



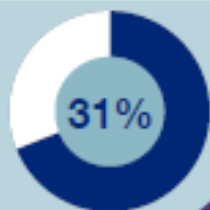
Public Health
England

Gender-specific health and wellbeing standards for women in prison

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Women in Prison

Women in detention settings often have multiple complex needs, including higher rates of physical and mental health needs, drug or alcohol dependence, poorer access to health services as well as poverty, indebtedness, unemployment, poor education and homelessness



Almost one-third of female offenders have spent time in care as a child

Domestic violence



63% of women in prison have experienced child abuse

Over half the women in prison say they have suffered domestic violence

High rates of post traumatic stress have been reported

Mental health

5x

Women in prison are 5x more likely to have mental health concerns than the general female population



66% of women in prison suffer from depression, compared to 37% of men in prison

Drug use



8/10 have ever taken an illegal drug



6/10 have used class A drugs in the four weeks before custody



6/10 reported committing offences to support someone else's drug use



49% of women had a drug problem on arrival in prison

Suicide among recently released female prisoners is

40x

higher than general population

Impact on families



6/10 have dependent children



2/10 are lone parents before imprisonment



84% are serving a sentence for non-violent crime



Only 6% of children remain in their own homes while their mother is in prison

Sexual health

Women have higher rates than men HIV, Hepatitis C and STIs such as chlamydia infection, gonorrhoea and syphilis



Prison population



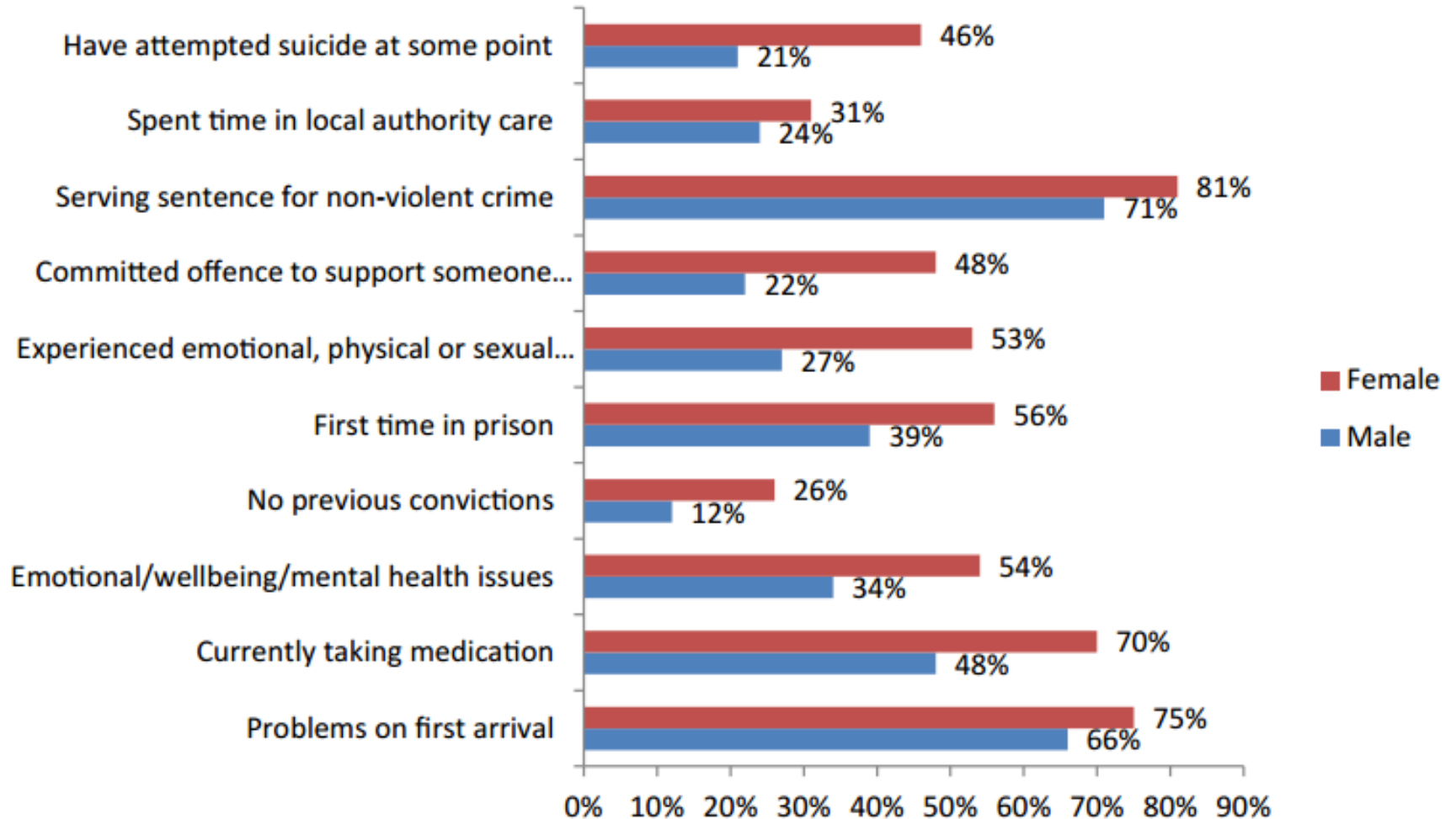
Women in prison accounted for 23% of all prison self harm incidents despite representing just 5% of the prison population

Self harm incidents





Vulnerability comparison between adult women and adult men *(Source: Rebalancing Act)*





No gender-specific health and wellbeing standards exist

- Male and female prisons operate within same rules and policies
- Gender-specific standards for the treatment of women prisoners do exist:
 - the “Bangkok Rules” (United Nations, December 2010)
 - 70 rules, includes 13 relating to health-care services – but narrow and/or too general
 - Medical screening on entry
 - Gender-specific health care
 - Mental health and care
 - HIV prevention, treatment, care and support
 - Substance abuse treatment programmes
 - Suicide and self-harm prevention
 - Preventive health-care services



Methodology

- Evidence review of health and wellbeing of women in prisons
 - Online published literature
 - Grey literature
 - Existing (international standards) – e.g. the Bangkok Rules, NICE, CQC
 - Assessment of current provision and best practice across women's estate
- Research questions:
 - What existing standards are there for women's health in prisons?
 - What evidence is there for effectively improving the health of women in prisons?
 - What interventions promote health and wellbeing of women in prison?
 - What criteria should we consider when addressing the health of women prisoners?



What's included?

- Health and wellbeing
- Smoking cessation
- Diet and nutrition
- Violence and abuse
- Maternity
- Primary healthcare
- Mental health and emotional wellbeing
- Suicide prevention
- Weight management
- Substance misuse
- Sexual health
- Protected characteristics (e.g. older people, BAME, LGBTQ)



Overarching Principles

- The whole prison environment should be focussed on promoting the mental and physical health and wellbeing of all women in prison
- The prison environment for women needs to be trauma informed
- User involvement needs to be integrated into the delivery of health and well being programmes in prison
- All women in prison should have access to purposeful activity and time out of cell
- A structured programme of peer support should be available to all women



Standards

Mental Health & Well Being

- Women in prison facing a crisis should have access to mental health care 24 hours a day, 7 days a week
- Access to a broad range of psychological therapies and therapeutic activities appropriate to their level of need
- Access to secure mental health accommodation should be available to women who require it within 14 days
- Identified with a mental health issue should have their own written care plan
- Liaison and diversion services should be in place in all areas to ensure that women in contact with the police and courts with mental health needs are identified and diverted away from custody if required



Standards – Mental Health & Well Being

- Prior to their release from prison, women receiving treatment for mental ill health should be referred into community services
- Multidisciplinary staff training on improving mental health and wellbeing should be mandatory Need to link to work with HMPPS
- The built environment should enable recovery and promote good mental health and well being
- Risk of suicide – risk assessment, information sharing, ACCT process and part of wider suicide prevention plans



References/links

- UN Bangkok Rules: <https://www.penalreform.org/priorities/women-in-the-criminal-justice-system/bangkok-rules-2/>
- Corston Report: <https://www.justice.gov.uk/publications/docs/corston-report-march-2007.pdf>
- Rebalancing Act: <http://www.revolving-doors.org.uk/blog/rebalancing-act>
- Prison safety and reform white paper: <https://www.gov.uk/government/publications/prison-safety-and-reform>
- Kyiv declaration on women's health in prisons: http://www.euro.who.int/_data/assets/pdf_file/0004/76513/E92347.pdf
- WHO health in prisons: http://www.euro.who.int/_data/assets/pdf_file/0009/99018/E90174.pdf
- Government's response to the Fiver Year Forward View: <https://www.gov.uk/government/publications/five-year-forward-view-for-mental-health-government-response>
- Better health, better lives for prisoners: A framework for improving the health of Scotland's prisoners: <http://www.scotphn.net/wp-content/uploads/2015/10/A-framework-for-improving-the-health-of-Scotlands-prisoners-Volume-1.pdf>