

RESPONSE TO INDEPENDENT SENTENCING REVIEW 2024 TO 2025: CALL FOR EVIDENCE — DECEMBER 2024

Question 7: What, if any, changes are needed in sentencing to meet the individual needs of different victims and offenders and to drive better outcomes?

1. INTRODUCTION

This submission to the 2024-5 Independent Sentencing Review focuses on the needs of pregnant women and mothers within the criminal justice system. It is informed by legal and healthcare experts, specialist academics and testimony from women who have experienced pregnancy and early motherhood in prison. When it comes to women in the criminal justice system, there is no distinct binary between victims and offenders: one in three women in prison grew up in the care system¹, the majority of women in prison are victims of domestic abuse² and many are coerced into crime by abusive partners³.

Through this submission, we will evidence how the existing sentencing framework does not sufficiently address the well-established risks and harms associated with imprisoning pregnant women and mothers. This is most clearly evidenced by the deaths of three babies within the prison estate in the last five years. We will seek to persuade the government to follow international examples and introduce a sentencing framework that severely curtails, if not ends, the use of custody for pregnant women and mothers to ensure that the lives of women and children are no longer torn apart by the dangers of incarceration.

The structure of this submission is as follows:

- 1. Introduction
- 2. Overview of the imprisonment of pregnant women and mothers
- 3. Evidence of risks
- 4. Alternatives and international examples
- 5. Key legal principles and case law
- 6. Conclusion and recommendations

2. OVERVIEW

Baby deaths within the prison estate

Since the high-profile deaths of two babies in the women's prison estate in recent years (Aisha Cleary, 2019 and Brooke Powell, 2020), the Prison Ombudsman⁴, NHS⁵ and Ministry of Justice⁶ have categorised all pregnancies in prison as "high risk". It

is the expert view of the Royal College of Midwives⁷ that "prison is no place for pregnant women". The Royal College of Obstetricians and Gynaecologists has also emphasised the need for non-custodial alternatives for pregnant women⁸.

Though the Ministry of Justice has implemented new prison policies in response to the deaths of Aisha Cleary and Brooke Powell, the recent death of a third baby in 2023, for which a PPO investigation is currently underway, proves that policy changes within an intrinsically unsafe system will never be enough to protect women and babies. The only sustainable solution is a new sentencing framework that no longer forces them to live in an unsafe environment.

Risks and harms faced by pregnant women, mothers and children

While it is the role of courts to pass an appropriate sentence and the role of prisons to safeguard people in custody, sentencers are currently placed in an untenable position: sentencing a pregnant woman to custody – for any length of time – effectively means sentencing her to a high-risk pregnancy, "by virtue of the fact that she is held behind locked doors for sustained periods of time"⁹.

In material terms, a high-risk pregnancy means the risk of preterm birth¹⁰ or worse: a stillbirth with associated lifelong trauma.¹¹ Pregnant women in prison are also three times more likely to be diagnosed with gestational diabetes, which increases the risk of complications for both mother and baby.¹² Additionally, given that many pregnant women and mothers of infants will be separated either temporarily or permanently from their infant, sentencing a pregnant woman to prison means sentencing her child to significant developmental trauma caused by separation¹³. Evidence also shows the additional stress that imprisoned pregnant women feel due to their environment can have a direct impact on the developing child and result in lifelong health and wellbeing challenges.

Sentencing guidelines and case law

In light of these established risks, on 1 April 2024, the Sentencing Council introduced a new mitigating factor for pregnant and postnatal women. We await their forthcoming revised 'Imposition of custodial and community sentence' guideline in 2025, the draft of which outlined directions for sentencers to avoid the use of custody for pregnant women wherever possible. However, guidance is insufficient to safeguard pregnant women, mothers and babies who continue to be put at risk. Despite the high-profile baby deaths and the strength of public and professional concern in recent years, 229 pregnant women spent time in prison last year, and 53 women gave birth while in custody¹⁴. These figures show a significant increase from the previous year.

The case for wholesale sentencing reform for pregnant women and mothers is underscored by several recent Court of Appeal judgments that have seen mothers' custodial sentences overturned or truncated in order to prioritise the safety of pregnant women and their babies. A summary of the relevant case law is included in section four of this submission. The frequency of such cases makes clear that sentencers in the lower courts do not understand the substantive risks and harms that custody creates for pregnant women, mothers and their children, and it is unsustainable and inefficient for this to be resolved case-by-case by the appellate courts.

We acknowledge that custody cannot be avoided for certain offences, particularly where there is a risk to the public. Nonetheless, while one of the statutory purposes of sentencing is protecting the public, the nature of women's offending is such that in the majority of cases, this is not the overriding concern of the court. Ministry of Justice data on women's offending demonstrates that women commit less serious offences than men, and their offending is commonly linked to underlying mental health needs, drug and alcohol problems, coercive relationships, financial difficulties and debt. Furthermore, as noted in the 2024 Equal Treatment Bench Book (ETBB), "the impact of imprisonment on women, more than half of whom have themselves been victims of serious crime, is especially damaging and their outcomes are often worse than men's".¹⁵

The ETBB also outlines how custody can exacerbate mental ill health and increase the risk of self-harm and suicide for women, the latter of which is most comprehensively documented in the work of INQUEST¹⁶.

Through this submission, we intend to persuade the Sentencing Review committee to put forward the following recommendations that would see women's sentencing tailored to address their needs and vulnerabilities, with a formal duty on sentencers to consider the best interests of the child and/ or parent. Our five key recommendations are as follows:

- 1. Sentencing must be tailored to address the specific needs and vulnerabilities of all pregnant women and mothers of young children, which will never be met in prison. Custodial sentences for mothers create increased risks to all stages of a pregnancy and a child's long-term development outcomes. These risks are universal; they affect all women who come before the courts, not just those facing short sentences. A new sentencing framework must therefore include exceptions for pregnant women and mothers facing longer and mandatory minimum sentences.
- 2. A new sentencing framework must seek to avoid any part of pregnancy or the 'first 1,001 days' (including pregnancy and the first two years of a child's life) from being spent in prison or separated from their mother. The first 1,001 days of a child's life are a critical period that sets the foundations for their lifelong emotional and physical development¹⁷; courts must make best efforts to prevent an infant spending these crucial days in prison, or the suffering or harm caused by separation from their mother during this period. Community alternatives must be resourced.
- 3. When sentencing pregnant women and mothers, sentencers should acknowledge and prioritise the rehabilitative potential of pregnancy and motherhood. Courts should make every effort to ensure that a

community order is compatible with a woman's health needs and childcare responsibilities (as per the UN Bangkok Rules), so she is not set up to fail.

- 4. A new, non-custodial sentencing framework must avoid tagging pregnant women and mothers of dependent children unless strictly necessary to meet the seriousness of offence. Tagging and electronic curfews create barriers to healthcare access. This is exemplified by one woman's experiences that are detailed in the attached appendix, where her tag continuously beeped throughout hours of childbirth.
- **5.** New probation guidance to restrict the use of recall for pregnant women and mothers. While the issue of recall sits adjacent to sentencing, it is nonetheless a related area where pregnant women and mothers' needs are overlooked to detrimental effect. The majority of women are recalled for non-compliance, as opposed to further offending¹⁸. For pregnant women and mothers, this is often related to missing probation appointments due to healthcare appointments and childcare commitments¹⁹. This can result in traumatic yet preventable separation from children and must be avoided at all costs by new guidance for the probation service.

3. EVIDENCE

Risks to pregnancy and the postnatal period

Pregnancy and the postnatal year is a high-risk period for severe mental ill-health in women generally.²⁰ There are also major risks to physical health during pregnancy, including pre-eclampsia, haemorrhage and sepsis, where urgent medical attention is needed²¹. Prison poses inherent barriers to accessing this. The Aisha Cleary inquest conclusions underscored the prison system's inability to provide prompt emergency responses.²²

There are clearly evidenced risks to women in the postnatal period, from conditions such as sepsis, thrombosis and thromboembolism, to acute mental health risks, which are linked to high numbers of deaths due to drug and alcohol use or suicide.²³

Research into the experiences of pregnant women in prison has found the impact of imprisonment – increased risks of healthcare complications and lack of access to nutrition, essential provisions and clean air – intensifies as pregnancy progresses.²⁴

Women in custody are likely to have complex health needs, which increase the risks associated with pregnancy for both the woman and the baby:

- Pregnant women in prison are seven times more likely to suffer a stillbirth than women in the community;²⁵
- Pregnant women in prison are almost twice as likely to give birth

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prematurely as women in the general population, which puts both mothers and their babies at risk;²⁶

- Over one in five pregnant women in prison miss midwifery appointments, due to transport or staffing issues, increasing the risk of premature birth, miscarriage and stillbirth;²⁷
- One in ten pregnant women in prison give birth in-cell or on the way to hospital;²⁸
- Between 2020 2022, one in four babies born to women in prison required neonatal unit admission (compared with a national average of one in seven);²⁹
- The rates of many adverse pregnancy outcomes are higher for Black women, who are over-represented within the criminal legal system. This includes rates of maternal death, premature birth, pre-eclampsia, postpartum haemorrhaging and blood clots, stillbirth and serious post-natal complications;³⁰
- There is also a higher rate for Black women of premature (and also precipitous) labour in prison, i.e. prior to any transfer to hospital;³¹
- Pregnant women in prison are at greater risk of perinatal mental health difficulties, with the NHS finding that entry into custody is particularly distressing for pregnant women and mothers separated from their children.³²

Harm to children and the first 1,001 days of development

Sentencers should be aware of the importance of postnatal period (up to 24 months after birth) and the longer-term harm that maternal imprisonment and the risk of separation causes to the child, which will long outlast the length of a mother's custodial sentence. This harm applies to all children whose mothers are sentenced to custody but is particularly acute for babies in the first 1,001 days of development, which is a critical period that sets the foundations for a child's lifelong emotional, psychological and physical development:³²

- Court proceedings and imprisonment are distressing environments for pregnant women.³⁴ 82% of women in prison report that they have mental health problems³⁵. Antenatal stress is proven to increase levels of the hormone cortisol in the mother's body, which, when it crosses the placenta, can affect the health of the baby's brain development, emotional attachment and early parenting interactions;^{36 & 22}
- Perinatal mental disorders are associated with increased risk of psychological and developmental disturbances in children;³⁷
- The psychological distress caused by the prison environment is evidenced by the record-high self-harm statistics in women's prisons. Self-harm by women in prison hit a record high of 20,248 incidents last year, marking a 65% increase between June 2022 and 2023 alone;³⁸

- Many women who give birth during their time in prison, or who enter prison during the postnatal period, will be separated temporarily or permanently from their baby, interrupting breastfeeding and risking significant trauma in a time at which the mother-baby attachment is shown to be crucial in supporting long-term development;³⁹
- As many as 19 out of 20 children are forced to leave their home when their mother goes to prison. Although the figure needs updating, approximately 14% of children go directly into care;⁴⁰
- The family impact of custodial sentencing is particularly acute for Black mothers, as more than half of Black African and Black Caribbean families in the UK are headed by a lone parent, compared with less than a quarter of white families and just over a tenth of Asian families⁴¹. This is likely to increase the risk of Black children being taken into care if their mother is imprisoned;
- The imprisonment of a household member is one of ten adverse childhood experiences (ACEs) known to risk significant negative impact on children's long-term health and wellbeing, their school attainment, and later life experiences;⁴²
- Separation for both parent and child is traumatic and can have long term effects.⁴³

Furthermore, the UN Convention on the Rights of the Child states that children should be protected from any form of discrimination or punishment based on their parents' status or activities and that the best interests of the child should be the primary consideration in actions concerning children by courts (Articles 2 and 3, UN General Assembly 1989). Research shows that when a mother goes to prison it is a 'family sentence', due to the impact it has on her dependent children⁴⁴.

4. ALTERNATIVES AND INTERNATIONAL EXAMPLES

The benefits of non-custodial and rehabilitative sentences for pregnant and postnatal women

The Ministry of Justice Female Offender Strategy identifies that "custody is particularly damaging for women" and that many women could be more successfully supported in the community, where reoffending outcomes are better⁴⁵. The most recently available figures show that 76% of women in prison are serving a sentence of less than two years⁴⁶. Research evidence⁴⁷ has revealed the harmful impact that custodial periods of even a few short weeks have on mothers and children. Similarly, research has demonstrated that women released from prison, especially those serving short sentences, are more likely to reoffend, and reoffend sooner, than those serving community sentences.⁴⁸

A report from His Majesty's Inspectorate of Probation has found that community women's centres, which help women to build the capacity to address their issues,

rather than just addressing offending behaviour, are a far more cost-effective response than custody and are proven to reduce reoffending.⁴⁹

Pregnancy has been recognised as a unique window of opportunity to work with families and lays the foundations for a child's future physical, emotional, social and cognitive development⁵⁰. The rehabilitative potential of pregnancy has been acknowledged by Court of Appeal judges in the cases of *Charlton [2021] EWCA Crim 2006, 2 Cr App R (S) 18*⁵¹ and, most recently, *Bassaragh [2024] EWCA Crim 20*: "Pregnancy will not only provide strong personal mitigation but might also tend to improve the prospect of rehabilitation"⁵².

Furthermore, pregnancy and motherhood increase the magnitude of punishment. Mothers are negatively impacted in particular by imprisonment, with research showing their mothering practices being limited by incarceration, which diminishes their maternal identity and self-esteem, with a long-lasting negative impact that endures after release⁵³. Imprisonment impacts mothers' ability to engage in rehabilitation as well as their relationships with children and caregivers, and increases their risk of self-harm and/or suicide.⁵⁴

International examples

Eleven countries do not permit the imprisonment of pregnant women, or severely curtail the use of custody.⁵⁵ They use options such as house arrest, electronic monitoring or the use of probation, for example:

- Italy has enacted laws to protect pregnant women from entering prison, both on remand (pre-trial detention) and on sentence;
- In Portugal, judges take into account any special state of vulnerability and the possibility of giving birth in a prison facility when deciding on the appropriate sentence;
- In Russia, courts may defer the serving of a custodial punishment in the case of pregnant women and mothers of children up to fourteen years old;
- In Georgia, pregnant women or women with children under 3 years of age, except women imprisoned for grave and particularly grave crimes for more than 5 years, can be exempted from punishment or the punishment can be postponed by the court for the period when the woman is exempted from work, due to pregnancy, childbirth and until the child reaches the age of 3;
- Chile is currently in the process of debating a new law, 'Ley Sayen', which would end the imprisonment of pregnant women and mothers of children up to two years old, replacing custody with probation supervision;
- Brazil has introduced non-custodial measures for pregnant and postnatal women, and introduced use of house arrest instead of remand for pregnant women and mothers of children up to the age of 12;
- Costa Rica uses 'house arrest electronic monitoring' for pregnant women, female heads of household and mothers of children under 12;

• In Peru, non-custodial measures are prioritised for women who are pregnant and mothers of children up to three years old, alongside female heads of household with spouses or children with disabilities.

5. KEY LEGAL PRINCIPLES AND CASE LAW

Several recent Court of Appeal decisions, including *Tamang* [2024] EWCA Crim 62; *Bassaragh* [2024] EWCA Crim 20; *Byrne* [2024] EWCA Crim 801; *Byron* [2024] EWCA Crim 818; *Thompson* [2024] EWCA Crim 1038; *Foster* [2023] EWCA Crim 1196; *Stubbs* [2022] EWCA Crim 1907 and *Charlton* [2022] 2 Cr App R (S) 18, have affirmed the risks prison poses to pregnant women and infants and overturned women's custodial sentences in order to prioritise and protect the welfare of their children.

The key principles arising from case law are as follows:

- The sentencing of a pregnant defendant or primary carer inevitably engages not only her own family life as protected by Article 8 ECHR but also that of her family, including any dependant child;
- The position of children, particularly very young children, is a "major factor" for consideration when sentencing. The best interests of a child (or children) who may be affected is "a distinct consideration to which full weight must be given."⁵⁶
- There is a statutory duty upon sentencing courts to identify and give proper weight to the best interests of children arising both from Article 8 ECHR and s.44 of the Children and Young Persons Act 1933;
- Pregnancy (and/or the impact on dependent children) is also capable of amounting to exceptional circumstances justifying departure from mandatory minimum sentencing provisions. See *Bassaragh* [2024] EWCA Crim 20 in relation to firearms, and *Charlton* [2022] 2 Cr App R (S) 18 in relation to a third strike burglary;
- Pregnancy will not only provide strong personal mitigation but in many cases will also tend to improve the prospect of rehabilitation. See Charlton [2022] 2 Cr App R (S) 18; Stubbs [2022] EWCA Crim 1907;
- The positive prospect of rehabilitation and the significant harm to an unborn child that will "often result" from immediate imprisonment means that "a proper application of the imposition guideline will often justify the suspension of a short sentence in the case of a pregnant offender". See Stubbs [2022] EWCA Crim 1907;
- It is inappropriate to pass comment on how or why a female defendant has become pregnant. Whether a pregnancy is planned or not can be of no concern to a sentencing judge whose focus must be on the risks to mother and baby of pregnancy and birth in custody. See Byron [2024] EWCA Crim 818;

- In a case where a woman is pregnant or who has recently given birth is to be sentenced, it is desirable for the court to obtain a pre-sentence report so that the sentencing judge is fully informed about the likely impact of the sentencing decision on the child and on the family. See *Thompson* [2024] EWCA Crim 1038;
- The impact of immediate custody on a young child can make it just and proportionate to suspend the sentence: a child of just over a year old should not suffer the incalculable harm of its mother being in prison at such a formative stage of its young life. *Tamang* [2024] EWCA Crim 62;
- It cannot be considered that presence in the mother and baby unit is the equivalent of conducting a mother and child relationship outside the confines of a prison. See *Thompson* [2024] EWCA Crim 1038.

This substantive body of case law has consolidated a number of legal principles that prioritise the welfare of pregnant women, mothers and children. The frequency of such appeals clearly shows that sentencers in the lower courts cannot be relied on to consider the risks and harms that prison creates for pregnant women, mothers and their children. It also cannot be left for the appellate courts to intervene to protect the welfare of women and their children in such a piecemeal way. Sentencing reform is the only way to secure consistent, evidence-led sentencing practice.

6. CONCLUSION AND RECOMMENDATIONS

The deaths of three babies in the last five years have reinforced the fact that prison will never be a safe place to be pregnant. By its very nature, the conditions in prisons – control, isolation, barriers to healthcare access – and the risks linked to maternal separation are damaging to a baby's development and the health of a mother. At worst, the harm to mothers and their children is severe and irreparable. In too many cases, it has been fatal.

Although new sentencing guidelines encourage better use of community orders for those serving shorter sentences, it is important to acknowledge that pregnant women and mothers serving any length of custodial time remain disproportionately vulnerable to the risks of prison, including those serving mandatory minimum sentences. Sentencing guidelines are not enough, and women at risk of incarceration cannot afford to wait any longer for meaningful change, as emphasised by the death of another baby in prison in 2023.

To ensure their safety and the lives of their children, pregnant women and new mothers in the criminal justice system need an innovative and ambitious sentencing framework that, based on evidence, will severely curtail the use of for pregnant women and mothers. This framework should prevent maternal separation by resourcing community-based alternatives that provide relevant support and must be responsive to the emerging needs and vulnerabilities of pregnant women, new mothers and their children. While sentencing must be based on evidence, not public opinion, it should be encouraging to both government and the judiciary that recent public polling has found that the public do not want to see mothers and babies in prison where community alternatives are available: 53% of respondents to a survey commissioned earlier this year by Level Up and One Small Thing believed a mother with a baby should not be sent to prison with her infant if a community-based alternative was available; only 28% disagreed, with the rest answering 'don't know'.⁵⁷

When developing a new sentencing framework, we encourage the government to take a courageous and forward-thinking approach that acknowledges prison will never be the best start for a child or a new mother. Both need the support and access to healthcare that only comes from being together in the community. This will require a commitment to diverting funds from prisons to specialist localised community services and organisations that offer support and routes to rehabilitation. The government's approach would also benefit from consulting with the Probation Service to develop further guidance for probation officers on recall for pregnant women and new mothers.

While the government will need to consider several overlapping factors in order to meet the individual needs of, and drive better outcomes for, pregnant women and new mothers, this approach also requires recognition of the complex realities created by social marginalisation and economic disadvantage. Criminalised women's needs are often far greater than their deeds.

Recommendations based on evidence:

- 1. Sentencing must be tailored to address the specific needs and vulnerabilities of all pregnant women and mothers of young children, which will never be met in prison;
- 2. A new sentencing framework must seek to avoid any part of pregnancy or the 'first 1,001 days' (including pregnancy and the first two years of a child's life) from being spent in prison or separated from their mother;
- 3. A new sentencing framework must acknowledge the rehabilitative potential of pregnancy and motherhood, as reflected in evidence and case law;
- 4. A new, non-custodial sentencing framework must avoid tagging pregnant women and mothers of dependent children unless strictly necessary to meet the seriousness of offence;
- 5. New probation guidance to restrict the use of recall for pregnant women and mothers.

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APPENDIX 1: Women's experiences

These are the experiences of four women who have been pregnant in prison in their own words, who are all part of Level Up's campaign to end imprisonment of pregnant women. Some women remained incarcerated during their child's birth and the post-natal period, others were released on license. Themes include a lack of timely access to healthcare; being kept in unsanitary conditions; poor nutrition and dehydration; being penalised for the probation service's administrative failures, and practical limitations not being taken into account with regard to women's compliance with license conditions.

Anna's experience

I am writing this sentencing review submission in the hope that there can be some change in the justice system to change the way we sentence pregnant women and new mothers. I am writing this as a woman with lived experience of being pregnant in prison, giving birth in custody and having my child on a mother and baby unit inside of a prison.

I was in prison for a total of 15 months. Some of this was spent on remand and subsequently led to me giving birth whilst in custody. I feel that traumatic experience could have been avoided had I been bailed at my first hearing but the fact I was 6 months pregnant wasn't even spoken about in court and the judge didn't take it into consideration at all. I was later given bail after applying again a week after having my baby as my mental health rapidly declined as I couldn't cope with the guilt and unsafe conditions of having my child in a prison environment.

When I was sentenced, I had written the judge a letter pleading to not separate me from my newborn son as I was on bail and was unsure if I would get another place on a mother and baby unit and I would be separated from him if given a custodial sentence. I was given a 3 year prison sentence and separated from my young child for 5 weeks which was unbearable. With the uncertainty of being able to have my son with me again, I had suicidal thoughts and became extremely depressed which I had to suppress because if I had voiced this, it could have affected me getting a place on the MBU. I pushed to sit another MBU board and finally got accepted and was able to have my son with me for the remainder of my sentence.

I feel that if I had a community sentence or a suspended sentence this would have been a much safer and beneficial alternative for me and my child. Having my son was the pivotal moment that changed my life, not prison. Prison has added to the trauma I have experienced in my life. I feel like I failed as a mother before I even became one. The guilt of having my son in that environment will never leave me. All any mother wishes to do is give their child the best start in life and I wasn't given that chance.

My basic needs failed to be met in prison. The healthcare is astonishingly poor, I had missed hospital appointments due to staff shortages and had to wait 24 hours to be taken to hospital after expressing that I had reduced fetal movements. I had to have a gestational diabetes blood test 3 times which I had to fast for because an officer collected me for movement in the prison and refused to let the midwife do the second blood test. My call bell was ignored for hours whilst in labour and the process of getting me to the hospital was nothing short of a shambles with an ambulance having to wait an hour for a security check. This also happened when I was on the MBU and my son became very poorly and ended up in intensive care. I had poor nutrition and lost weight as the food made me feel physically sick and fruit and vegetables were rare. I was given a vitamin D supplement by the midwife as I wasn't getting any daylight as I stayed in my cell due to safety concerns of living in a volatile situation where there can be violence and altercations.

If a community or suspended sentence had been considered, I feel that I would have had a much safer and less stressful pregnancy, birth and start to motherhood. I struggle to remember the first year of my son's life and some of his milestones as it was such a stressful and traumatic time in my life.

I could have had my son in the community and been able to have much quicker and easier access to healthcare and all the things he needed. He had respiratory illnesses when young and now has asthma. I had to ask a nursery worker to book him a doctor's appointment and when I had said he needed to go to hospital as he was very poorly, they told me the procedure was that he had to go to the doctors first and after speaking to a doctor, the doctor sent an ambulance to the prison and my son ended up in ICU for 3 days with a very low oxygen level. My son has also recently been diagnosed with ADHD which can be linked to stress in pregnancy which Dr Laura Abbott shows in some research she has done involving pregnant women in prison. I feel like prison has forever changed mine and my son's life in a negative way and he will have these conditions forever and I will always carry the guilt of having him in that situation and that has had a long-term effect on my mental health.

As in my case, I was a first-time offender and it was the first time I had been arrested. I really wish I would have been given a chance to do my sentence in the community and been able to give my son a better start in life. He wasn't a prisoner and an innocent child and didn't deserve to be in an unsafe environment that will forever impact his life. My hope is that judges and the sentencing council will think of the long term impacts of sending pregnant women and new mothers to prison and realise the unsafe environments that they are sending these women into.

On the topic of electronic tag and probation, I think these need to be monitored by someone that has an understanding of the challenges of motherhood as I encountered two very bad examples of this. The first being when I was bailed awaiting sentencing and my 8-week-old baby had to have emergency surgery for a hernia, I notified probation and called the operator on the tag box and emailed the manager proof of my sons hospital admittance and that I would be staying overnight at the hospital and would only be at that address and they continuously called the tag box and my mother spoke to them and they were very intimidating and sent the police to my mother's address to look for me and on arrival back home I had to leave my son recovering from surgery and go to a police station to explain the situation again not knowing if I would be recalled to prison.

The other issue I had was a probation officer that had no empathy for my situation of leaving prison as a single mother with a young child and no childcare. My first probation officer was understanding and had moved me to telephone contact but the second was adamant I must attend the office in person and had threatened to recall me even though children are prohibited from being in a probation office setting, so I stood outside the office with my young son in his pushchair and pressed the buzzer to which she refused to come out. She also made me attend appointments past my license date and when I challenged this was threatened with a recall. My personal opinion is that this could be addressed by better training and understanding and specific POs for pregnant women and new mothers in contact with the justice system. I also think projects like Hope Street are an amazing example of community sentencing outside of a prison setting.

Olivia's experience

In total I served 3 months inside a category B prison and a further 3 months on probation upon release. The judge in the sentencing hearing honoured my request of keeping my pregnancy silent and it was not stated to the court room. This was the only consideration made. I was 7 weeks pregnant at the time and I wasn't asked any questions, given any advice/mitigation or even considered for an alternative sentence. My barrister and the prosecution were looking at a community sentence or possible suspended due to it being my first offence and the nature of the evidence. The judge elevated this to custodial knowing I would be spending the first critical months of pregnancy inside a prison, with lack of healthcare, family and support. For a short sentence I don't feel she considered any vulnerabilities or needs whatsoever.

Upon entering prison I felt like I was going to lose my baby. The fear, trepidation and stress stopped me eating for 5 days when I arrived. My anti-depressant medication was stopped immediately and I suffered the withdrawals and mental health complications of that. It took 2 weeks to see a doctor and 4 weeks to see a midwife. I had no support, no expertise and no medical access. 2 months into my sentence I experienced a bleed and panicked, asking the guard on duty to call for help. He acted straight away but the nurse arrived an hour later. That hour was spent feeling sick with worry and anxiety that something was happening to my baby and nobody was here to act. Trapped behind bars unable to seek help myself and at the mercy of prison healthcare with zero urgency. I was in panic mode and when the nurse eventually arrived, she asked to examine me with the door to my cell open. The wing was on recreational time so inmates were wandering and there were male guards on duty. Fortunately the guard who called for help stood outside my cell door as it was pulled over for my dignity.

The food wasn't nourishing and it was rare to have a meal with balanced nutrients. I was given folic acid and no other vitamins to support throughout these months of a bad diet.

I was entitled to 2 mattresses and it was only via another pregnant prisoner 2 months into my sentence I found out and had to ask for this. When it was delivered to my cell, it was thrown on the floor and nobody offered to help put it on the bed. When I left, I was made to carry heavy bags from the wing through to the prison reception, downstairs and a long walk. I had asked for help and was told no.

I applied for many jobs and was given the role of wing cleaner - a job I specifically said I didn't want to do. As a pregnant woman around chemicals and communal toilets it wasn't risk free.

My first scan was in the local hospital and I was put in handcuffs. People stared and made inappropriate comments. My bloods weren't able to be done so I had to wait another month. The important healthcare I needed for me and my baby wasn't a priority.

Having been given a community order or suspended sentence would have meant I had access to efficient emergency care. The support of family and medical professionals and not experiencing extreme stress having my first scan in handcuffs, wondering if there would be a heartbeat after the trauma I'd been through. I would have had access to better food choices, supplements and been able to get outside to exercise and see sunlight for more than 30 minutes a day. My mental health would have remained stable and manageable having family and friends within the community to lean on.

I am fortunate to have had a strong family support unit but I know many women don't have that when swept up into crime. Women's centres are crucial in providing a safe space and feeding into other lines of support such as food banks, housing and healthcare including mental health needs. Each woman individually needs to be supported and ensured she has a roof over her head, a means to eat and access to mental health support. Without any of these, women are being left to struggle and the cycle repeats leading them back into crime because they have no other way to survive.

Regardless of the years that have passed, the impact of spending that time in a prison has caused long term trauma. I have had PTSD therapy, relied on

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medication for anxiety and depression and the opportunities for finding jobs have been slashed in half. My daughter doesn't know as she is still young but one day I will have to tell her about what happened and why.

Seema's experience

I was wrongfully convicted, in the Post Office scandal, and sent to prison when I was 8 weeks pregnant. I didn't even take any bags to court because I never expected to go to prison. I had to serve four months in prison and four on license.

When I was sentenced, the judge said that I had gotten pregnant to avoid imprisonment. That made me feel really really sad because I have PCOS and it was difficult for me to conceive, and me and my husband had been trying for a baby for the last eight years. I was so sad because I knew I was sent to prison for a crime I never committed and it wasn't my baby's fault at all. We had wanted a baby the whole time and the whole family couldn't enjoy the pregnancy.

It was actually my eldest son's birthday on the day of my sentencing. I had promised him that I'd be cooking his favourite curry that evening. He was so angry at me when I wasn't there for him that night. My husband had to tell him that I was pregnant, so had gone to a special place to be looked after.

In prison, if I wasn't pregnant I would have killed myself. I was so scared for my baby's health and I was scared we wouldn't get out of there alive. The hygiene inside prison was so bad. When I used to go to the phone booth to call home, there was blood on the phone. I had a bad experience with the doctor there.

Healthcare in prison was terrible. One time, I had sharp pains and a temperature, and I was complaining, and I wanted to see a doctor. I was in so much pain I was struggling to walk but nobody would come and see me in my cell. So I went to healthcare, and the doctor, without even assessing me, gave me some medication. I felt so insulted, I asked, do you even know that I'm pregnant? I was being prescribed antibiotics and he didn't even know I was pregnant. I felt like even doctors thought because I was in there, I'd done something wrong.

The midwife at one point thought there might be foetal abnormalities and I had to have blood tests where she had to retrieve some fluid from my womb. I was so worried. I asked if my husband could be there, and they said he couldn't be. Instead, I was taken to hospital and cuffed to an officer during the test. I was in a scary situation and so alone.

Food was terrible and not suitable for a pregnant woman. I had so many cravings, especially for Indian curries, and I couldn't get that. The only option they served was halal meat, which I don't eat, and they wouldn't let my husband bring in food for me. The only extra food I got while pregnant was a small carton of milk and a piece of fruit. I often stayed hungry.

The isolation was horrible. I couldn't enjoy any part of my pregnancy. The whole family had been waiting for this pregnancy for so long, and my eldest didn't

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understand what was happening at all. I was so worried about what might happen to me, whether someone would harm me. At one point, they moved me into a cell that was filthy and had urine all over the floor and mattress. And it was lock up time, so all I could do is stand in the corner for an hour and then wait to be able to find cleaning products to clean it myself.

The bed wasn't comfortable and there wasn't any special mattress for pregnancy.

When I was released on tag, it was spring. I was pregnant and warm, and I had to cover up my ankle because I was so ashamed of it, and had to hide it from my son the whole time. I felt so scared that if I did anything wrong they'd put me back in prison straight away.

I was worried about curfew time and worried my waters could break after 9pm, and I would be in breach of my license if I went to hospital. I was just hoping that I'd go into labour in my non-curfew time. I was so scared of going back to prison.

When I went into labour, it was during my curfew time, and the first thought I had was to call my solicitor before I set off for the hospital to explain. The device at home was beeping and we had to ask my brother in law to stay at home just in case someone from the prison service came so he could explain that I hadn't broken my curfew, but I had to go to the hospital. I felt so embarrassed of my tag during labour. My labour was very long and stressful and I feel like this is because of the conditions my pregnancy was in. I was worried that people in the hospital would be thinking what kind of mother I would be. During labour, the midwives encouraged me to go for a walk and fresh air, but I didn't even want to go outside the hospital because of the tag.

On the whole, prison is just never going to be a safe environment for a pregnant woman. It's not safe for anyone. You're vulnerable already when you're pregnant. And when you're feeling sad, you have emotional instability anyway, and there's no counselling or anything to support you. They gave me a person who was a prisoner to speak to. There wasn't a professional to listen to you. The support I got was from another lady in the prison.

One morning they told me to pack my bags because they were moving me to another prison 4 hours away. I was so stressed that this would mean that my husband would not be able to visit me. He never missed an opportunity to visit me. Thankfully we managed to stop it, but it was so stressful already being pregnant and on my own, being so far away from family would have made it so much harder.

I was wrongfully convicted, so should never have been in prison anyway. But if I had been kept in the community it would have been so much more manageable because pregnant women have so many needs, and you have so many people around you, and your family, to help you with them. Especially food cravings. And healthcare.

The whole experience has had a long lasting effect. Even now, sometimes I think that I can't go and put the bins outside because I have a tag on. I get triggered. And then I have to convince myself that I'm okay. I was in prison 13 years ago now, but it still affects me to this day. I wish I could erase the prison memories but I can't. Prison breaks families down, the stress is not easy. From what I've seen, they fill prisons with the wrong types of people.

Chiara (anonymous)

I was facing a minimum sentence and I pleaded guilty at magistrates because the judge told me that I would get time off. The journey to prison was really scary and I was at first put in a house block with a lot of drug addicts.

The food inside the prison was terrible. I had cold dinners. I remember having sweetcorn and cut up cucumber for dinner. I wanted to eat meat, and I had an appetite during my pregnancy but the chicken wasn't cooked properly. The food was disgusting and the only extra food I got for being pregnant was mouldy yoghurt, apple and two ginger biscuits. I was so hungry. I lived off chocolate bars and crisps that I could get from the canteen.

I was often dehydrated and left in my cell with no water. One time, we had a 48 hour lockdown over a weekend where there were no officers. We were only let out to get our food and had to go straight back to our cells. We couldn't even shower. I remember I didn't even get a chance to get some water and the officer wouldn't let me back out. I had to continuously ring my cell buzzer just to ask for water. That weekend, we were locked in early on Friday, locked in all day Saturday and Sunday, and only let out on Monday. It was insane.

I have sciatica and was in so much pain trying to sleep on the mattresses in prison, they are just PE mats like from primary school. They did have thicker ones for pregnant people but they told me I couldn't have one because I wasn't far along enough in my pregnancy. I ended up getting a pregnancy mattress one week before I left.

It was a prisoner who first told me that I should apply for the mother and baby unit. It wasn't an officer who told me. This was a theme in prison, all the support I got was from the other girls. She helped me with the application. I had to sit a mother and baby board with loads of people. The prison offender manager put in a false report about me where she said I cook drugs, and said she'd got this information from my pre-sentence report. She was talking about someone completely different.

Early on in my pregnancy, I went to the toilet and there was loads of blood. I was laying on the bed in the ambulance tightly cuffed to a prison officer and it was so upsetting and uncomfortable. If there's traffic from prison to the hospital, it's a 30 minute journey. The whole time I was worried I'd lost my baby and I couldn't even tell my mum what was happening. I was cuffed for all of my scans, and for the first two appointments they put long ones on. When I went to the toilet I had to pee with the door open, on a chain. It was so embarrassing and invasive.

There were times where I had to stay in hospital overnight and I was so lonely. I couldn't take my mum. It was so horrible when I had my scans and it was an officer next to me instead of my mum. It's such an intimate moment. I remember being in hospital and the nurse said that she didn't like the way the officer was talking to me.

My pregnancy was high-risk and I was diagnosed with pre-eclampsia. It was so scary. I was in hospital in a room with two officers and I had to keep asking for them to call my mum. I almost wanted to ask a stranger if they would call my mum for me just to tell her that I'm alright. I did finally get permission to call my mum but then she couldn't call me back.

I needed my mum's support throughout my pregnancy. I had never done this before. It was horrible. It was sad because my mum couldn't connect with the baby and she didn't know my mum's voice. We did have phones in our cells, so I could call her whenever I needed to, but I didn't want to call her, I wanted to cuddle her.

The pre-eclampsia was really scary and the midwife said she wanted me to give birth early via c-section at 37 weeks, but I didn't want to because my baby wouldn't be fully developed. I did feel like they want all the pregnant women to give birth early because they want the baby out, for their convenience. The whole thing was a struggle. I knew that if I was in the community, then I'd be able to be monitored and go into labour naturally. Eventually, my sentence was successfully appealed and I was let out. I ended up carrying my baby to full term and she's fully developed.

The mother and baby unit was disgusting. When I moved into my room, there was vomit on the wall. Another woman with a baby on the unit helped me and gave me cleaning products. Inside the unit, all the women were depressed and the kids were miserable. The officers on the unit were also really bitchy. I remember on my first evening, they said to me "the girls don't like it when a new girl joins", but actually it was fine. In reality, all the support I got in prison was from the other women in the prison.

I'm so glad that I was able to get a suspended sentence. It meant I could get more support from my family at the end of my pregnancy and with my newborn baby. It means my baby knows her family, and that she eats fresh food. In the prison there was only canned and readymade food. I don't want to feed my kid chicken nuggets all the time. The fruit they gave us was mouldy. If I had my baby in there she wouldn't be eating right.

My baby is so happy being outside and I can be a better mum to her because I'm supported with my loved ones around me. And when I need a break, she's with

family, not in a prison nursery where as soon as she starts crying she gets handed back to me. If I want to take her to the park or to a museum, I can, she's not going to be locked in a room. There's no stimulation for a baby's development in prison. I remember there being an outbreak of foot and mouth in the MBU, it was horrible.

My mental health suffered in prison, especially when I was alone in my room in the MBU. When I needed fresh air, I couldn't get it, and it felt like the officers were always breathing down my neck.

I think if I'd had my baby in prison I would have had to give her to my mum, just because I wouldn't have wanted her to experience that, and I don't think I could raise her by myself inside that place.

Now I'm on a suspended sentence, which is so much better. There were some administrative issues though. My probation officer got changed twice and one didn't update my phone number, so the new one was calling the old number and I got sanctioned. It was so stressful.

I have PTSD from prison. When the fire alarm batteries are going, and it bleeps, it reminds me of the alarm in my cell. I still feel shaken up when I hear house keys and doors slamming. Sometimes I get dreams that I'm still in prison and when I wake up, I'm so glad that I'm home. I just wish I hadn't had to go through it all being pregnant. My emotions were already heightened.

I wish I could have done unpaid work, or done a course, instead of just wasting my time inside prison and only being allowed out of my cell for four hours a day.