 28 August 2008.

Context and background

The Prisons crisis

The prison service currently faces a myriad of 'immediate pressures', but overcrowding and an ever-rising population are perhaps the greatest concerns. When Carter published his review the prison population had reached 81,883 (Ministry of Justice, 2007a). The latest shows that the population in custody for June 2008 was 83,667 (Ministry of Justice, 2008a), nearly 10,000 prisoners above the government's Certified Normal Accommodation (CNA) level for the prison estate. Many prisons are more than 50% above their CNA capacity.

Recent inspection reports and prison initiatives have noted prisoners sleeping in toilets (HMIP inspection report of HMP Doncaster, see HMIP, 2008, p. 5) and being held in police cells for weeks on end ('Operation Safeguard'), and the release of tens of thousands of prisoners early over the last year ('End of Custody Licence scheme').

Prisons and reconvictions

We know that prison fails to prevent reoffending for the vast majority of prisoners. In fact, the government's latest figures show that nearly 70% of prisoners are reconvicted within two years of release from prison (Home Office, 2007).

Community sentences provide a far better option for many offenders who are sent to prison. A year's community sentence costs about one tenth of a year in prison, and results in a substantially lower reconviction rate (50%). Community sentences allow people to keep their jobs, their homes and their families, to improve their physical and mental health, and to demonstrate reparation to the community (for example through unpaid work or restorative justice).

A community sentence can require robust, multi-agency supervision and monitoring for up to three years. It can provide drug, mental health and alcohol treatment, link to housing services, employment and education, ensure curfews are adhered to and enable the community to be compensated directly by the offender through unpaid work.

Short prison sentences

Short prison sentences are likely to do more damage than good. They have the highest reconviction rates of any prison sentence length, cost tens of thousands of pounds each to manage, are just long enough for people to lose their job, their home their family and their health (four of the most crucial elements to prevent reoffending; see SEU, 2002), but are far too short for offenders to engage with prison services, or complete any offender behaviour programmes.

In addition, prisoners leaving prison after less than a 12 month prison sentence receive no probation supervision. Some 60,000 prison sentences of less than six months were issued by the courts in 2006 (the most recent year that data on sentencing has been published), out of 96,000 prison sentences in total.

Mental health problems among prisoners

Since the Office of National Statistics (Singleton et al, 1998) showed that up to 90% of prisoners have at least one significant mental health problem, a plethora of studies has consistently found high rates of mental illness in prisons and called for this to be addressed.

Transfers out of prison to forensic mental health services (secure hospitals) are at a record high and growing, and private sector providers now account for half of the 4,000 medium secure beds being used for offenders deemed far too ill to be in prison (see Rutherford and Duggan, 2007).

The Carter Review

The plans were the brainchild of Lord Carter, commissioned by the Secretary of State for Justice to review prison overcrowding. This is Lord Carter's second review for the Ministry of Justice.

The first, in 2003, stated that 'there is no convincing evidence that further increases in the use of custody would significantly reduce crime' (Carter 2003, p. 15), and proposed the creation of NOMS, envisaged as an 'end-to-end' offender management system.

In his second review in December 2007, however, Lord Carter proposed an unprecedented prison building plan, which would take the prison estate capacity to nearly 100,000 places. In large part this would be delivered through the building of three Titan prisons, each holding 2,500 prisoners at a cost of £2.8 billion.

Setting out the benefits of Titan Prisons, Lord Carter's review describes how they would provide: 'cost-effectiveness'; 'optimal sight lines which would result in better staff utilisation and deliver

staff savings'; 'centralised support services [and] administration'; 'biometric scanning, bar coding, electronic door operation allowing long term operational effectiveness and greater efficiencies'; 'shorten[ed] overall build timescales'; 'be co-located with a court, in order to reduce time and cost' and; 'provide an opportunity to incentivise modernisation of working practices and stimulate a competitive market through a large-scale building programme' (Carter, 2007, p. 38). Mental health is mentioned just once in the review.

The Titan prisons consultation

The Government produced a consultation paper on Titan Prisons on 5 June 2008 (Ministry of Justice, 2008b, hereafter referred to as the 'consultation'). The paper asked for help with providing 'potential options for developing model Titan prisons, rather than final solutions'.

The paper asserts the Government's commitment to non-custodial alternatives:

'Our strategy remains that the most dangerous and serious offenders should be in prison, with less serious offenders rehabilitated in the community where possible... For less serious offences, we know that non-custodial penalties can be better in preventing re-offending than short prison sentences. A tough community sentence is a clear punishment but it can also be effective in rehabilitating offenders, turning them away from crime and therefore giving greater protection to the public' (p. 4).

This commitment is supported by £40 million of additional investment to develop community sentence. This investment is welcome but is dwarfed by the £2.8 billion plans for Titan prisons.

The government's case for Titan Prisons

The Consultation provides a section entitled 'The case for Titan Prisons' (p. 21). It focuses on 'value for money':

- 1. Titans represent an opportunity to secure significantly better value for money both in construction and operation... A Titan prison is likely to last over 100 years with a capital cost per place per year of lifespan which is significantly lower than that for a house-block in an existing prison.*
- 2. Titans will also provide significantly better value for money in running costs...[through] the opportunity to provide centralised support services... The use of technology and effective building design will result in better staff utilisation.*
- 3. New builds of this type also present opportunities to realise some of the potential benefits from the creation of the new Ministry of Justice...[such as enabling] new build court facilities next to Titan prisons; opportunities to bring a region's remand population together; sentence planning and assessments more efficiently; reducing prisoner escort costs, [and] helping both the courts and the prison estate to run more efficiently... [But] we are unable to present a full cost-benefit appraisal at this point as we are still identifying potential benefit streams.*
- 4. One of the significant benefits from any large scale prison model...is a reduction in overheads and economies of scale. We have experience of such benefits from bringing prisons together as a 'cluster'... [and] in developing Titan prisons we want to build on our experience with [e.g.] the Sheppey cluster to ensure lessons are learnt, to ensure that the potential benefits are maximised and to reduce risk.*

Our concerns about Titan Prisons

Sainsbury Centre has many concerns about the creation of Titan prisons based on our knowledge of the mental health issues facing prisoners and the prison service.

1. Titan prisons are suited to population control, not individual management

Our experience has shown us that existing prisons, both large and small, offer very limited individualised management and care (see Durcan, 2008). Those prisons that have had some limited success at this are small prisons, where their 'smallness' was integral to their provision of more personalised care. A Titan Prison, holding 2,500 people, in a cluster of different buildings, will find it hard to support this approach.

Overcrowding has been a driving force in recent years in the shift from a prison service that tried to provide individual management to one that has been reduced to focusing on population control. The proposals for Titan prisons have an assumption for overcrowding built in (p. 24). Yet it is individual management, not population control, which is crucial for successful resettlement and reducing reoffending.

2. Titans will be vast, remote and disconnected

Prison populations on the scale of the Titans is likely to mean much of their population is drawn from more distant areas than that of the prison's immediate locality. The consultation paper notes the importance of the prison being 'close to home' for the prisoner (p. 16), yet Titan prisons make achieving this highly problematic for a variety of reasons. Prisons that are remote in relation to a prisoner's community add disconnection from society.

This can severely strain and sever relationships between the prisoner and their family. It also presents serious challenges for resettlement – a goal that never works well with prisons remotely located in relation to a prisoner's home. This will be particularly problematic for local probation services, and especially for health and social care services that are trying to liaise with prisoners and communities across long-distances.

For indeterminate sentenced prisoners, such as life or prisoners serving sentences of Imprisonment for Public Protection, resettlement plans are extremely challenging because the prisoners do not have a release date – a remote location would simply compound these problems (see Sainsbury Centre, forthcoming, *In the Dark*).

We have found that continuity of care from prisons to the community on release is crucial for successful resettlement, yet generally abysmal in the prison system (Sainsbury Centre forthcoming, *On the Outside*). Titan prisons will make continuity of care more challenging, and exacerbate the systemic problems we have encountered in our research. Titans will inevitably result in disproportionate amounts of time being spent by prison mental health on external liaison, with less time spent on providing treatment and care.

3. Mental illness will go unnoticed and unaddressed

Larger prison populations almost always result in people with mental health problems being missed by services and screenings, which results in a greater concentration of poor mental health. This

would add to the toxicity of the prison environment. Bullying, drug misuse and management of different types of vulnerable prisoners will be major challenges in a Titan Prison.

Commissioning mental health services for Titan Prisons would be an enormous challenge, and require huge resource allocations from Primary Care Trusts. We know that investment in prisons for mental health care is massively under-funded (see Sainsbury Centre, 2008), and that there is a 70% gap between prison and what is equivalently available in the community. The demand for mental health treatment and primary care in Titan Prisons is likely to be enormous.

Not only would Titan Prison health services need to be budgeted for to ensure that the NHS had the money to commission at an appropriate level, but commissioners would need to be acutely aware of what was required. This should have been done as soon as the regions are selected for where Titan prisons are to be built to ensure that PCTs and other commissioners are fully aware and engaged, but there is little evidence that this has been considered. The only reference to mental health in the Consultation is to say that "Prisoners' health needs, including those associated with mental health and substance abuse, are provided for" (p. 27).

Currently, an average of £306 is spent on mental health care per prisoner each year, out of a total of £2,769 per prisoner on health care (Sainsbury Centre, 2008). Although this represents a significant shortfall in terms of what should be spent to achieve equivalence, this means that each Titan prison would require a mental health budget of £0.76 million, and each would require an overall health budget of £6.92 million. To provide an equivalent service, PCTs would need to budget for at least three times as much as they invest currently in mental health care, amounting to a total of almost £7 million across the three new prisons.

4. There will be highly significant workforce problems

The prison estate is massively short-staffed at present. The recruitment of enough staff to operate Titan prisons (as many as 4,000 Prison Service staff alone), will be very challenging.

The current dissatisfaction among the prison and probation workforces, high staff turnover rates, and frequency of sick days (11.7 per Prison Service employee; a total of 590,937 in 2007/8; see HMPS, 2008, p. 105) mean that Titan Prisons could be a disaster simply on a recruitment basis. Adequate staff training, particularly in vital areas such as mental health awareness, will risk being forgotten altogether in an attempt simply to ensure population control and risk management, which is already a challenge for the prison service.

Titan Prisons would require other staff, such as dedicated resettlement teams to attempt to resettle prisoners back into their communities and avoid a 'revolving door' continuum. Yet the Carter Review and the Consultation are both underpinned by a drive for efficiency in staff numbers and a reduction in the reliance on person to person contact.

5. Titan Prisons will not be cost effective

The evidence suggests that Titan Prisons, as with prisons currently, will fail to prevent reoffending for the vast majority of prisoners. As Lord Carter stated in his first review of offender management (Carter, 2003), building more prisons will have no impact on reducing crime levels. Community sentences, which cost a fraction of the price of prison sentences, have proven year after year to be more effective than prison.

Further, building more prisons without investing heavily in health care, resettlement and individual management will simply store up and exacerbate problems related to offending (such as homelessness, unemployment, mental illness), costing enormous amounts to the both criminal justice and non-criminal justice services (particularly health and social care) downstream.

The alternatives to Titans

The case against Titan prisons seems to far outweigh any arguments in their favour. However, there is undoubtedly an urgent need for change in the prison and wider criminal justice system. The following alternative approach to Titans represents the priority areas that, if addressed, would substantially improve many of the current problems needing the most significant attention.

In order to ease the demand on prison places, far fewer custodial sentences need to be given. In recent years the courts have sent more people to prison, and for longer periods, while the number entering the court system has remained stable (Ministry of Justice, 2007b). Given the harm they can do and the limited benefits they bring, the courts should try to avoid the use of damaging short custodial sentences, and sentencers should try to have more confidence in the robust community alternatives that are available to them.

The Esmée Fairbairn project 'Rethinking Crime and Punishment' published its *Manifesto* on how £2.8 billion could be invested in community alternatives rather than in Titan Prisons. It suggests 'strengthening the intermediate estate' (probation hostels, halfway houses, bail and resettlement accommodation), investing in 'intensive supervision' arrangements for young offenders and 6,000 adult offenders who would otherwise be in prison on short sentences, and improved 'sentencer liaison' to improve sentencers' confidence in community options. It also calls for three 'mental health link workers' to be established in every Police Basic Command Unit (equating to nearly 1,000 workers) (see Esmée Fairbairn Foundation, 2008, p 23-4).

Small units, based in a local community should by their very nature ensure that connections with the prisoner's home are not so inevitably lost, their ties to their family are more easily maintained, and their resettlement plans are more effectively delivered. Small prison units will allow for an individualised approach to prisoners to be taken by local probation teams and other services (such as housing, employment and health) can be engaged more effectively. For all prisoners, and for women and children in particular, it has been shown that small local units are far more effective (Durcan, 2008; Corston, 2007).

In short, the diversion of offenders with mental health problems away from prison into robust, multi-agency, non-custodial alternatives must also be a high priority. We hope that the forthcoming 'Bradley Review' and the awaited Department of Health and Ministry of Justice 'Health and Offender Strategy' will provide the impetus and drive to radically reverse the current mental health crisis in prisons and the criminal justice system. Until that time, we recommend against investing £2.8 billion in three new prisons if that money could be invested more productively in alternative provision that has better outcomes for prisoners and their families, for victims and for communities.

Further information

For more information on this response please contact: Max Rutherford, Policy Officer, Criminal Justice Programme, Sainsbury Centre for Mental Health, on max.rutherford@scmh.org.uk.

References

- Carter P. (2003), *Managing Offenders, Reducing Crime: A New Approach*, London: TSO
- Carter P. (2007), *Securing the future: Proposals for the efficient and sustainable use of custody in England and Wales*, London: TSO
- Corston J. (2007), *A Report by Baroness Jean Corston of a Review of Women with Particular Vulnerabilities in the Criminal Justice System*, London: TSO
- Durcan G. (2008), *From the Inside: Experiences of Prison Mental Health Care*, London: Sainsbury Centre for Mental Health
- Esmée Fairbairn Foundation (2008), *Rethinking Crime and Punishment: The Manifesto*, London: Esmée Fairbairn Foundation
- Her Majesty's Inspectorate of Prisons (2008) *Report on an unannounced full follow up inspection of HMP Doncaster, 11–15 February 2008, by HM Chief Inspector of Prisons*, London: HMIP
- Her Majesty's Prisons Service (2008), *HMPS Annual Report and Accounts 2007-2008*, London: TSO
- Home Office (2007), *Re-offending of adults: results from the 2004 cohort*, London: Home Office
- Ministry of Justice (2007a), *Population in Custody Monthly Tables November 2007*, London: Ministry of Justice
- Ministry of Justice (2007b), *Sentencing statistics 2006 England and Wales*, London: Ministry of Justice
- Ministry of Justice (2008a), *Population in Custody Monthly Tables June 2008*, London: Ministry of Justice
- Ministry of Justice (2008b), *Titan Prisons*, London: Ministry of Justice
- Rutherford M. and Duggan S. (2007), *Forensic Mental Health Services: Facts and figures on current provision*, London: Sainsbury Centre for Mental Health
- Sainsbury Centre for Mental Health (2008), *Short-changed: Spending on Prison Mental Health Care*, London: Sainsbury Centre for Mental Health.
- Sainsbury Centre for Mental Health (forthcoming), *In The Dark: The Mental Health Implications of Imprisonment for Public Protection*, London: Sainsbury Centre for Mental Health
- Sainsbury Centre for Mental Health (forthcoming), *On the Outside*, London: Sainsbury Centre for Mental Health
- Singleton N., Meltzer H. and Gatward R. (1998), *Psychiatric Morbidity among Prisoners in England and Wales*, London: Office for National Statistics
- Social Exclusion Unit (2002) *Reducing re-offending by ex-prisoners*, London: Cabinet Office