

USER VOICE

ONLY OFFENDERS CAN STOP RE-OFFENDING

SERVING THEM RIGHT?

A user perspective on improving resettlement services
for ex-service personnel leaving prison

SERVING THEM RIGHT?

This report is based on a user-led consultation with offenders that had multiple complex unmet needs including mental health problems and over half of whom were ex-service personnel. All were in prison at the time they took part and were asked their views on finding and sustaining suitable accommodation and employment on release. The consultation was done by User Voice, supported by About Turn CIC and commissioned by Supporting People.

User Voice

User Voice is led and delivered by ex-offenders. It exists to reduce offending by working with the most marginalised people in and around the criminal justice system to ensure that practitioners and policy-makers hear their voices. It is well placed to gain the trust of and access to people involved in crime or who have direct experience of the criminal justice system as offenders and prisoners. Its work aims to deliver a powerful rehabilitation experience for offenders, better criminal justice services and institutions, and more effective policy.

User Voice was founded in 2009 by Mark Johnson, an ex-offender and former drug abuser, best-selling author of *Wasted* and social commentator. Mark's experiences of prison, and later as an employer of ex-offenders and consultant, taking on various roles within the criminal justice system and voluntary sector, left him convinced of the need to create a model of engagement that is fair and incentive led. His aim was to foster dialogue between service providers and users that is mutually beneficial and results in better and more cost-effective services.

All the work User Voice has done suggests offenders want to talk to people who have 'walked in their shoes'. This includes:

- **User Voice Councils** that can be developed for use within prisons or in the community for probation, youth offending teams and other related services.
- **Bespoke consultancy** where User Voice works with clients to design projects aimed at accessing, hearing and acting upon the insights of those who are hardest to reach, including prisoners, ex-offenders and those at risk of crime. These projects include staff and user consultations, workshops and research.
- **Advocacy work** aimed at engaging the media, the public, practitioners and policy-makers.

User Voice recruits qualified and talented ex-offenders to lead the organisation and to carry out its frontline work. This has a profound impact on employees' self-confidence and transforms their long-term employment prospects. More broadly User Voice demonstrates the hugely positive role ex-offenders can play given the right

circumstances.

About Turn CIC (Community Interest Company)

About Turn CIC is a 'not for profit' social enterprise that aims to improve the lives of ex-service personnel and their families through the development and delivery of holistic practices. As well as running tailored programmes, they also coordinate the implementation and roll-out of Forces for Good peer led support groups for ex-servicemen and women who are experiencing transitional difficulties, adjustment disorder, social exclusion, relationship difficulties, unemployment, homelessness , alcohol and drug dependency and post-traumatic stress disorder.

The About Turn CIC founders and directors are both veterans who trained and qualified as Social Workers after leaving the services and have considerable experience of working within the Criminal Justice System and mental health profession. Their work is based upon the premise that ex forces personnel working within the social care profession and Criminal Justice System are best placed to engage with and support those veterans that struggle with the re-assimilation back into civilian life and by doing so, influence positive change.

Supporting People

Supporting People is a central government programme to fund, monitor and review and improve housing-related support services. This is done in partnership with local housing authorities, social care services, health, probation, registered social landlords users and their carers and the voluntary and private sectors.

Supporting People provides housing related support to help vulnerable people to live as independently as possible in the community. This could be in their own homes or in hostels, sheltered housing or other specialised supported housing. It provides complementary support for people who may also need personal or medical care.

THE PROJECT

The primary aim of this short project was to gain an insight from offenders - particularly those from the armed forces and with multiple complex unmet needs and /or mental health problems - about their experiences of obtaining, and sustaining, suitable housing and employment. The project was led by offenders for offenders.

Listening to users to improve public services is not a new concept; in fact, it is now commonplace. There is broad recognition that effective user engagement can help to improve services and their outcomes by:

- identifying their needs;
- highlighting current systemic failings or gaps between provision and the reality for the end user; and,
- providing ideas for change.

Yet, marginalised groups are largely missing from user engagement strategies. This is particularly true of offenders, ex-servicemen and those with mental health problems. This project – indeed User Voice itself – is based on the belief that we all benefit and learn when offenders are provided with opportunities to discuss the services that impact on their lives and their path to rehabilitation.

Consulting with prisoners has been regarded as morally questionable and politically dangerous. But when given a chance to speak, the voice of the user of the criminal justice system can add crucially needed insight and value to the provision of support in prison and the community, creating more effective and efficient services.

METHOD

The project and each event was run and organised by offenders: neither the commissioning organisation nor prison staff took part in the discussions. This helped increase levels of confidence and openness within the groups.

21 prisoners took part in 2 User Voice workshops held throughout June 2010 in HM Prison Kirkham, in Lancashire. The criteria for inviting prisoners (all male) was that they had experience of *one or more* of the following criteria: mental health problems, homelessness and having served in the armed forces. Delegates were invited to an initial workshop where the objectives of the project were introduced. In groups of ex-servicemen and non-servicemen, they were given the opportunity to ask questions and discuss the key themes.

At the end of this workshop some participants put themselves forward to work with User Voice in carrying out the peer-led survey work and to feed back at the second workshop. These delegates were given questionnaires and asked to take them out on to the prison wings to canvass other residents for their views. User Voice's experience suggests this peer-led approach to participation is an effective way engaging a wider group and gaining their insights. At the second workshop, participants discussed the main themes from their own experience and those of other prisoners who were canvassed. They were encouraged not only to highlight problems or barriers to change but also to propose solutions.

This briefing summarises the key themes that came up in the discussions that took place in these workshops; discussions that were restricted to prisoners, who acted as representatives of the wider prison community.

Of the group consulted around half were ex-servicemen. The majority were in prison for offences of violence, alcohol or drug misuse or a combination of both. A large proportion were technically homeless on discharge from the Armed Forces and prior to their incarceration. Of those who were not from an armed forces background, the majority identified themselves as having mental health problems, with around half technically homeless prior to their sentence and a similar number did not know where they would live on release.

CONTEXT

A significant number of those classed as experiencing chronic social exclusion or labeled 'uncooperative' or 'hard to reach' with 'multiple complex unmet needs' are in fact disenfranchised soldiers. Many have struggled to make the transition back to the civilian community from either military service or from prison. Many experience difficulty in establishing themselves in a community that they feel does not understand what they have experienced, and seems unable to offer the specialist and practical support they need.

In the last decade numerous pieces of research have indicated that those from an armed forces background make up a significant percentage of individuals involved in the criminal justice system.¹

Soldiers comprise by far the largest occupational group in the prison system.² In 2008 the National Association of Probation Officers estimated that there were 8,500 former service personnel in prison, some 8.5% per cent of the prison population at the time.³ In 2010, the government put this figure much lower at 2,500.⁴

Whatever the case, practitioners working in the criminal justice system or in social care settings have highlighted this problem over many decades and the distinct needs of this marginalized group have been largely overlooked.

A recent report, *The Veterans in the Criminal Justice Systems Coordinated National Action Plan*, devised and written by the Justice Unions' Parliamentary Group with direct input from the ex-forces community makes practical and far reaching recommendations on how to address these current service delivery deficits. Published in July 2010, this includes recommendations to appoint a veterans link in each probation service, identify service personnel on reception into custody services signposting to relevant support, regular group meetings in prison for ex-servicemen, establish distinct aftercare hostels and encourage GPs and other health services to identify veterans and treat them accordingly.

This series of workshops and summary report builds on this action plan by consulting with ex-servicemen in prison, asking them to provide their own set of priorities.

¹ National Association of Probation Officers, 'Ex Armed Services Personnel in the Criminal Justice System', August 2008 and Kapur N, While D, Blatchley N, Bray I, Harrison K (2009) Suicide after Leaving the UK Armed Forces —A Cohort Study. PLoS Med 6(3)

² Howard League, 'Inquiry into Former Armed Personnel in Prison', 2010.

³ National Association of Probation Officers, 'Ex Armed Services Personnel in the Criminal Justice System', August 2008.

⁴ Hansard, 5 January 2010.

FINDINGS

Interestingly, only a few of those with a forces background felt that their previous military service had influenced the offending that had led to their incarceration. In 2000 Crisis reported that up to 3 out of 10 rough sleepers had previously been in the army.⁵ In our findings participants did highlight that if without a home on discharge from the armed forces, they were not treated as a priority group for housing and felt they should have been afforded the same - if not greater - priority in this respect than offenders as this would have reduced the likelihood of ever getting involved in offending behavior.

All participants showed a willingness and desire to successfully rehabilitate on release and stressed the importance of access to appropriate support at the right time, in the right place and by the right person. The sessions really showed how much motivation and willingness on the part of the offenders was present.

However, the discussions also identified a number of systemic barriers that obstructed this process:

- *poor communication,*
- *continuity,*
- *consistency* and
- *insufficient access to peer support.*

⁵ Crisis, 'Lest We Forget: Ex servicemen and homelessness', January 2000.

COMMUNICATION

Participant A described the breakdown he had before coming to prison. He was listened to and received treatment in prison, but had no plans for any structured support on release. Although he had been signposting to relevant support services. Due to his anxiety about this and lack of knowledge on what was involved, he was uncertain whether he would access this.

Many services *are* available to meet the housing and employment needs of prisoners with mental health problems. Four participants who did not have a formal mental health diagnosis did have appropriate access to mental health services. To ensure that these are accessed by prisoners there needs to be more effective communication in place. Participants identified a lack of information on the provision of services available in prison. This related to both the (lack of) knowledge among many prison officers about the support available and the ability of outside agencies to effectively communicate what they offer.

Within the group three (14.3%) were on medication for mental health related issues. Despite there being both a psychologist and mental health worker available in the prison there was largely no knowledge about this. Likewise, despite there being a specific resettlement course available the majority of participants had not heard of it.

Participants highlighted that there was a certain level of successful communication with support workers signposting them to some of the support on offer. But this was described as the most basic level of support, treated as an end in itself, rather than a means to an end. One suggestion was that there should be a system in which prisoners could be referred and accompanied to support services, ensuring that they were actually able to access the support they required. For many seeking help is not something they are used to doing and which would be aided by a peer support network as recommended at the end of this document.

"You have got loads of agencies but there should be one place where you can access them all"

CONTINUITY

There are a number of key transitional moments – from the community to prison, between prisons and on release back into the community – and, for ex-servicemen, from the armed forces to civilian life. Participants stressed the need for flexibility and continuity of service provision in times of transition. This was especially in case in relation to mental health services, where important relationships with health professionals are often disrupted. Most participants highlighted from previous experience that when they had received the support they required in prison it was rarely continued on their release into the community.

Continuity of support has a huge impact with regards to mental health services. None of the ex-servicemen who participated had been assessed for Post Traumatic Stress Disorder (PTSD) on their induction to prison. Many were asked if they were from an ex-services background, but no link was made to their mental health. Some had PTSD diagnosed and on their file, but that they still did not receive any specific support in prison. 25% of ex-servicemen participating had a formal mental health diagnosis but did not have appropriate access to mental health services within prison.

On release offenders with diagnosed mental health problems were given a letter and informed that this should be taken to their GP in order to continue receiving treatment. Participants highlighted that this caused extreme anxiety and risked being counter-productive, as they did not want to discuss their problems with a stranger. Many had built up a relationship with their counselor in prison and did not want to have to disclose traumatic events and feelings again so they would prefer to go untreated. It was suggested that they needed to be introduced to any new mental health professional with a progress report of treatment to date so that they did not have to start from the basics at the beginning of every new treatment relationship.

Continuity in terms of accommodation was seen as the building block for all other factors necessary to increase the likelihood of reintegration back into society. Yet there is a distinct lack of appropriate housing available. A number of participants described hostels as being the only option. But many refused to go to hostels instead 'choosing' to be homeless, describing them as full of drugs and criminality. Some did describe support that was available (for example, SOVA) with finding housing on release. But there was nothing provided in terms of sustaining accommodation as there was no link with anyone outside.

"You are always starting from scratch"

"Always going over old stuff which I don't want to"

"I had a breakdown before I went to prison and they [prison counselors] listened. But I don't know what I am going to get when I'm released"

"I just want a fresh start and my own place"

"Hostels are jails without bars"

"If you don't know where you are going when you leave then you are back to square one and will end up back here"

"Main problem is not getting my own place to sort out my other issues"

CONSISTENCY

Participant B described that as a result of being over 25 years old he had no choice but to move back to his Mum's dysfunctional environment as he could not afford appropriate accommodation as he did not get a full grant for rent.

Not all participants described a lack of support services available on release, with a significant minority having made contact with drugs and alcohol and mental health services in their community which is to be welcomed. Yet for the majority who were seeking to continue their treatment, especially for mental health issues, consistency of support on release to different communities was significant problem. Three of the group were on prescribed medication for diagnosed mental health problems. One knew the support he would continue to receive alongside his medication in one area, but the others were uncertain of what they would receive in others.

Participants identified significant variations in the level and quality of support offered around obtaining and sustaining housing and employment. Again this was particularly the case for issues around mental health. Finding appropriate housing also varied between communities. A small number of participants highlighted a systemic barrier for those over 25 years old: they receive a reduced grant for rent which "caused massive problems". Furthermore, many want to relocate in order to distance themselves from previous habits, family and friends. But many had experienced the problems of relocation. By not being originally from the area, they are not given priority status for social housing, which often results in homelessness.

There are specific issues of consistency for former armed forces prisoners. Army vocational qualifications are not recognised by civilian employers, despite many being the equivalent of NVQ 2, 3 or 4. Many employers cannot see that such qualifications have a transferable value. Many also raised the fact that military terminology and language is a barrier to a successful assimilation to civilian employment, not to mention the disappointment that a life spent serving ones country, putting ones life on the line and working for these qualifications led to nothing but disenchantment.

In terms of drugs and alcohol services most participants who required help in prison were able to access it, but treatment on release was dependent on the area to which they were being released. It is often reliant on the drug interventions programme available locally. Variations were identified, not just between individual prisons but also between prison and support in the community. While some variation is understandable, there needs to be far greater consistency if rehabilitation and resettlement is to be successful.

(PEER) SUPPORT

Staff member C (ex-services) set in motion the process to transfer an army vocational skills qualification into a civilian qualification for an ex-forces prisoner with an Army Benevolent funded grant. He could not otherwise afford it and was not aware of the funding available to do so.

Recognising that the impetus to change must come from within, participants also identified support from others as critical to reduce re-offending. Many saw a much bigger role to be played by those who had similar experiences whether of prison, servicing in the armed forces or both. All participants agreed that in order to reduce the likelihood of re-offending, appropriate support should be provided at the right time, in the right place and most importantly by the right person.

For the majority of those who are receiving structured support for their release into the community it had a criminal justice focus. In other words they were either on an indeterminate public protection sentence or were prolific and priority offenders. As a result the services they received were criminal justice and not treatment (such as drug and alcohol or mental health) focused.

Participants spoke very highly of an ex-forces support worker who works in the prison as a civilian contractor who has already initiated a group session for the ex-forces community. The general consensus was that this should be a regular event and this officer should be supported to continue this work.

The group went further suggesting that one of them who is due for release would be an ideal candidate to continue running such a group once he has left as long as the Prison was flexible enough to let him back in. He could also establish a group on the outside so that support was available after serving a sentence. It was suggested that there was real potential for a former soldier to take on a welfare role within the establishment and liaise with prison staff, feed back concerns and address issues of which prison staff may well be unaware. Similarly it is vitally important that contact with the regiment is maintained to reduce feelings of shame and guilt.

The benefit of such a peer-led approach was highlighted during the consultation. As a result of bringing together a group of ex-servicemen two veterans from the same regiment met and one provided support to another and highlighted, from his own experience, what specific support was available. The need for peer support structures was not limited to the ex-servicemen. It was highlighted across a range of services and needs as the most effective way of getting the right support. This was especially true for, but not limited to, drugs and alcohol and mental health services.

"They just show you and then there is no follow up. It is up to you. They just point you in the right direction"

"That [peer-led support] is the solution"

"Most information people find out in here is from another prisoner"

"The first person to help you is yourself"

"If you are proactive in your own resettlement there is a lot more help"

"You don't see your probation officer at all"

"If I didn't have family support then I would be back in here"

"Who is going to help us – us"

"It's [user engagement] a win-win situation, its helping us and its helping them"

CASE STUDY

Extracts from an interview with a participant in the consultation:

"I am the eldest of four brothers and sisters and I can say that I had a good upbringing without social problems or problems within the family. We were far from wealthy but generally had what we needed.

From an early age all I wanted to do was join the army. I always remembered my goal and I worked hard at school. When I became a teenager and other lads were out getting drunk on a Friday night I didn't join in: I had a girlfriend from an early age and stayed at home with her. I had a Saturday job and any other job I could get to earn some money and when I was 16 I passed 12 GCSEs, nearly all of them with high grades. I joined the army at once and went to Surrey to train. I was determined to do well and I succeeded. There were 300 on my course and I was in the top five. And then at the age of 17 I was sent to Germany to join my regiment and that's when the trouble began.

All the others were men, and I was still just 17. The oldest was 30 and the average age was 25. They all drank very heavily because the army is a drinking culture. I was determined to keep up with them. So it was drinking every night after work, often all night. I'd fall asleep drunk at four in the morning and then get up at Daft O'clock to do PT and I was so young and physically fit that I could manage it. Career-wise, I did well. I wanted to impress and I was dead keen so I volunteered for everything, any courses or postings abroad.

When I was eighteen I married my girlfriend, the same girlfriend I'd had for years and we had a son. I moved her out to Germany and got promoted to Lance Corporal and I was buzzing because everything was going so well after just one year and all my dreams were coming true. But within two weeks of my wife arriving in Germany I went to Canada on an exercise for six months. I got back and she was gone. That was the end of the marriage. I'd known that leaving her alone in Germany so quickly would be a strain but we'd been together so long I thought our relationship was strong enough to take it.

I had a bad couple of years. By now I was very big on the drink but I went from beer to brandy, martini, vodka every night. And I was getting up late for work and getting into debt. Everything went spiralling out of control. Then one day I realised what was happening and thought: turn yourself around. And I did. I didn't stop drinking but I was getting up for work and found a new girlfriend and was selected by the promotion board for corporal. But I didn't want the same thing to happen to this girl as happened with my first wife. I thought if I married her and stayed in the army everything would come crashing down again. So, despite the promotion, I decided to leave the army. And everything came crashing down anyway. You're

supposed to get some support with housing, money worries, all sorts of things but there was nothing. I moved back to my home town and had to move in with my girlfriend's parents. That was hard going because they've got 5 kids and it was a 3-bedroom house so I was living on the sofa.

I tried and tried but it took two and a half years to get a house. As for work, I went to the job centre but I'd done really well in the army and I didn't want to do those crap jobs. I tried driving, bar work, ground work, desk work, I got through about 20 jobs and didn't stay more than a few weeks in any of them. I was 25 now and I'd learned how to drink when I was young with the big boys in the army and now I could really drink. I went on the piss with all the money I earned and I didn't care if I lost my job or not. When I was maxed out on my credit cards I spent my girlfriend's money, until she was £1700 overdrawn. It had all gone on beer for me. I was ashamed and a bit sorry for myself. I was with all the same mates I'd known before I went in the army. I came out and they were all still just the same as before I'd gone away: in the same place, doing the same drugs. They'd do cocaine every Friday and I refused it for a long time. Then I finally joined in.

I got a habit and started selling cocaine to pay for it. I didn't deal to make money, just to get cocaine. Things started getting violent and I was very... well if I thought that someone was just looking at me the wrong way I'd start on them. The army training means that you don't turn away from trouble, you confront it. But I was probably confronting trouble that wasn't there at all.

I was arrested 20 or 30 times and soon the police were routinely knocking on my door whenever there was trouble because they thought I must be in the middle of it. When I look back on it I think I was venting my frustration. I was always fighting and getting arrested and eventually the situation got out of hand. I'm in jail now for violent offences which I committed when I was pissed up and sniffed up.

I have changed since I've been in jail. Listening to other grown men sounding off like 18 year olds made me realise that people must see me the same way: as a complete fucking clown. I'm trying to get my shit together now. I've worked on my drug and alcohol problem in here and I'm looking at ways to use my experience of marital break up, drink, drugs, violence, war... I'd like to be an outreach worker who helps other people like me, and as an ex-serviceman I think I have something special to offer, particularly to other ex-servicemen.

Looking back, I can see that all my life I had someone giving me a kick up the arse. At school it was the teachers, then I left school and joined the army straightaway where it was big scary blokes. And while I was in the army whatever change happened, I got support. I was used to a structured life, and suddenly I was out of the army and there was no structure. I was 25 but I couldn't do stuff for myself. I couldn't sort out housing or the right job. When you leave prison you have a probation officer to help you. Well it would have helped me to have someone like that to steer me in the right direction when I left the army."

CONCLUSIONS AND RECOMMENDATIONS

This consultation enabled the ex-soldier prisoner community to come up with solutions to the problems they had experienced and when put in practical context set against personal experience showed that the real answer to developing innovative and cost effective interventions to facilitate the engagement and positive influence of the ex forces community must be driven by veterans themselves.

Veterans supporting veterans is not a new phenomena; it's what soldiers do and they do it well. The use of peer led support groups, that allow and facilitate mutual support are an obvious way forward both in prison and in the community. Groundbreaking work in relation to implementation, replication and evaluation of this process is being trail blazed by User Voice for offenders in general and About Turn CIC and the Forces for Good peer led group network for veterans. This consultation will inform this future work.

As in all of User Voice's work, participants were encouraged to be solution focused and to take responsibility to think about not only the problems they faced, but possible improvements that they are others could make.

Recommendations

1. Links with Armed Forces: the issue of *shame* was a constant theme throughout the discussions. It raises a difficult question about what the Armed Forces owe former servicemen and women. Most participants felt very strongly that some form of communication with their previous battalion is very important in terms of motivation to rehabilitate. Where there has been a mental health issue, particularly when likely to be caused by combat, there is a strong argument to say that as part of increasing on going support for ex-servicemen, the Armed Forces need to recognize the powerful role that they can play in motivating offenders to rebuild their lives. And above all it is very important that there is recognition from the forces when people do straighten out.

2. Post Forces Supporter: this issue is how to re-create the link with the Forces, especially when a very proud veteran is very unlikely to go back to his regiment 'cap in hand' owning up to his or her mental health problems, drug and/or alcohol addiction and custodial experience. Having such a Supporter in each region to work with clusters of prisons could mean support in custody and through to the community. This would include helping former servicemen to link into some of the networks that exist in communities but which they will have lost touch with but which are of vital importance to their rehabilitation and assimilation back into the civilian community.

3. Peer support: participants, whether from an ex-forces background or not, stressed the need to talk to someone that had similar experiences to them. There were many reasons given including the ability to empathise, a real understanding of circumstance

and need and the ability to give advice from personal experience. Peer support is mutually beneficial to the supported and the supporter. The former is motivated to begin the process and rehabilitation and effective advice on how to achieve this, whilst the latter gains a sense of purpose and many soft skills which can be used on release and which are attractive to employers. In the consultation the ex-servicemen highlighted the benefit of specific support groups for veterans and we would encourage these to continue and be transported elsewhere throughout the prison estate.

Final word

The overarching theme to emerge from this consultation is communication; the importance of it to the rehabilitation process and how too often in the criminal justice system it is not effective. Many organisations, including prisons, now involve offenders and ex-offenders in the design, delivery and evaluation of their service. But this rapid progress has meant that while many subscribe to the top line principles of involving service users, little work has been undertaken to define in practice what it actually means.

At the heart of the issue is the power relationship between service user and provider. This is why it is important and this is why it is challenging. Service users sitting on committees and boards where they are heavily outnumbered, are often intimidated and not able to help to set an agenda which enables them to discuss what matters to them.

User Voice is led and delivered by ex-offenders. But we recognise that our voices are not the ones that should be heard. Our job is to provide spaces where truly unheard voices can make a difference, to urge policy-makers, people with power who make decisions affecting the lives of offenders and ex-offenders, to listen in a way and through structures that are mutually beneficial.

And in the context of veterans there are specific considerations that need to be considered. These are people who have often signed up very young, with basic education and life skills, have learnt to function in one institution (Armed Forces) and then another (prison) and have served their queen and country. They are not arguing for more than other people, just more effective services to help them put their lives back together. And often the person best placed to do this is someone who has been there. There are networks of peer support for veterans in the community, but these need to be strengthened and brought into prisons on a more systematic basis. It is not always easy empowering some of the most chaotic and marginalised groups in society and it doesn't always work. But when it does the benefits are invaluable.



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