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**Special edition: Responding to
the coronavirus pandemic**

A CAPPTIVE Snapshot of Life under Covid

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With regards to the hardship of the double lockdown, it seems to me human beings get used to anything. We did get used to being alone, isolated, and without projects, activities or responsibilities to give some meaning to our time in prison. However, I increasingly wonder what the sense of all this is. With perhaps the exception of dangerous prisoners the stated purpose of the prison system is the rehabilitation of offenders. Yet to keep people isolated from their families, locked up, without any meaningful activity to engage in and in an environment full of drugs is obviously the opposite of 'rehabilitation'. It is detrimental, not just to prisoners' mental and physical health, but to society as a whole.

(CAPPTIVE respondent, Open prison, 15th June)

CAPPTIVE

CAPPTIVE — the Covid Action Prison Project: Tracking Innovation, Valuing Experience — is a project by the Prison Reform Trust (PRT) and PRT's Prisoner Policy Network,¹ which aims to describe life in prison under the pandemic. The project was launched with an appeal in *Inside Time* and *Converse* asking people to write to PRT, describing how their prison was managing under Covid-19. We received input from over 200 prisoners, drawing on experiences in 85 prison establishments.

CAPPTIVE did not gather evidence systematically — it is not 'research' per se, but a method intended to provide a snapshot of prison life during the pandemic, primarily from the perspective of serving prisoners. The feedback covered the period between the end of March and the beginning of September — in other words, the time during which prisons were operating under the most restrictive regime.

Regimes and wellbeing

Epidemics require a difficult balance between restrictions on liberty that help to prevent transmission and minimising the harm that those restrictions cause. Measures that reduce the risks of contagion can undermine emotional wellbeing. The negative effects of quarantine (described in an article in *The Lancet*) include depression, fear, anxiety, irritability, numbness, post-traumatic stress syndrome, and confusion.² This could also lead to psychological harm, including boredom, isolation, separation from loved ones, fears of infection, frustration, and inadequate information. The World Health Organization has pointed out that people in prison are likely to be more affected by a quarantine, because restrictions come on top of the deprivations inherent in imprisonment.³

While external factors can exacerbate mental illness, finding direct causal links between restrictive conditions and mental illness is beyond the scope of the CAPPTIVE project. However, we can report on what prisoners wrote about how the combination of social isolation, inactivity, and the risk of Covid-19 affected their wellbeing. Analysing their experiences can help prison managers and staff to work with prisoners in understanding the impact of the quarantine regime and finding less harmful responses to the pandemic. As Brooks et al. argue: 'successful use of quarantine as a public health measure requires us to reduce, as far as possible, the negative effects associated with it.'

The 23 hour bang-up

The 'exceptional regime management plan', introduced in all prisons on 24 March, reduced the normal daily life in prisons to the bare minimum: meals, phone calls, showers (although not necessarily every day), a short time in the open air (variable, but rarely more than 30 minutes), medication, and medical care. We refer to this extremely empty daily experience as 'the quarantine regime'.

1. Launched in 2018, the Prisoner Policy Network, led by Paula Harriott, is a network of prisoners, ex-prisoners, relatives and supporting organisations, working to ensure that prisoners' experiences are reflected in the development of national prison policies.
2. Brooks, SK, Webster, RK, and Smith, LE et al. (2020). The psychological impact of quarantine and how to reduce it: rapid review of the evidence. *The Lancet*, 395, pp 912-920.
3. World Health Organization. (15 March, 2020). Preparedness, prevention and control of COVID-19 in prisons and other places of detention: Interim guidance.

The restrictions placed on people living in prison were exceptional and prolonged. At the start, workshops and education classes were suspended; education providers withdrew from prisons. However, some prisons continued to provide education through in-cell work packs. While efforts to provide activities in cell were helpful, they did not compensate for the loss of normal regimes. The medium- and long-term consequences of those restrictions remain unknown.

The Chief Inspector of Prisons' Annual Report 2018-2019 (well before the pandemic) noted the impact of long hours behind the door: 'Prisoners spent far too long locked up ... leading to frustration, boredom, greater use of illicit substances and often deteriorating physical and mental health.'⁴ The quarantine regime has extended these effects to virtually the entire prison population and turned prisons into human warehouses.

Initial anxieties

In April and May, after the lockdown was imposed, many CAPPTIVE respondents were focused on the risks of contracting Covid-19. They wrote about anxieties that pre-existing health conditions might make them (or their family member) more susceptible.

Being in a vulnerable group evoked concern when:

- ❑ a prison failed to provide information to people who were vulnerable
- ❑ a prison did not do enough to protect them
- ❑ the shielded regime, for those who were clinically vulnerable, was inferior.

On 7th April, a prisoner asked PRT's advice line about his rights. The prisoner had been informed that his pre-existing medical condition put him at a higher risk of contracting the virus, and that he would not be allowed to attend work. The question was: did the prisoner have the right to make that decision for himself? On the 24th April, another call to the advice line asked for a list of entitlements for people whom the prison had isolated. Such concerns indicated a lack of clarity about prisoners' autonomy with regard to their medical treatment. Medical ethics establish the right of patients to be informed of treatment alternatives and to choose which options best meet their needs.

Effects of social isolation and inactivity

By June, there were signs that people's wellbeing was affected by the quarantine regime. The limited mental stimulation introduced, for some, numbness:

"Lockdown: a phrase known in prisons for when prisoners are banged up. [This is] what it feels like for the days to blur together and the weeks to feel the same, as days run into weeks; weeks run into months with no end in sight." (High secure prison, 5th June)

CAPPTIVE correspondents consistently described the harmful combination of isolation, inactivity, and fear of Covid-19:

"Regards mental health, life seems a bit hopeless to be honest given this unpredictable situation." (High secure prison, 7th June)

"I like to think that before the lockdown, I was in a good place with my mental health and physically. But since the lockdown, I struggle to get out of bed in the morning and I usually read a lot but I have not

been in the right frame of mind to even pick up a book. ... We need some sort of physical activity because all people are doing is eating and sleeping all day." (High secure prison, 23rd June)

Correspondents referred to social isolation from their peers (loss of association) and from their families (loss of visits):

"It's very hard in terms of socialising. For 23 hours a day we are alone with a couple of phone calls and a TV. No matter how much you fill your time, at one point you feel alone and lonely." (Cat B training prison, 9th June)

While efforts to provide activities in cell were helpful, they did not compensate for the loss of normal regimes. The medium- and long-term consequences of those restrictions remain unknown.

4. HM Chief Inspector of Prisons. (2019). Annual Report 2018-2019.

Respondents explained that people in prison felt the need for family contact more acutely during this period.

“Unfortunately, at the very time a resident may need reassurance as to his self-worth, the emotional crutch of a visit from family has been kicked from under him. . . . Absence makes the heart grow fonder, but isolation makes the mind go weaker. Men stress about losing a connexion with their kids, and can suffer a crisis of confidence in their relationships.” (Local prison, 15th June)

“Not seeing my family is taking a massive effect. Relationship issues are a big problem and aren’t getting better due to not being able to see each other. I just feel lost, stuck, isolated, caged up, angry, worried, stressed, depressed and also embarrassed.” (Cat C training prison, 16th June)

CAPTIVE respondents submitted vivid descriptions of the deterioration in mental health. On 3rd June, a woman wrote:

“Mental health is deteriorating for me and [those] around me. Most were coping but over the past 2 to 3 weeks there is a lot of unrest. The worst cases are getting put in seg[regation] and we hear the screaming which is awful.”

Another person wrote:

“Individuals suffering from mental health conditions such as claustrophobia, PTSD, anxiety and depression ... would be up all night doing overtime thinking or panicking or stressing and then be faced with that hectic ‘first thing in the morning’ regime. I observed a few not clean their cells or have showers for weeks due to this.” (Cat C training Prison, 14th June)

In addition to the impact on others who had pre-existing mental health needs, people explained that the regime had harmed their own wellbeing:

“An example of how this 23 1/2 hour lockdown slowly eats away at mental health: I have a paper every Saturday which lasts all day getting through it. This weekend it just didn’t

arrive for some reason. Something as little as not having my paper had a terrible effect on my mental health. For most of the day I wanted to cry — over a newspaper! That’s where we are now.” (Local prison, 17th June)

“The thing that is really beginning to show more is prisoners are struggling with mental health as they are locked up for mass amounts of time. Myself personally, I have worked hard on my mental health but due to all the lockdown it now feels like all the hard work is beginning to come undone.” (Cat C training prison, 25th June)

The lack of programmes also had a significant impact on anxiety levels among those prisoners whose progression had stalled:

“Some of the guys are suffering with depression on a larger scale than normal due to not being able to go to work, not being able to access any programmes needed/demanded so as to progress through the prison system.” (Cat C training prison, 2nd June)

“For myself it’s brought more uncertainty within uncertainty, because I am serving a short tariff IPP⁵ I had not long been on an offender behaviour course before lockdown, and I was due for parole sometime after September, I was told but I never had a date which was eating away at my mental health and now I’m sure that I probably won’t see a parole board this year without completing this objective.” (Adult male prison, 9th June)

“Talking to other women and from my own experience to date involvement in prisoners’ progression is next to zero. But together with the lockdown and OMUs’ [Offender Management Unit] current hands-off status it has significantly increased suffering and pushed me into despair.” (Women’s prison, 22nd June)

The lack of activity fed a sense of purposeless existence:

“To be honest the main problem for me over the last couple of months is having nothing of

5. Indeterminate sentence for public protection

any meaning or consequence to do; i.e., the usual feelings experienced in prison but taken to the extreme." (Cat C training prison, 6th June)

As one respondent described it:

"Because of the lockdown, most of the prisoners I share my accommodation with spend their days playing video games and doing drugs ... It seems reasonable that to let people get high is a good compensation for the restrictions imposed upon them and helps to keep them quiet. However, what is the point of this all?" (Open prison, 15th June)

It is not only prisoners who ask whether prisons can fulfil their basic purpose if all that they provide is 23-hour confinement to cells. While effective in preventing the transmission of Covid-19, the previous quote shows that the social isolation and lack of activity have largely halted constructive, rehabilitative processes in prisons.

Trust

Some of the basic elements of trust in prisons are:

- ❑ Motives — confidence that the authorities set policy in the person's best interests; confidence that staff want to support and protect.
- ❑ Communication — clear and consistent messages; willingness to take prisoners' views on board.
- ❑ Consistency — reliable, fair, and logical.

The CAPPTIVE responses suggested that the change to the quarantine regime was quickly accepted by most prisoners. Aspects that helped gain their cooperation included: the gravity of the risk from the virus; good communication (particularly from governors); empathetic support from officers; phone credits to maintain family contact; and expanded opportunities for activities that could be undertaken in cell.

"At the end of February, start of March we was locked down due to the Covid pandemic. At first we was all frustrated because a lot of people did not understand why we was

locked down, but once people was informed ... they was more than happy to comply and stopped complaining about the regime." (Cat C training prison, 10th June)

Many prisoners appreciated the challenges of dealing with a radically different situation:

"As an inmate who interacts with many people in prison, I can confirm we understand limits must be in place to protect everyone. This experience is new for everyone. So, we are not expecting the prison system to get everything right from the start." (High security prison, 23rd June)

Respondents commended the governors and staff for the way they responded; they believed that the restrictions had saved lives. However, CAPPTIVE evidence suggests that in many prisons, over time, the basis of mutual trust slipped and confidence that the restrictive measures were in the prisoners' best interests eroded. This can be seen in contrasts between factors that had boosted trust and behaviour that undermined it.

The empathy shown by the vast majority of officers led most prisoners to feel that they were

being cared for, despite the 23-hour confinement:

"The officers are maintaining their professionalism but also showing compassion for our situation. We are, after all, in this together: welcome to a new world, a new prison system!" (Cat C training prison, 12th June)

Conversely, the legitimacy of the quarantine regime was undermined by prisons' neglect of public health advice for reducing the risk of transmission. CAPPTIVE correspondents raised concerns across a wide variety of prisons about a lack of precautions.

On the 5th June, a CAPPTIVE respondent wrote:

"If a staff member was asymptomatic, and was unaware that they had Covid, they would come into work and spread it, regardless if we are locked behind our doors or not, because they are always around, touching cell call buttons with no gloves, sitting on the wing,

unlocking and locking doors throughout the day..” (Cat C training prison)

Others reported:

“If a resident leaves the prison for any reason, they get put into two week quarantine upon return. But officers leave every day and return but don’t even have to wear face coverings as a minimal protection towards us. This makes me feel very uncomfortable and not worth protecting.” (Women’s prison, 10th June)

“We were given lots of notice is telling us the importance of hygiene, but since the lockdown began, we have not received a single item of hygiene equipment. We get toilet rolls and tissues. We get no cloths, masks, gloves, soaps, disinfectant, etc.” (Cat C training prison, 15th June)

“Social distancing between officers is non-existent. Infection control is just a gesture — with this in mind bin it and get back to normal.” (Cat C training prison, 9th July)

Many prisons provided clear and accurate information to prisoners and their families about Covid-19 and what the prison was doing to manage the risks it posed. The range of media they used included: TV, radio, newsletters, and cascading information through prisoner reps. Information about Covid-19 was provided in many prisons in different languages. Keeping prisoners informed helped to foster a sense of unity among staff, managers and prisoners.

Some prisons pro-actively sought the views of prisoners, for example, by circulating surveys to gather feedback about emerging needs, and using their input to shape recovery plans. In other prisons, governors held regular forums with prisoners to encourage direct dialogue. However, over time, in some prisons, the perception grew that prison managers were not open to the views of prisoners:

“I believe restrictions were put in place as a reaction to the potential for infection, which

was understandable, but that little further creative thought has taken place since, and there has been very little opportunity for prisoner consultation or input.” (Cat C training prison, 6th June)

Prisoners were well aware that the general public was subject to a lockdown in April. Many prisoners hoped that the regime would be relaxed in line with the easing of restrictions on the public; and the lack of change in prisons led to frustration. A second cause of discontent was maintaining restrictions in prisons that had no known cases of the virus:

“Biggest concern at the moment is the obsession of having ourselves locked up — this is despite the prison now having 57 days Covid-19 free!” (Cat C training prison, 6th June)

“The feeling among many now is that even though things are beginning to open up outside, inside, no change is in sight.” (Cat C training prison, 8th June)

Trust is not an on-off switch. Some elements have remained among many prisoners, as demonstrated by the continued compliance with the restrictions placed upon them. However, CAPPTIVE evidence suggests that this trust is fragile, as prisoners question whether the

deprivations they continue to endure are reasonable and proportionate:

“Why no association? Those not going to work (not through choice) should be allowed to socialise with others for the benefit of social welfare.” (Cat C training prison, 9th June)

“I feel that there was a national prison service knee-jerk reaction and no thought was given to alternatives. Some activities could have continued with smaller groups to maintain social distancing. As it is, we have empty classrooms, workshops and association rooms.” (Cat C training prison, 10th June)

If a resident leaves the prison for any reason, they get put into two week quarantine upon return. But officers leave every day and return but don’t even have to wear face coverings as a minimal protection towards us.

"We were all put on 23 hour lockdown, for staff convenience, some feel, not for pandemic 'social distancing' reasons." (Cat B training prison, 14th July)

The lack of trust was also manifested in feedback expressing frustration with delays in progression:

"There are some problems with progression in rehabilitation. Some prisoners in here including myself are serving EDS [Extended Determinate Sentences] sentences and have had our paroles refused due to non-completion of programmes . . . but it is not possible to complete them due to the lockdown, social distancing and no programmes being available." (Cat B training prison, 9th June)

"My parole is Oct 2020 and this will probably stop my release through no fault of mine . . . I do feel I have been robbed and that Cat D is now pointless." (Open Prison, 10th June)

"I have come here to do a course, but nothing is happening. I feel like there's a lot of double standards, picking and choosing what should and when things are to be implemented." (High secure prison, 29th June)

The uncertainty about the stages by which the regime would offer more time out of cell led many to worry about the future:

"The biggest concern at the moment is not knowing when lockdown is going to end. Rumour's going round it could be April next year!" (Cat C training prison, 9th June)

"The concern is that it has become the norm to keep inmates locked up for 23 hours a day." (Cat C training prison, 14th June)

Remedies

Working to meet prisoners' basic needs, including family contact, and maintaining communication as the situation develops, are important means of reducing the harm to wellbeing. Full explanations of the situation, restrictions being imposed and their likely duration, are crucial to reduce fears and the sense of powerlessness.

The World Health Organization recommended providing advice, regularly updated, on:

- ❑ The symptoms of Covid-19
- ❑ Preventive measures
- ❑ Warning signs of severity that requires medical attention
- ❑ Updated assessments of local risk levels (i.e., in each prison).⁶

The CAPPTIVE responses called for more imaginative efforts to increase opportunities for activities and social interaction. Every prison should encourage prisoners to play an active role in responding to the Covid-19 crisis, as a sense of agency is a powerful means of demonstrating respect and fostering altruistic responses.

Perhaps as a response to the emptiness of the quarantine regime, many prisoners expressed to CAPPTIVE a strong motivation to help others:

"The only positive thing is that we have a prisoner on the wing who compiles quizzes and provides prizes, which keeps us busy and our minds active." (Local prison, 6th June)

A correspondent questioned why textile workshops in prisons were closed. He proposed that the skilled machinists in these prisons could be producing high quality personal protective equipment (PPE) for NHS staff. In fact, this was happening at several prisons, including Lowdham Grange, Highpoint, New Hall and Channings Wood.

PRT's report *Time Well Spent*⁷ described a wide range of activities prisoners could do to make a constructive contribution to their prison community. Among the roles advocated are a few that can be performed in-cell. An example is Fine Cell Work, a

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6. World Health Organization. *Ibid.*, page 15.

7. Edgar, K, Jacobson, J and Biggar, K. (2011). *Time Well Spent: A practical guide to active citizenship and volunteering in prison*. London: Prison Reform Trust.

charity that teaches people in prison needlework to produce cushions and quilts. Similarly, CAPPTIVE respondents described mutual help and support:

"Many of the prisoners have been asking each other what is best to do to help each other through this situation. They have all come up with, exercising, yoga, mindfulness, meaningless conversation out of the windows to each other. All including myself are all pulling together to push through." (Cat C training prison, 10th June)

"I also volunteer within our chaplaincy team so, as I am mental health first aid trained, I go around the prison making sure other inmates are ok and have someone to talk to." (Cat C training prison, 19th June)

Many governors responded positively to initiatives taken by prisoners to improve their situation:

"I wrote a report to the governor on mental health and within days we had an hour 25 minutes out in sessions a.m. and p.m. and all doors unlocked all day. The feeling is inevitably different and less oppressive. The 'for your own good' no longer feels like a punishment in solitary as it did!" (Cat C training prison, 23rd June)

The last word goes to a CAPPTIVE respondent who provided a list of proposals. Some have been applied in

some prisons. And prisons retain the responsibility to see how these suggestions might work in their environment. Rather than analyse the recommendations from the perspective of a research team in a London office, it is probably best simply to quote from the prisoner:

What could be done to help us / support us mentally whilst going through this severe lockdown?

- Mandatory for all jails to have prison phones in their cell.
- Help us have more contact with our families.
- Create a better regime for us while we are in lockdown.
- Give people more options to help distract them whilst they are mentally and physically isolated.
- Keep us more informed about what is being done with our time.
- Plan ahead for a situation like this.
- Create a scheme or workshop or wing-based activity on a regular basis separate from association to help occupy us and give us a reason to wake up every morning.
- Regular visits from support workers mental health team, rather than once a month
- A team of prisoners separate from Listeners, mentors and Samaritans to come and talk to us. Those prisoners should be prisoners who have experienced and had an understanding of all backgrounds of hardship, even if it's just one experience.

(Young Offender Institution, 10th June)