

Offenders with intellectual disabilities leaving prison: support & outcome

Glynis Murphy

Tizard centre,
Univ of Kent

g.h.murphy@kent.ac.uk



RESEARCH TEAM:

EMILY BLAKE

MAGALI BARNOUX

JENNY COOKE

PAK CHIU

PARASKEVI

TRIANTAFYLLOPOULOU

JENI BEECHAM

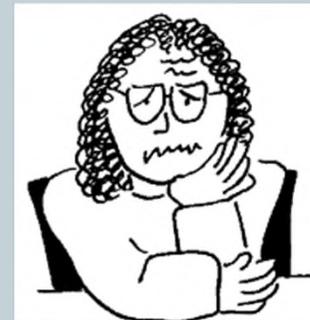
RACHEL FORRESTER-
JONES

NICK GORE

When people with ID enter prisons...



- Between 1% & 7% in UK prison population have ID (exact figure much disputed – see Murphy & Mason, 2013).
- Difficulties in prisons (not disputed):
 - understanding information, like prison rules, how to make phone calls
 - filling in forms for meals or to obtain visitors or see the doctor
 - socially vulnerable to bullying, anxiety and depression, and yet are often seen as troublesome (Talbot, 2008).



Anecdotally, when people with ID leave prisons.....

- Too able for support from CLDT?
- Insufficient mental health needs for support from mental health teams?
- Not insufficiently dangerous for forensic services?
- Told they are not eligible for social care?



UK Government actions

Bradley report, 2009:

Review of CJS to examine diversion for people with LD / mental health needs.

Amongst the recommendations:

- Screening for ID in prisons
- Better diversion from custody
- National strategy for rehabilitation of offenders with ID (inconsistency of support when people leave prison).



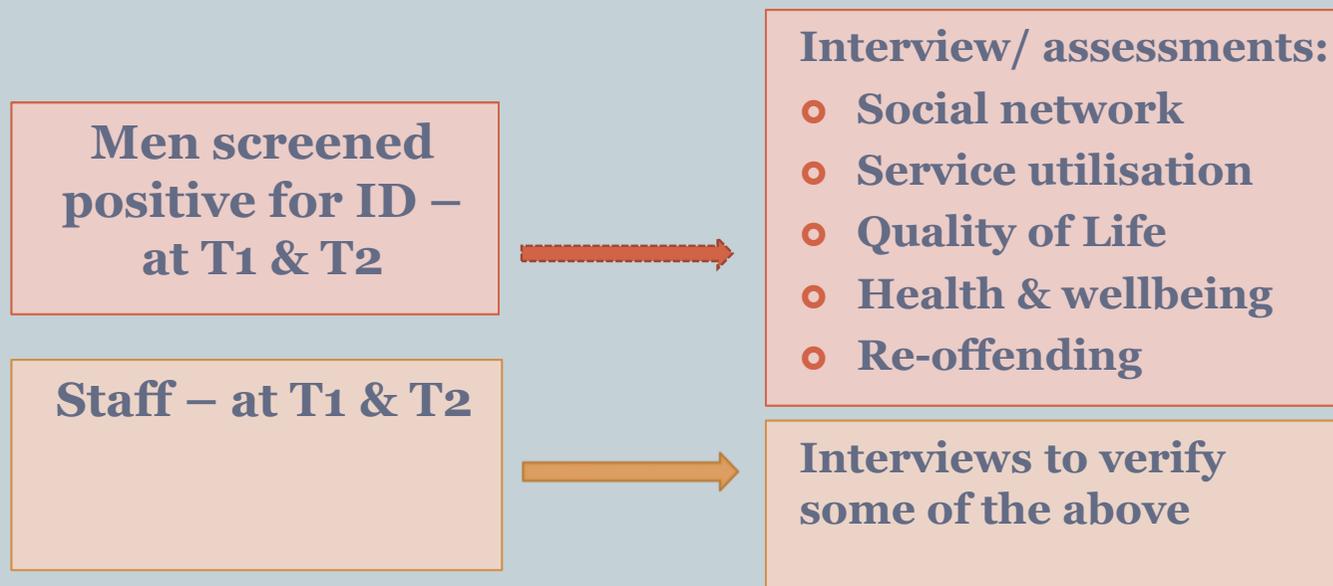
OFFSCA-ID: AIMS



- What happens to men with ID after leaving prison?
- What support do they get?
- Does social care or health care or probation input, after leaving prison:
 - affect the mood, behaviour & quality of life of ex-offenders with ID?
 - does it affect re-offending?
- What are the costs and cost-effectiveness of social care & other support for these ex-offenders with LD?

Design & Participants

- Worked with 17 NHS Trusts & 24 prison establishments
- **Men** screened positive for ID recruited when due to leave prison (we planned for n=130 but recruitment very difficult)
- Their care manager/offender manager also invited to take part
- Interviews held at two time points (T1 - within **one** month of leaving prison, T2 - in **nine** months' time).



Findings

- Nearly 90 men referred but some not suitable (no ID or not leaving prison in time)
- 69 suitable (screened +ve for ID & leaving prison soon); all recruited
- 10 withdrew
- 19 lost to contact before T1
- 40 men took part
 - of these n=38 at T1
 - n= 32 at T2
- Mean age at T1 33 yrs
- Crimes: assault 35%, theft/drugs 23%, sexual 23%; breach of order 18%
- T1 was 10 wks after leaving prison
- T2 was one year later
- **29% re-arrested by T1; 33% by T2**
- **11% returned to prison by T1; 17% by T2**

Living situation, depression & anxiety



At T1

- 39% living in family /alone/supported living
- 29% in hostels/group homes;
- 33% in hospital secure units or prisons
- Depression:
 - 60% above the cut-off
- Anxiety
 - 70% above the cut-off

At T2

- 52% living in family /alone/supported living
- 10% in hostels/group homes;
- 38% in hospital secure units or prisons
- Depression:
 - 57% above the cut-off
- Anxiety
 - 71% above the cut-off

Social networks and day activities



Social networks T1

- Total network size:
 - mean 29.1
 - range 4-145
- 6 men had 7 or fewer people in their network
- Networks significantly larger in secure units and prisons
- Similar figures at T2

Day activities T1

- Mean over weekdays: 4.3 (range 0-12)
- Mean across a whole week: 6.2 (range 0-16)
- Only 4 men working any hours at all (2 in prison)
- 6 men with any volunteering
- 4 men with 0 or 1 activity per week

What support was on offer?



At T1

- Probation officer 61%
- Social worker 37%
- Health profession 58%
- Significantly less likely to have been re-arrested if had health professional services

At T2

- Probation officer 55%
- Social worker 39%
- Health profession 56%
- Significantly less likely to have been re-arrested if had health professional services

Case studies



- **Mr ‘Family support’**

- Known to prison staff as a ‘repeat offender’
- Support at Time 1 interview: Probation and Drugs & Alcohol service
- Dad ‘took him in’, offered him a job at his workplace (full-time work)
- Moved away from his social network in order to ‘keep out of trouble’
- Has not re-offended since released.
- Identified his father as his key support.

- **Mr ‘Homelessness’**

- Been in prison a number of times
- Requested help with accommodation and mental health issues before his release
- Remained homeless and reported to have been struggling with money
- Arrested 7 times within one month of release. Recalled to prison.

Case studies



- **Mr Not Worth Supporting**
 - Living in a probation hostel at T1; in prison T2
 - Hostel manager trying to engage social services at T1 & prior to T2
 - Social Services said he wasn't eligible for services (despite autism, learning disabilities, alcohol problem)
 - Probation hostel manager said: I have to release him, Im only supposed to keep him 3 months & its 5 mths already, he'll go straight back to prison without support
 - Social Services said: Well at least it wont come out of my budget
(as reported to me by Probation hostel manager)

Qualitative study



- First 15 men to reach time 2 were asked to take part in qualitative interview
- All consented but later 1 withdrew & some hard to contact
- 10 men took part
- Age 22-48yrs
- 4 in own home /family home; 3 back in prison; two in secure services; one in homeless hostel

Overarching themes



- *“Want to help? You ain’t helping”*: The nature of post-prison support.
- *“Staying out of trouble from my friends, is the hardest bit”*: Trouble is both normal & easy.
- *“Yeah. And be one big happy family”*: The significance of family relationships.
- *“I stood up straight... he was bricking it”*: The need to be ‘hard’ in the context of vulnerability

“Want to help? You ain’t helping”: The nature of post-prison support.



- *You know they tell me ohh we’re going to get you some help out there (when released from prison) and when I go out there there is nothing. No. When I left prison they told me... that I got some help with the mental health team and all that out there. It’s only a month that you go then. You heard. Nothing.*
- *Now I got this (staff’s name) and she don’t do nothing!*
 - *OK. Have you ever asked her to help you with anything?*
 - *Oh yeah, loads of times I just give up I just go there.*
(she says) ‘Alright’, (I say) ‘yeah’, (she says) ‘staying out of trouble?’, (I say) ‘Yeah’. (she says) Alright, bye!

‘Staying out of trouble from my friends, is the hardest bit’: Trouble is both normal & easy.



- *I love my girlfriend but, it’s just, staying out of trouble from my friends, is the hardest bit...*
- *And erm, it sounds like there are some friends you say, you’re staying away, because they might lead you into trouble?*
 - *Yeah, I keep them at arm’s length*
- *“I don’t think hard enough. I... shouldn’t be with them people”*

“Yeah. And be one big happy family”: The significance of family relationships.

- (Talking about his Dad):

He’s supportive and everything, standing by me.... He he knows what I’ve done is wrong but... as long as I don’t do it again I’ve got all my family still there and that’s why I’m trying... that’s what my plan is... not to commit any more offences

“I stood up straight... he was bricking it”: The need to be ‘hard’ in the context of vulnerability



- *Int: OK. Did anyone deliberately upset you?*
- *Erm, someone was trying to take my hat off my head.*
- *Int: Ohh*
- *And went straight up to me. Trying giving it large
Then I stood up straight... He was bricking it.*
- *Int: OK.*
- *He backed off...I had my hand in the fist way ready*

Challenges of the research



- **Identifying participants**

- Many prisons do not routinely screen for LD.
- If an offender does not self report a diagnosis, or has never been given a diagnosis, then they may not be identified as having LD.
- Prison staff resources are very stretched, and understandably they do not necessarily have the time to accommodate research

- **Keeping track of participants**

- Many participants are not released to a stable address. No phones allowed in prison so, when we gain consent in prison, participants find it hard to recall phone numbers and addresses of family where they could be contacted.

- **Requests for support**

Participants and their family members frequently complained about the lack of support, and express understandable frustration about their situations.

What needs to happen



- These men are very vulnerable & need much better support
- They have restricted social networks & mostly no day activities
- All prisons need to screen all men for ID
- All liaison & diversion teams need to screen for ID
- Need information sharing protocols between agencies
- Need to have health & social care in prison better integrated with community LD service, with a 'follow-out' & handover service
- Need a community LD team (health & social services) in place to maintain contact in prison stay (could be the forensic ID team)
- Need more joint working between CLDTs and probation
- Need better volunteering/employment support

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Thank you for listening



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g.h.murphy@kent.ac.uk

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