



## LETTERS TO THE EDITOR

Dear CIM.

I am writing to the readers of Criminal Justice Matters because of our current financial crisis. MEDIATION UK, the national charity for Neighbour, Victim/ Offender and Schools Mediation, may lose its director if funding is not found very soon.

The charity has written to the Prime Minister to avert this crisis and sent copies to government departments who benefit from their services. Jean Corston MP has tabled an Early Day Motion in Parliament, and we have written to all our members to ask their MPs to sign this.

Until now MEDIATION UK has been funded by charitable trusts, but one of our main funders cannot continue, now that we are well established, believing that we should be supported by public funds. We have applied to various departments of the Government, but because our work crosses the boundaries of several departments, each department has turned us away.

The interest in Mediation continues to grow. There are now 35 Community Mediation Services, 25 Victim/Offender Mediation Services and 10 Projects working in Schools. It will be very difficult to support these without a director.

We would ask readers of Criminal Justice Matters if they would write to their MPs, asking them to sign the Early Day Motion. They could also write to the Prime Minister or to the Government departments, expressing their support for the work of MEDIATION UK.

Yours sincerely, Marian Liebmann Director of Mediation UK

Dear CJM

May I through the journal tell your readers about the work of the 'WHO CARES?' Trust? Our aim is to improve the care system in the UK by, amongst other strategies, increasing distribution of our magazine for young people 'looked after' by the Local Authority.

Begun locally in 1983, and moving

to a national circulation in 1987, 'WHO CARES?' now reaches nearly 26,000 young people in virtually all of the UK's 132 social work departments.

When you look at the figures produced in 1992 by the Prison Reform Trust - 38% of young offenders and 23% of the adult prison population have a care background - the whole system calls for much closer scrutiny. And what do we find? 75% of young people leave care with no educational qualification. Nearly 50% of the homeless on the streets of London were in care: very few find their way to Further or Higher Education or paid employment. Often there is no official help on leaving care and the stigma attached to the 'looked after' status often seems to last a lifetime and to inflict enduring low self-esteem, and a sense of failure. Yet very few enter the care system because of offending behaviour

The 'WHO CARES?' Trust has set itself an ambitious programme of action to improve access to better education, health, counselling, employment and information. We are acquiring advisory and funding partners to do this. We are currently in talks with four government Departments (Employment, Health, Education and the Home Office) to try to influence their decisions. We are also in daily contact with service-providers and local policy-makers.

It is early days, but we are making headway. If any reader of this journal wishes for more details or a sample of 'WHOCARES?' magazine or to offer us good ideas, please contact us at:

The 'WHO CARES?' Trust 235-245 Goswell Road London EC1V 7JD Tel: 071 833 9047

Thank you.

Tory Laughland Director

Dear CJM.

There are aspects to custody which do not always receive appropriate consideration. Two such examples are

disruption and disease. This letter concerns the latter.

Prisons, and other custodial care establishments, have a highly questionable record in dealing with disease. There have been more deaths as a consequence of additional infection than by murder, execution or suicide. Cholera/Typhus epidemics on 18th Century hulks are one of many historical examples. The same has applied to other places of involuntary detention such as prisoner-of-war camps (American War of Seccession), concentration camps (Boer War) etc.

Diseases that are increasing and pose a threat to public health especially within custodial situations include HIV, various strains of Hepatitis (a-e) and TB.

During earlier decades of this century prisons and other places of detention have been less crowded and with a less complex demographic population. The 90's shows every sign of developing into the 'decade' of confusion and chaos.

It is generally accepted that the custodial response to viral infections such as HIV and Hepatitis has been inept, ineffectual and insincere. Massaging figures by encouraging non-disclosure (through discriminatory practices) has been a 'management success' only in that a growing problem has been prevented from having much influence on overall policy.

However, multi-drug-resistant strains of TB are especially disconcerting. The aetology and microbiology around TB strongly suggest that custodial situations are explosively dangerous. This applies to prisons, also court cells and police 'lock ups' etc. Examples from overseas (USA) are most disconcerting.

It is very difficult to construct civil rights around infectious diseases. Additional to the public health catastrophe management of diseases such as TB may set a very retrogressive baseline formedical and general controls within custodial situations.

The positive consideration is that all infections are preventable and most are treatable.

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