

## **Health and Sport Committee – Health and Sport Committee – Health and Social Care in Prison**

### **General comments**

Children in Scotland is Scotland's national agency for organisations and professionals working with children, young people and their families. It exists to identify and promote the interests of children and their families and to ensure that policies and services and other provisions are of the highest possible quality and are able to meet the needs of a diverse society. Our membership is made up of over 600 organisations and individuals working in the public, private and voluntary sectors in a variety of fields including education, health, social care and childcare.

This response will relate to the healthcare needs of young people who are in prison and the prison healthcare system in young offender's institutes highlighting their specific set of healthcare needs.

### **What do you consider are the current pressures on health and social care provision in prisons?**

Children in Scotland consider the main pressure on health and social care provision for young people in prisons to be mainly in relation to health issues that the young people are already facing when they come into contact with the prison system. There is a link between deprivation and imprisonment for young people in Scotland and as such we expect the main pressures to be ones that are also linked to deprivation, such as mental health issues (McAra and McVie, 2010, Princes Trust, 2017).

This appears to be a particular pressure in the Scottish prison system at the moment as the RCN have identified a gap in the numbers of support staff for mental health for young people in the prison health care system (RCN, 2015).

### **To what extent do you believe that health inequalities could be addressed in the prison healthcare system?**

Imprisonment in Scotland is still highly correlated with deprivation, an indicator that is also linked to experiencing worse health outcomes. Children in Scotland would argue that these inequalities in health can be seen as a manifestation of various factors that impact upon a person's health, the WHO define these as a

combination of health system, societal, community and individual factors (WHO, 2014).

Children in Scotland would argue that the most effective route that the prison health care system could take to reduce health inequalities would be to focus on the structural causes of health inequalities, that is the societal and community based causes. This is because health outcomes are inextricably linked to ones position on the social gradient, and that health outcomes are ultimately structural as much as individual.

With this in mind Children in Scotland would suggest treating health issues as more than simply a medical issue and instead tackling the wider factors that contribute to ill health and health inequalities, such as experiences of discrimination, violence, abuse and low educational attainment (Parkinson, 2012).

A University of Glasgow report showed that 25% of young people in prisons have no qualifications (SCCJR, 2015). A lack of qualifications is clearly a barrier to employment and both are linked to negative health and wellbeing outcomes. In promoting employment through education in the prison system would be expected to contribute to a reduction in health inequalities (Bambra et al, 2009).

Additionally, Children in Scotland believes additional mental health support, incorporating elements of peer support, to be vital in supporting improvements in health and wellbeing amongst young offenders.

### **What are the current barriers to using the prison healthcare system/ improve the health outcomes of the prison population?**

One barrier to improving the health outcomes young people in prisons appears to be the emphasis on security. In a 2016 report from Polmont YOI there is a suggestion that recreation time, fresh air and communal dining are all being restricted to increase security (HM Prisons, 2016). We would suggest that all of these are vital for good health and wellbeing, particularly in relation to mental health and that to improve young peoples health outcomes in prisons these should all be promoted.

The report also suggested that many inmates were not taking part in activities, Children in Scotland would suggest that involving young people as much as possible in the planning of recreational activities would promote engagement with these and have a variety of benefits which improve the health outcomes of the prison population (HM Prisons, 2016).

### **What do you think the main pressures will be in the next 15 years?**

Increased deprivation and local authority budget cuts which impact on education and also wider service provision may impact on increase crime rates and as such potentially lead to an increase in the number of people who come into contact with the prison healthcare system.

We would also expect these issues to exacerbate many of the health care needs that young people in the prison system are currently experiencing. The prison system then will likely still be facing pressure in relation to young peoples mental health services among others.

### **Can you identify potential improvements to current services?**

Children in Scotland, in line with the RCN, would suggest that better data collection to support the understanding of the health needs of the prison population would improve current services. We would argue that specific models of data collection that are able to collect accurate data from young people are essential to ensure the health care needs of young people are met.

Greater engagement with the young people who are in the prison system would allow them to identify the sorts of services that they feel are appropriate and would benefit their health to the greatest extent. Young people have identified that tailored services, which are designed for them and with them, are key, particularly in relation to their mental health (SYP, 2015).

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