



PRISON SERVICE
JOURNAL

January 2022 No 258

**Special edition:
Care Leavers and the Criminal Justice System**

After Care, After Thought?: The Invisibility of Care Experienced Men and Women in Prison

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Introduction

'I see them [the boys and girls from the residential care home], I have seen like a few of them in jail. You just say oh it happened to you as well. You just look at each other, you know! Like you don't blame each other, because you know what ... I don't know how to describe it, but you just know it is not their fault.' (Harriet, 27 years old)

'Everyone that I've known that's grew up in the care system have ended up in prison. There's got to be something wrong because like, you know, all the lads I know — even the lads that I lived with in a care home — they're in prison, Cory's in prison. Mark's in prison. Carl's in prison. Pete's in prison. They're all in prison.' (Max, 20 years old)

Current and former looked after children continue to be over-represented in youth custody and adult

prisons. In 2002, the Social Exclusion Report suggested that 27 per cent of the prison population had been in local authority care as a child, compared with 2 per cent of the general population.¹ Thus, adult prisoners were thirteen times more likely to have experienced local authority care.² Reflecting the difficulties in obtaining accurate figures, subsequent studies and reviews have estimated that as many as 24 per cent — 50 per cent of those in youth custody or prison have been in care.³ Not all children who have been in local authority care will offend, or be remanded or sentenced to youth custody or imprisonment, but it is the disproportional number who are that not only merits attention, but sustained and focused systemic change. The relationship between, and transitions to, the care system and the criminal justice system is certainly not a 'new phenomenon',⁴ nor is it a problem that is isolated to the U.K.,⁵ yet we still know relatively little about the true number of care experienced people in prison and why such a disproportionate number continues to be imprisoned (sometimes repeatedly). To date, much of the focus has (rightly) been on the criminalisation of children in local authority care and the transition from

1. Social Exclusion Unit (2002) *Reducing Re-Offending by Ex-Prisoners*. London: Social Exclusion Unit, 18. Available Online: <https://www.bristol.ac.uk/poverty/downloads/keyofficialdocuments/Reducing%20Reoffending.pdf>.
2. Ibid, 6.
3. Williams, K., Papadopoulou, V and Booth, N. (2012) *Prisoners' Childhoods and Family Backgrounds*. London: Ministry of Justice. Available Online: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/278837/prisoners-childhood-family-backgrounds.pdf; Lord Laming (2016) *In Care, Out of Trouble*. London: Prison Reform Trust. Available Online: <http://www.prisonreformtrust.org.uk/Portals/0/Documents/In%20care%20out%20of%20trouble%20summary.pdf>; Lord Farmer (2017) *The Importance of Strengthening Prisoners' Family Ties to Prevent Reoffending and Reduce Intergenerational Crime*. London: Ministry of Justice; Taylor, C. (2003) 'Justice for Looked After Children,' *Probation Journal* 50(3): 239-251.
4. Taylor, C. (2003) 'Justice for Looked After Children,' *Probation Journal* 50(3): 239-251, p.239.
5. See, for example, Gerard, A., McGrath, A, Colvin, E. and McFarlene, K. (2019) 'I'm not getting out of bed!: The criminalisation of young people in residential care,' *Australia and New Zealand Journal of Criminology* 52(1): 76-93; McFarlene, K. (2019) 'Care-criminalisation: The involvement of children in out-of-home care in the New South Wales criminal justice system,' *Australia and New Zealand Journal of Criminology* 51(3): 412-433; Ryan, J.P. and Yang, H. (2005) 'Family Contact and Recidivism: A Longitudinal Study of Adjudicated Delinquents in Residential Care,' *Social Work Research* 29(1): 31-39; Vaughn, M.G., Shook, J.J. & McMillen, J.C. (2008) 'Aging out of foster care and legal involvement: Toward a typology of risk,' *Social Service Review* 82(3): 419-446;

care to youth justice settings during childhood.⁶ However, and with few exceptions,⁷ we know relatively little about how care experience might shape transitions to, responses to, and behaviour within, prison long into adulthood. This dearth of research led Lord Farmer to conclude: 'There is a lack of evidence directly from men with weak or complex family ties, including care leavers.'⁸ Moreover, we know relatively little about differences across life course and according to gender⁹ and ethnicity.

This article — and the underpinning research study — seeks to develop the evidence base regarding the experience of adult, care experienced prisoners. It highlights findings from an empirical study regarding the experiences of 'care leavers' in prison. Drawing on qualitative interviews with 94 care experienced men and women in prison, we reveal the invisibility of care experienced individuals in prison. Whilst there is greater acknowledgement of the specific needs of care experienced prisoners in official strategy, policy documents and reviews,¹⁰ this has not yet filtered down to consistent good practice within prisons. We argue that there are structural obstacles that prevent identification of care experienced prisoners. These barriers fall into two distinct but overlapping categories: barriers to recording (not asking the right questions at the right time) and barriers to reporting (including shame/stigma and lack of trust in professionals/the system). Overcoming these barriers to develop our knowledge and understanding is crucial. We found that some individuals are unable to access local authority support to which they are legally entitled. In addition, often their experiences prior to, and during, local authority care continues to structure their relationships, interactions with professionals, perceptions of authority, identity, and perceptions of safety into

adulthood. Within prison, the acute needs of care experienced prisoners are easily overlooked, particularly in respect of resettlement provision, financial, social, and professional support and supervision. We argue that it is essential that care experienced prisoners are properly identified upon arrival, for individuals to be better supported within custody and on release. Essentially, we need to care about care experience and ensure that care experience is no longer an 'after thought'.

Methodology

The impetus for this research study first arose from a previous ethnographic project conducted in a young offender institution (YOI).¹¹ Stood in the Healthcare Centre, the lead author was chatting with three young men (all under 21 years old) whilst they cleaned the unit. It quickly transpired that those three young men had met each other in a residential care home only to reunite on their imprisonment within the same YOI. In addition, during the same study, it became increasingly clear that care leavers were at greater risk of victimisation and exploitation but were equally as likely to perpetrate harm against either themselves or others, sometimes quite serious harm. Quite why was beyond the scope of the study, but there was so little research available to us, or indeed to prison staff, that we were left with lingering questions about: 1) how care experience may or may not shape how (and why) young men and women transition to custody; 2) how they experience prison life and relate to prison staff and their peers; and 3) what additional support needs care leavers may have, either during imprisonment or on release. These 'lingering' questions informed the current study, as did our desire to not only understand

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6. Blades, R., Hart, D., Lea, J. and Willmott, N. (2011) Care—a stepping stone to custody. *The views of children in care on the links between care, offending and custody*. London: Prison Reform Trust; Lord Laming (2016) *In Care: Out of Trouble*. London: Prison Reform Trust; Hayden, C. (2010) 'Offending behaviour in care: is children's residential care a 'criminogenic environment?' *Child and Family Social Work* 15: 461-472; Fitzpatrick, C. (2014) 'Achieving Justice for Children in Care and Care-Leavers,' Howard League *What is Justice?* Working Paper 14/2014. Available Online: https://howardleague.org/wp-content/uploads/2016/04/HLWP_14_2014.pdf; Schofield, G., Ward, E., Biggart, L., Scaife, V., Dodsworth, J., Larsson, B., Haynes, A. and Stone, N. (2012) *Looked After Children and Offending: Reducing Risk and Promoting Resilience*. University of East Anglia. Available Online: https://www.tactcare.org.uk/data/files/resources/looked_after_children_and_offending_reducing_risk_and_promoting_resilience_full_report_final_pdf.pdf; Day, A., Bateman, T. and Pitts, J. (2020) *Surviving Incarceration: The Pathways of Looked After and Non-Looked After Children Into, Through and Out of Custody*. University of Bedfordshire. Available Online: <https://www.beds.ac.uk/media/271272/surviving-incarceration-final-report.pdf>.
 7. Innovation Unit (2019) *Falling through the Gaps*. Oak Foundation. Available Online: <https://drive.google.com/file/d/1MtFTWQGfOyiidndO9d33tmsVpVMoFW1/view?ts=5ca5c6c5>;
 8. Lord Farmer (2017) *The Importance of Strengthening Prisoners' Family Ties to Prevent Reoffending and Reduce Intergenerational Crime*. London: Ministry of Justice, p.23.
 9. For a summary of the existing literature regarding the transition of girls and women from care to the criminal justice system, note: Fitzgerald, C., Hunter, K., Staines, J. and Shaw, J. (2019) *Exploring the Pathways Between Care and Custody for Girls and Women: A Literature Review*. Available Online: <http://wp.lancs.ac.uk/care-custody/files/2019/10/CareCustodyLiteratureReview.pdf>
 10. HM Government (2013) *Care Leavers Strategy: A Cross-Departmental Strategy for Young People leaving Care*. London: HM Government. Lord Farmer (2017) *The Importance of Strengthening Prisoners' Family Ties to Prevent Reoffending and Reduce Intergenerational Crime*. London: Ministry of Justice.
 11. See Gooch, K. and Treadwell, J. (forthcoming) *Transforming the Violent Prison*. Palgrave; Gooch, K. and Treadwell, J. (2015) *Prison Bullying and Victimisation*. Birmingham: University of Birmingham. Available Online: <https://www.birmingham.ac.uk/documents/college-artslaw/law/prison-bullying-and-victimisation.pdf>

similarities and differences between men and women, but also across the life course for those who both did, and did not, qualify for local authority support.

The legal framework defining who is entitled to local authority support as a ‘care leaver’ is relatively obscure. Much depends on the age of the child when they were in local authority care, for how long, and when or how that experience ended.¹² For individuals in contact with the criminal justice system, these statutory distinctions may mean that local authorities are under an obligation to provide support, advice and assistance until the age of 21, or even 25. However, focusing only on this group is artificial. Even when children return to the parental home (as was the case for 29 per cent of children leaving care last year) or are placed in a family home by virtue of an adoption order or special guardianship order (24 per cent of children leaving care), children have typically spent more than 2 years in local authority care before doing so.¹³ Thus, even when

children return to their families, or legally become part of a new family, the experience of local authority care may still have an enduring impact — both positive and negative. Consequently, for the purposes of this study, we adopt the much simpler, and more inclusive, definition of ‘care leaver’ recommended by the Care Leavers Association: ‘any adult who has spent time in care.’

After ethical approval for the project was given by both the National Research Committee of HMPPS and the Ethics Committee at the University of Sheffield, semi-structured interviews were completed within three different institutions in England and Wales: two dual-designated male sites (Category C and YOI) and a women’s prison.¹⁴ Across these sites, we interviewed 94 individuals, of whom 62 individuals were male, 31 were women and one identified as male but was held in the women’s prison. The age of our interviewees varied as follows:

	18-21 years old	21-30 years old	30 years or older
Women’s Prison	11	10	11
Cat C/YOI 1	30	3	1
Cat C/YOI 2 ¹⁵	22	6	0

All interviews were transcribed verbatim, and then quality control checked prior to analysis using NVIVO.

Why Care About Care Experience?

It has long been recognised that separation from parents and caregivers, either through bereavement or loss, can have profound and enduring effects on a child. ‘Attachment theory’¹⁶ suggests that infants and children need a warm and loving relationship with parents underpinned by a ‘secure base ... before launching into unfamiliar situations’¹⁷. Those individuals with a secure attachment learn that their needs will be met, perceive the caregiver as ‘available’ and view themselves positively.¹⁸ Conversely, if that dependence is insecure, severed or disrupted, children can feel rejected, lack confidence, become self-reliant, or feel angry, helpless, anxious or frightened.¹⁹ In addition, children may

experience ‘difficulties regulating emotions,’ mental health problems, developmental delay, difficulties forming attachment relationships, and difficulties forming positive relationships with peers.²⁰ This can in turn also influence educational experiences and outcomes. For children in local authority care, and subsequently leaving care, insecure and disorganised attachments may not only form the background as to why a child comes into care, but also characterise their experience in care as they move between placements and then eventually leave care.²¹

In 2020, 80,080 children were ‘looked after’ by the local authority — a number that has been steadily increasing for the last three decades.²² Legally, a ‘looked after child’ is one whom the local authority has provided

12. The Children (Leaving Care) Act 2000 makes distinctions between an ‘eligible child’, a ‘relevant child’, a ‘former relevant child’ and a ‘qualifying child’.

13. Department for Education (2021) *Children looked after in England including adoptions*. London: Department for Education.

14. Our sincere thanks to Dr Kim Turner, Georgina Barkham and Dr Caroline Cresswell who assisted with data collection.

15. NB: This dual designated site accommodated young men aged 18-30 years old, hence the absence of people aged over 30 years old.

16. Bowlby, J. (1969) *Attachment and Loss*. New York; Basic Books; Ainsworth, M.D.S. and Eichberg, C. (1991) ‘Effects of Infant-Mother Attachment of Mother’s Unresolved Loss of an Attachment Figure, or other traumatic experience’ In: Parkes, C.M., Stevenson-Hinde and Marris, P. (eds) *Attachment Across Life Course*. London: Routledge.

17. Bretherton, I. (1992) ‘The Origins of Attachment Theory: John Bowlby and Mary Ainsworth,’ *Development Psychology* 28(5): 759-775, p.760.

18. Stein, M. (2006) ‘Young People Aging Out of Care,’ *Children and Youth Services Review* 28(4): 422-434.

19. Ibid.

20. Golding, K. (2003) ‘Helping Foster Carers, Helping Children,’ *Adoption and Fostering* 27(2): 64-73, p.64

21. Ibid

22. n13

accommodation for over a period in excess of 24 hours, or who is the subject of a care order or placement order. This may include residential care in a children's home, placement in a secure children's home, and/or foster care placement. Whilst some children are forcibly removed from parental care, a parent can voluntarily agree to the placement of their child in local authority.²³ In addition, there are circumstances in which a child may be placed with family or friends but still be regarded as a 'looked after child'.²⁴ The vast majority of children, however, are accommodated by the local authority because of a judicially granted care order (77 per cent) and will be placed in foster care (72 per cent).²⁵ Abuse and neglect continues to be the most cited reason for a child becoming looked after (65 per cent of cases), with 'family dysfunction' accounting for a further 14 per cent of cases.²⁶ In addition, just under 300 children each year will become 'looked after children' as a consequence of their contact with the criminal justice system.²⁷ This includes children who are remanded to local authority accommodation or youth custody,²⁸ children who are placed with the local authority under the Police and Criminal Evidence Act 1984,²⁹ or those children who have a residence or intensive fostering requirement attached to a community-based youth rehabilitation order.³⁰

Reflecting the wider care leaver population, those interviewed came into prison with a wide range of experiences, including: next of kin care (e.g. aunts and grandparents); foster care; residential care; adoption; and, adoption breakdown. As such, and although there were similarities, there was no 'typical' experience pre-custody. For a minority of individuals, entering care was believed to be positive and allowed them to achieve some sense of stability:

[Care] helped me a lot because I think if I'd have stayed with my mum or, well, I say my mum but if I'd have stayed trying to live there, it just I would have ended up a lot worse off than ending up where I am now and even

though that's in prison, it's a lot, it's probably a lot less worse than what it could have been. I think it saved me from being worse than what I could have possibly been.' (Freddie, 19 years old)

'The only time that I feel, felt settled was with [names foster carers]. I knew no harm would come to me.' (Catherine, 28 years old)

However, such positive experiences did not obfuscate the need to identify all those with care experience or the requirement for additional and ongoing support. For individuals such as Catherine, it was often difficult for them to arrange social visits or continue contact with foster carers. In addition, despite Freddie and Catherine's positive views regarding care, they had still experienced, or been exposed to, circumstances which necessitated removal from their families. These pre-care experiences, lack of stability, and their experiences of the care system, still shaped them, and their lives in prison. For example, Rhys (29 years old) explained:

'It's impacted my life in jail. It has impacted my life quite heavily. It's turned me into the person I am today, it's made me who I am, the way I am and made me think the way I do. At the time, when I was going through all of that stuff, it did drag me to some very, very dark places — places where I have no wish to return, mentally, physically. It just, it just fucks with your head on so many different levels [...] It's always there in the back of your head — the memories, the hardships, the struggles. For me personally, it's made me a fighter, maybe not physically with my fists but with my brain and my head and the way I think, my attitude, my mentality. I'm a survivor, fighter.'

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23. Children Act 1989 section 20

24. Department for Education (2010) *Family and Friends Care: Statutory Guidance*. London: Department for Education.

25. n13. NB: These figures have remained relatively consistent for the last three years.

26. Ibid.

27. Ibid.

28. Legal Aid, Sentencing and Punishment of Offenders Act 2012 section 104

29. Police and Criminal Evidence Act 1984 section 38(6)

30. Criminal Justice and Immigration Act 2008 section 1 and schedule 1

Whilst Rhys' 'survivor' mentality might — at first glance — represent a relatively resilient response, memories that appeared lodged in the 'back of the head' could quickly resurface.

In fact, for the vast majority of care experienced prisoners interviewed, their experiences before, during and after care were described in largely negative terms. It is well established that many who enter prison do so with histories of trauma, abuse, substance misuse, poor mental and physical health, insecure housing and low levels of education.³¹ However, such problems were not only typically exacerbated for those with care experience, but were compounded by multiple layers of loss, disruption, dislocation, severed relationships, rejection, instability and bereavement. David, for example, initially described his childhood as 'messed up' and explained:

'They put me and my sister and my brother into like a respite place and then they thought — because my sister was trying to mother us — then they'd split us up. [...] I had over 60 placements. [...] I just remember being at one person's house one night, going there, kicking off, getting moved the next day, and then just getting moved every other week. I was getting moved here, there, everywhere. I went back with my mum. My brother, my brother died in 2011 in [name of prison], he killed himself from suicide, so I lost my brother in 2011, and then basically got put back into care. Went back into care, and then they put me into a placement and I started kicking off all the

These experiences created little consistency or predictability during children's formative years. It also engendered feelings of rejection, abandonment, and conflicted relationships with parents.

time in that placement. Then they said, 'Oh, we're taking you to a new placement.' And as I got to the new placement, it was a care home, so then they started me through the care homes.'

Experiences of placement instability, frequent changes of social worker, and separation from siblings were common in the interviews and mirrored findings elsewhere.³² These experiences created little consistency or predictability during children's formative years. It also engendered feelings of rejection, abandonment, and conflicted relationships with parents. Describing the breakdown of one placement, David said, 'they wanted to get rid of me' and added:

'I didn't want to be in care. I wanted to be with my mum. I felt like that, at first, when I first got into care, I did blame my mum a lot and I wouldn't go to contact. I wouldn't go and see my mum or contact her and that. But then like over the years, ..., I thought, 'This isn't my real family, I don't want to be with them. Why am I, why am I with these people? These are not my family. Like I should be at home with my real family.' That's like just when my behaviour — I thought, 'What's the point? I don't

want to be in the system so I may as well just fight the system.' Ever since a young age, I've just fought the system.'

Such experiences typically seep into many aspects of life even when individuals leave care, and particularly as they enter prison custody. For David, and others, it

31. Social Exclusion Unit (2002) *Reducing Re-Offending by Ex-Prisoners*. London: Social Exclusion Unit, 18. Available Online: <https://www.bristol.ac.uk/poverty/downloads/keyofficialdocuments/Reducing%20Reoffending.pdf>.; Corston, J. (2007) *The Corston Report: A Review of Women with Particular Vulnerabilities in the Criminal Justice System*. London; Williams, K., Papadopoulou, V and Booth, N. (2012) *Prisoners' Childhoods and Family Backgrounds*. London: Ministry of Justice. Available Online: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/278837/prisoners-childhood-family-backgrounds.pdf.
32. Day, A., Bateman, T. and Pitts, J. (2020) *Surviving Incarceration: The Pathways of Looked After and Non-Looked After Children Into, Through and Out of Custody*. University of Bedfordshire. Available Online: <https://www.beds.ac.uk/media/271272/surviving-incarceration-final-report.pdf>; Fitzpatrick, C. (2014) 'Achieving Justice for Children in Care and Care-Leavers,' Howard League *What is Justice?* Working Paper 14/2014. Available Online: https://howardleague.org/wp-content/uploads/2016/04/HLWP_14_2014.pdf; Schofoield, G., Ward, E., Biggart, L., Scaife, V., Dodsworth, J., Larsson, B., Haynes, A. and Stone, N. (2012) *Looked After Children and Offending: Reducing Risk and Promoting Resilience*. University of East Anglia. Available Online: https://www.tactcare.org.uk/data/files/resources/looked_after_children_and_offending_reducing_risk_and_promoting_resilience_full_report_final_pdf.pdf.

led to self-harm and suicide ideation. For others, they began to *'fight the system'* literally and figuratively. As Philip (21 years old) explained:

'Because you get some people here that will fight a lot, or be upset a lot, and, you know, be stressed and everything and the staff will just turn around and say, 'Hey, get on with it mate, it's jail.' But then they don't know what's happened in the child's life in their past for them to be like this, how they are today.'

This was not an isolated complaint. When asked whether staff knew who had previously been in care, many interviewees remarked that they were not concerned about what had happened, or what will happen, to them. It was not always clear whether the perceived indifference was real or a representation of wider feelings of being let down by the professionals, and the 'system' more generally. However, whether real or perceived, interviewees ultimately wanted to feel cared for and cared about. They wanted to be recognised as something more than a 'prisoner', and to be both 'seen' and 'understood'.

It seemed that many had not fully come to terms with their childhood experiences, or indeed the losses, violence, exploitation and 'struggles'. These experiences continued to haunt them well into adulthood. For women, in particular, there was often a desire to access their social services records to better understand why they had been taken into care and/or the decisions made about them:

'Like, I'm thinking, 'Why...' I don't know, it's just...yeah. like I just want to see the file and then I'll be alright, like so I know, do you know what I mean, certain stuff that I want to know.' (Catherine)

Since the content of such records was often redacted, such access was unlikely to answer the questions they fundamentally wanted resolved: Why? Why me? Why didn't you listen to me? Why couldn't I stay at home? There were few spaces or opportunities within prison to even begin to make sense of these questions. Not all individuals were estranged from family, but for those who tried to re-establish contact within prison only to find such efforts rebuffed, these

questions, and the associated feelings of rejection and abandonment, were deeply distressing.

Thus, the need for support was not only orientated towards making sense of the past, but also making sense of their future. Prison staff — and especially keyworkers — need to understand care experience, its impact and the support required from the perspective of the individual concerned rather than making assumption as to what 'care experience' means for that person now and then. To do so, care experienced individuals need to be properly identified, and need to feel that is 'safe' to disclose such information, and that support will follow. It is, however, very easy for care experienced prisoners to become invisible — either because information is not recorded or because individuals do not report.

Barriers to recording

Whilst we found examples of good recording practices, this good practice is not standard practice. Without such recording, staff working with an individual — particularly in relation to safety, security, and offender management matters — are not aware that there may be wider support needs and/or that certain individuals may be legally entitled to support and services. Some individuals did not disclose their 'care leaver' status because they simply were not asked. Polly

argued that few attempts were made to ascertain her experiences of care, and what support could be implemented in prison:

'Nothing. They don't ask you anything. You're just, you're a prisoner, you're here, give us your prison number, your name and this is where you're going to live. That is it.' (Polly 24 years old)

Staff must provide opportunities to not only disclose any key details, but also identify any support that would be beneficial and ensure that individuals can access their legal entitlements. Likewise, whilst there is the potential to add an alert to NOMIS, a national prison database that records key information about individuals and their management within prison, this is — in isolation — insufficient because, even if checked, it says little about what care experience might mean for the individual. Further questions should be asked during less structured conversations about

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circumstances pre-custody to ascertain whether someone is a care leaver, even if a significant period of time has elapsed since they have been in care.

The temptation is to prioritise such questions on entry to the prison. However, the prison reception is not always an ideal environment to be screening individuals because such areas lack privacy, and can be noisy and busy.³³ Although questions must be asked early on in order to identify unmet needs and assess any immediate risks,³⁴ individuals can be overwhelmed by the environment and circumstances surrounding their incarceration (including separation from loved ones, tired, hungry, thirsty etc). Follow-up questions with staff members who have time to engage individuals in dialogue, create a safe space, and pose questions sensitively is vital in order to get a better understanding of an individual's circumstances.

How the questions are framed is also important. Bluntly asking 'are you a care leaver?' may be perceived as insensitive and may not elicit an accurate response. A possible reframing of the question could be: 'Have you ever lived apart from your parents/siblings/family?' This is important as initial findings from our study found that often those approached to be interviewed who had been flagged by the prison system as potentially having care experience, did not consider themselves to be a care leaver, despite the fact that they had lived away from the family home for a period of time. As such, they would have ticked no for the original survey question, and importantly not expected or requested any additional support from those working in prison. Linked to this, it is vital that questions relating to care experience are not limited to recent experiences. When considering experiences, there is a tendency to focus on young people and young adults, however our findings suggest that care experience was important across the life-course and continued to impact individuals long after they were eligible for statutory provision. How care leavers are defined is salient. As such, it is important that those who 'left' care many years ago are also identified within screening tools and as such provided with appropriate support.

Who asks the questions is equally as important. Women in prison have often experienced

high levels of emotional, physical, and sexual abuse³⁵ and it would therefore be inappropriate to expect them to disclose previous experiences to male members of staff. Appropriate action therefore needs to be taken to ensure that those asking the initial or follow up questions are likely to result in answers that individuals are comfortable discussing. Likewise, there was recognition that some staff were care experienced themselves, or were foster carers, and therefore had a greater understanding about need. It might therefore be possible for staff with appropriate levels of understanding to have a more formal role within the prison to identify those with experience of care and implement support mechanisms. However, addressing when and how questions are asked is only part of the picture; there are also barriers to reporting.

Barriers to reporting: Shame, Stigma and Distrust

For some, disclosing experience with the care system is not something that was easily done, and even less so if asked during the initial screening in Reception. Such difficulties were partially related to feelings of shame and stigma. The fear of being judged was acutely felt by some interviewees:

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'I felt ashamed, to be honest. I didn't want to show my face or anything in case people like judged me for being in care. I think people did judge me. The family don't want them. Obviously, you know, it's either a bad kid or they've just been doing something stupid to end up in care, to be honest. I felt, well, obviously felt bad, to be honest, all, all I wanted to do was end it, to be honest. I've really had times where I was walking in front of buses on main roads.'
(Nick 20 years old)

'I think [being in care] has a lot of negative [connotations] I think, but I think it's sort of the unloved, forgotten people of the world, in a sense. I feel like a lot of the stigma that is attached to it is they must have done something wrong, or it is because of their

33. See Masson, I. (2019). *Incarcerating Motherhood: The Enduring Harms of First Short Periods of Imprisonment on Mothers*. Oxford: Routledge.

34. Such as suicide risk or any concerns regarding cell sharing.

35. Corston, J. (2007) *The Corston Report: A Review of Women with Particular Vulnerabilities in the Criminal Justice System*. London.

behaviour or something like that. And because of a lot of trauma people have generally suffered, while, either while they have been in care or while they have been in the household before they were removed, their behaviour reflects ... such.' (Maddie 21 years old)

For others who did not specifically mention stigma there still existed a general level of reluctance to disclose their past. Many described how they were previously made to feel that they erred to bring about their removal from the family home (extenuated by the fact that very few had seen their social services paperwork), and the less people that knew about their case status the better. This is despite the fact that, as noted above, the vast majority of children in England and Wales enter the care system due to abuse or neglect. This lack of/misinformation resulted in many interviewees failing to disclose care experience to peers or staff in fear of judgement and negative reprisals. For example, some women interviewed in this research feared their own children would also be taken into care if people found out about their previous experiences. To enable supportive conversations about care experience, it is necessary to address the prevailing myths about how and why people enter the care system and ensure that

The fear of negative responses also very much related to lack of trust in professionals and or 'the system'. For example, although a minority of respondents had positive experiences, the vast majority felt they had been let down by professionals, experienced multiple changes of social worker or placement, and that they had not been properly informed as to why certain decisions were made about them:

'[Being a child in care] is embarrassing, embarrassing. I hate it. Social services have ruined my life. That's how I feel, they've ruined my life. First of all, taking me from my parent at a young age. Like social services, I don't think — they don't care. They don't care. They say they care but they don't. I've

worked with so many people over the years, like just to realise that no one cares. They don't care about you and that. I wouldn't trust social services at all. All they've done all my life is feed me lie after lie after lie after lie, and it's always been the same.' (David)

For Jill, these failures by others were no different to how she was treated by the prison system:

Like the care homes first, jails, all of them people, they've all basically done, done me over in different ways. (Jill 21 years old)

Many described how they were previously made to feel that they erred to bring about their removal from the family home (extenuated by the fact that very few had seen their social services paperwork), and the less people that knew about their care status the better.

The effect of this within prison was that individuals were often distrustful of authority and/or expected professionals — including prison staff — to let them down. In essence, trust was in short supply:

'I don't trust no-one' (Steph 26 years old)

'I can't trust anybody else. I can't trust the screws, I can't trust any of the other prisoners. [...] Whilst I'm in jail, I ain't going to trust anyone. I ain't going to trust you, I ain't going to trust him, I ain't going to trust her. Simple as that. That's the way it has got to be. If you start trusting people, people take liberties.' (Rhys)

The onus is on prison staff to establish relationships of trust and respect. It was clear from our interviewees that building trust would take time and patience on behalf of staff. To be deemed 'trustworthy,' prison staff needed to consistently 'do what they say they will do,' involve individuals in the decisions that are made about them, thoughtfully communicate any decisions, see the individual as something more than 'a prisoner,' and instil hope, believing in that person and seeing their worth.

Conclusion

Many entering prison do so with pre-existing needs and vulnerabilities, but this is acutely the case for

many care leavers. Too many care experienced prisoners remain invisible, and this has the potential to reproduce and reinforce the invisibility experienced earlier in childhood and adolescence, as described by Lemn Sissay:

'Memories in care are slippery because there's no one to recall them as the years pass. In a few months I would be in a different home with a different set of people who had no idea of this moment. How could it matter if no one recalls it? Given that staff don't take photographs it was impossible to take something away as a memory. This is how you become invisible. It is the underlying unkindness that you don't matter enough. This is how you quietly deplete the sense of self-worth deep inside a child's psyche. This is how a child becomes hidden in plain sight.'³⁶

To better understand the experiences of care leavers within prison, it is imperative that accurate figures are collated. Without this, appropriate funds and multi-agency support cannot be ring-fenced for this group. The importance of better data goes beyond a purely financial need. Those working in prison cannot be expected to provide appropriate support if unaware of those who have care experience and why it matters. As an initial starting point, we therefore make three

overarching recommendations. First, consideration must be given to how, when and who asks questions about care experience, and to ensure that such information is appropriately recorded. This is only the starting point; key workers, prison officers, (prison and community) offender managers and other professionals must seek to understand what it means for the individual both now and in the future. Second, there should be effective systems to ensure that individuals can access the support they are legally entitled to. This not only requires local authorities to diligently meet their obligations to care leavers, but that HMPPS is highlighting and facilitating such support to those who can benefit. In addition, there is a much wider need for statutory and third sector organisations to assume a collective responsibility for supporting individuals, including in respect of accommodation, health, drug treatment, mental health, and physical health needs. For some, they will need specialist support to reconcile their experiences, and better understand what happened to them and why. Third, and echoing the recommendations of Lord Farmer,³⁷ there must be greater financial investment in peer-mentoring and staff training to help break down myths and better support care leavers within prison.

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