



GOOD-BYE FRAGGLE ROCK

Acute care in Brixton Prison

Dr. V. Somasundaram

"Brixton's bedlam closes" was the headline about three years ago when the infamous "F" wing closed for good. Health care professionals in the prison service and prison watchers breathed a sigh of relief. The change signalled the end of decades of inhumane treatment of the most vulnerable people in society, the mentally ill who committed petty offences. Instead of receiving adequate treatment for their illness Londoners were remanded into custody, at Brixton, to await the long ordeal of being processed by the courts. A lucky few subsequently found a place in a psychiatric hospital to receive civilised treatment.

Brixton Prison was built in the 1820s. Until recently time had stood still in the gaol. The wings were named in alphabetical order and F-wing was the medical block. Towards the end of the eighties Brixton was overcrowded, housing more than 1100 prisoners, in accommodation built for half that number. The "medical block" locked up 230 prisoners who were ill or disturbed in some way. A significant number of them were psychotic and required urgent treatment in hospitals but a mentally disordered offender stood at the bottom of the queue for provision of services. Many were withdrawing from addictive drugs. The "medical block" was also a home for those who could not cope with prison pressures, and for the mentally disordered. The prospect of any of these men receiving a treatment order disposal by the courts was slim.

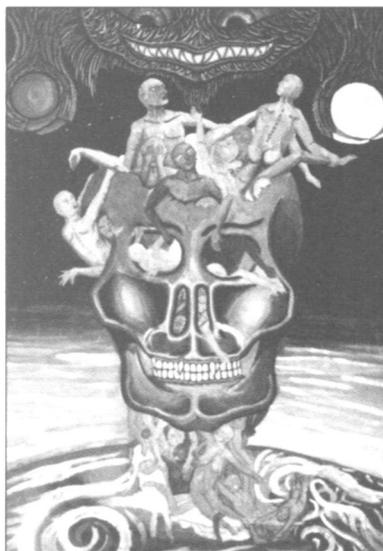
Without doubt a fair number of them were rootless and roofless. When the courts eventually released them they often reoffended to return to this safe haven again. At least this provided them with three square meals a day, better than the cold streets outside.

Care in the community

During the eighties government policy for the mentally ill concentrated on closure of the large state institutions. These were to be replaced by smaller units and care in the community. Although the closure of beds was pursued with vigour by the health authorities, provision of community care was patchy and disorganised. As a result many mentally ill people were discharged too soon and without adequate

follow-up care. Many of them ended up in bed and breakfast accommodation with no daycare, some receiving an occasional visit by the community nurse to get their monthly injections. Quite often the behaviour of such patients was at odds with the expectation of the community in which they were living.

There is a direct correlation between the rise in the mentally disordered offender population in prisons and the closure of the hospital programmes. There were about 800 transfers under the Mental Health Act from prisons to hospitals in 1990. Two schizophrenic patients killed members of the public in the early nineties. These were matters of serious concern and there have been several other incidences of injury to the public by the mentally ill due to lack of adequate facilities and care.



Brixton F-wing was called "Fraggle Rock" by the rest of the prisoners. The level of disturbance was quite high, there was constant noise from the disturbed prisoners, who were locked up for the majority of the time, banging their doors for attention. At any point in time there were only 3 to 4 prison staff to attend to the medical and psychiatric needs of about 50 to 60 prisoners. Most of the care was basically medical, ensuring that they received prescribed treatment. The staff faced a monumental task in assessing the medical and nursing needs of such a large disturbed, mentally ill population. They included 5 doctors and about 60 officers with no qualifications in psychiatric care or rehabilitation. Their role was reduced to providing basic care and ensuring that the prisoners appeared at court on the day they were due to appear. In a conventional

hospital it would have been necessary to employ five times this number of qualified staff to provide the necessary services for a population of this size.

An overflowing cauldron

The consequences of this policy of concentrating large numbers of mentally ill in unsuitable, overcrowded, unhygienic conditions were inevitable. It was a potential cauldron waiting to spill over. And it did. Despair and depression took their toll. 14 prisoners took their lives in the prison between 1988 and 1990. Brixton was branded as the "suicide capital" by the media who lost no time in condemning the whole prison. HM Chief Inspector of Prisons produced a highly critical report in 1990 and urged urgent changes in the provision of adequate health care for mentally disordered offenders. Coroners' inquests passed verdicts of death 'due to lack of care'. Human rights groups were highly critical. The Southwark Coroner made various recommendations about the need to implement anti-suicide measures in the prison. With the resultant pressure the Prison Service set up a task force to improve the care of the mentally ill and set up an Acute Care Unit in the prison in 1991.

The closing of F Wing

A major restructuring in Brixton paved the way for radical change. A reorganisation of London prisons left Brixton dealing only with remand prisoners from the Central Criminal Court and Southwark Crown Court, along with associated magistrates courts. Overcrowding in the prison was gradually reduced, and systems for diverting mentally ill men were introduced. In early 1992 F Wing finally ceased to exist. In its place an Acute Care Unit was opened. There the most disturbed prisoners are cared for by trained staff. Other mentally ill men are cared for in health care wards. Despairing prisoners have access to Samaritans and trained counsellors.

This is not to say that all the problems have been solved. Current legislation which allows the mentally ill to be remanded in custody, to prison as a place of safety, needs to be reviewed urgently. The day when this legislation is removed from the statute will be the day when the mentally disordered offender will have the same right to civilised care as any other person in society. At present this day looks far away.

Dr V Somasundaram is Director of Health Care, HMP Brixton.