

Chapter nine

Being in prison

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When I was 19 years old, I went to prison for a driving offence. This wasn't my first time in prison, however this time I was pregnant with my first child and was given a 6-month custodial sentence for driving whilst disqualified.

During my pregnancy I had to be taken to the local maternity hospital in Bristol for my scans. This was, to date, up there with one of my most shameful, harrowing and humiliating experiences. When arriving at the hospital, both my wrists were handcuffed and then I was handcuffed with a chain attached to a prison guard with a second guard escorting us. We presented to the reception at the hospital. No private room had been arranged, nor even discussed and I was seated in the main waiting area of the maternity clinic where it was packed with families. Children playing in the play area were beckoned by their parents and not allowed to play. The scene in front of them, I understand was quite disturbing and for all they knew I was a serial killer. The looks of horror and disgust, especially as I was also pregnant was so intense. I felt humiliated and ashamed and quite honestly felt I had no right to be a parent in that moment.

During the scan, which arguably was one of the most precious moments of my life, I was handcuffed to the bed and spoken to in such a matter-of-fact way, no compassion, or willingness to understand what I was going through was evident, all I felt was judged.

My mum and my sister had rightfully contacted the prison on numerous occasions and advised that they wanted to be with me during my scans. This was rejected and none of us were ever informed when my scans would be due to the risk of me absconding. This risk was not based on any evidence or previous intel and was just an assumption. My family were not able to be part of such a life changing period of time.

Luckily for me, on my second scan after hearing my trauma of the first experience, my mum and sister, who are very strong willed, waited at the prison all day for several days waiting for the transportation car to pick me up due to them having a rough idea what week the scan was due. They followed the car to the hospital and when they arrived and saw me sat in the usual waiting area full of people, demanded that I was treated appropriately and given some privacy to wait. I can't tell you how grateful I was and am to this day for their love and support and that they had to do what they did to ensure I was treated like a human being and not a convict on display to be humiliated.

Pregnant women and prison

In May 2022, there were 3,221 women in prison in England and Wales (Ministry of Justice May population bulletin 2022). About 600 pregnant women enter a UK prison each year and about 50 are in prison at any one time (Epstein et al. 2021).

Concern continues to be raised regarding the quality of care received by pregnant women whilst in prison. 1 in 5 appointments with midwives and 40% of outpatient appointments are missed (Abbott 2022) often because prison staff are not available to take women to the appointment. Women are locked in their cells at night when there are no on-site midwives or doctors. This is despite women in prison being more likely to have high risk pregnancies (Abbott 2022). Analysis in 2017-18 by the Nuffield Trust found that roughly one in ten pregnant women gave birth either in their prison cell or on route to hospital.

Epstein et al. (2022) argue that imprisonment for pregnant women is not necessary and highlight that it is no longer permitted in 11 other countries where alternatives including house arrest, electronic monitoring and probation are used instead.

During the sentence my family were able to visit me in prison however there were no specialist staff such as midwives or health visitors available to talk to. So, whilst pregnant in prison with my first child at the age of 19, I had no clue what was happening to me and no one to talk to outside of my family through usual visiting times or phone calls with limited spends.

During this period my dad was in hospital terminally ill with HIV that had now become AIDS. At the beginning of the sentence, I was advised that he would be unlikely to survive 24 hours and so anxiously waited everyday to hear the rattling of the chaplain's keys to inform me he had died. Thankfully my dad held on and on the day of release from prison, my mum and sister picked me up and took me straight to the hospital. I managed to spend 20 minutes with him. He knew that both the baby and I were safe and well and then when I left that day, he died shortly after.

When sentenced in prison, you can only spend a small set amount of money per week on canteen, phone etc. This was not increased to support me with additional phone credit to ease my stress and anxiety during my time of pregnancy, with my dad dying, nor for me to buy additional food that I could keep down. My cravings and appetite had changed so much that I was struggling to eat many food types that the prison provided, and they were unable to change this for me.

I do appreciate I had committed a crime and needed to take full responsibility for this. I was in prison for a driving whilst disqualified offense, and whilst I understand this could have been devastating to someone if I had crashed, no direct harm was caused to anyone.

Although pregnant, I felt like I had lost my right to be a parent. This was a direct result of my environment and the people around me. The systemic messaging was that I had no rights. No midwives, health visitors, no social workers, no family support workers, absolutely no acknowledgement by the prison system that I was pregnant. The system simply doesn't acknowledge the impact of this and doesn't provide the resources to support you through this process. This was compounded by a lack of empathy and compassion by any of the staff in the prison or hospital. I felt judged, alone, ashamed, hopeless and unsupported to change. How was I supposed to change if there was no one to support and guide me to do so?

Women in prison

Over half of women in prison have experienced emotional, physical or sexual abuse as a child; around 1 in 3 have experienced being in care as a child; almost 2 in 3 report being survivors of domestic abuse; 7 out of 10 have mental ill health. Approximately 3 in 5 women in prison are mothers with children under the age of 18. 95% of children have to leave their own home when their mother goes to prison as the mother is often the primary care giver www.womeninprison.org.uk

Levels of self-harm in the women's prisons reached record levels in 2020. There were 11,988 incidents of self-harm compared to 7,670 in 2016. Women made up 22% of all self-harm incidents in 2020, despite making up only 4% of the prison population (Prison Reform Trust 2021). Written evidence from the National Women's Prisons Health and Social Care Review in 2021, reported that high numbers of women in prison have complex histories of trauma, which are often left undiagnosed and untreated.

More than 3 out of 5 women are sent to prison for sentences less than six months (Ministry of Justice 2022) most commonly for theft. In the majority of cases, they are considered low risk to society.

Chief Executive of the national charity, Women in Prison, Kate Paradine, said: "There is another way – when women are supported in the community, they have better access to care and can tackle the issues that sweep them into crime in the first place, like trauma, domestic abuse and poverty." (Guardian 16/01/2022)

The use of community sentences however has dropped by two-thirds since 2010 (Prison Reform Trust 2021)

For the first year of my son's life after my release, I did my best to be a great mum and had an incredible bond with my son. However, it was apparent that with all the will in the world, my addiction was stronger than anything and I again started to use crack and heroin. For some time, I managed to keep everything functioning with the support of my family, who at this time had no idea of my drug use. When my son was approximately two years old, my mum and sister moved to Australia. As my addiction progressed, so did my criminality which again resulted in me being put in prison, again for driving whilst disqualified.

When I was arrested, I was in Devon. I had my son with me, he was about 3 years old at this time. The police advised me that I wouldn't be given bail and that in fact I would be taken to court the following day with a view to remanding me in prison.

My son was taken to my boyfriend's parents' house (which I did not know at the time) who looked after him for a few days whilst my mum arranged to fly over from Australia to pick him up and take him back with her.

When I got to prison it was a nightmare to find out what was happening with my son. Due to my family being in Australia, I wasn't allowed to call there with my one phone call. I was not informed where my son was until I managed to get my numbers added to my phone account

which took four days. I was then able to call Australia and was advised that my mum was on route to the UK to collect my son and that he was safe with my boyfriends' parents.

When my mum arrived and collected my son, she booked a prison visit and brought him to see me just before her flight back to Australia with him. It was a hard visit with no clue when I would see him again, however I knew he was in the best place. During this sentence there again was no additional arrangements to accommodate contact with the time differences which rarely enabled phone calls due to lock up times. Again, it is so hard to be in this environment and not have people to support you through this process.

When I came out of prison this time, my family made it clear that I needed to do some work on myself prior to them being willing to let me have my son return to me. During the next few years, I made many attempts at being abstinent and in recovery, which enabled me to have my son return to me. However, these attempts seemed short lived as I continued to have co-dependent, unhealthy relationships with no clue that this was a reoccurring cycle.

Women and substance use

Research has consistently shown that women experience drug use differently to men. Women are more likely to be introduced to drugs by a partner, to start using drugs as a coping mechanism, rather than recreationally, and they progress to problematic use more quickly (Tuchman 2010)

In a study by Cranfield et al. (2021:1), the risk to women was greater if they had children. They found that mothers in their study 'were more likely to be young, experience housing problems, use opioids and/or crack-cocaine in the past 28 days and experience lifetime domestic violence victimizations'.

Intimate partner violence has been shown to be a predictor of problematic drug use in women (Ogden et al. 2021) as has traumatic stress, in particular high impact trauma such as childhood sexual violence, physical abuse, and neglect (Hien et al. 2005).

Despite this, women are significantly under-represented in treatment services. This is often seen to be due to a lack of services designed and centred on their needs (We are with you 2021) and women who are mothers, fearing that their children will be removed if they disclose their drug use (Canfield et al. 2021).

Evidence shows however that those in treatment do better than those who are not. 'Drug treatment protects families. It helps parents to stabilise their lives and look after children better' (NTA 2012:2).

My last prison sentence was in 2008/2009, when I was convicted of possession of class A drugs. I had just had my second son who had been removed from me at three months old and was now in foster care. My eldest son was now living with my aunty and uncle, and I was not allowed to have any contact with him at this time due to my drug use. My youngest son's dad was extremely abusive and quite honestly, I was terrified of him. My case was being held at MARAC and prison seemed like a safe place to be and a welcome relief.

MARAC

A MARAC is a Multi-Agency Risk Assessment Conference where information is shared on the highest risk domestic abuse cases. Key services including health, child protection, probation, domestic violence and police share information and agree an action plan to safeguard the victim.

www.safelives.org.uk

During this period court proceedings were taking place to look at the future for my youngest son. Due to my family living in Australia and the proposal of taking him out the country, this added complications to the process. His dad did not agree to this and instead decided that he would fight for custody. In the beginning he tried this himself, and then once he realised he would not be successful, bullied his mother to try and gain custody.

During this process I was clearly having a mental breakdown. I didn't ever know what was going on. I was so terrified that his dad would find a way to have him and that my son would end up dead due to his dad's violent nature. I felt so alone and unable to manage with limited contact with my family in Australia and no one to talk to, to advocate, or to liaise with children's social care. I wholeheartedly accepted that I could not protect my child and that he shouldn't be with me however was not included or communicated with effectively to enable me to manage my fears that were crippling me. I was losing my mind and felt broken, and no one seemed to notice or care. The prison's response to this was to give me more medication to sedate me. No one ever came to talk to me to even ask what I needed or to explore ways to support me. I just needed someone to communicate what was happening and to reassure me that my son would be protected.

There were points that I would kick off in frustration due to the lack of communication. I didn't know what was going on with my son, the court proceedings, if I would see him, or what the processes were. This was all whilst only being a few months since giving birth. My body and hormones were still trying to settle and there was no thought or consideration to what my needs were. On a couple of occasions when I kicked off by slamming doors or shouting at officers, the response to this was to give me a punishment by putting me on basic. This means that you are looked in your cell for 23 hours a day, with your TV removed and left on your own with just your thinking and emotions to deal with. I do not understand how this feels a viable response to my frustrated behaviour because of the trauma I was feeling.

Support for women in prison

In 2018, the government published Gender Specific Standards to Improve Health and Wellbeing for Women in Prison in England (Public Health England) and the Female Offender Strategy (Ministry of Justice) for England And Wales.

The Standards highlighted the need for a system approach. This included:

- Preventing offending by tackling the wider determinants of health and supporting upstream prevention of substance misuse, violence, unemployment and exclusion from school

- Ensuring that while in prison women have access to high quality health and care services to support improvements to their mental health, substance misuse and general health
- Developing an environment in prison which gives opportunities for women to improve their health by improving nutrition and encouraging participation in physical activity
- Giving adequate support to women who have children, within the prison in mother and baby units, and those who are separated from their children
- Ensuring that support is available for women who leave prison in terms of housing, training and employment opportunities, appropriate access to social welfare and other benefits if applicable, continuation of treatment and referral into appropriate community services

In the Female Offender Strategy, the government highlighted the need for early intervention, community-based solutions and the need for more effective and decent custody for women who do have to be in prison.

Three years on, The Prison Reform Trust reported in 2021 that 'Progress has been slow—only 31 of 65 commitments in the Female Offender Strategy have been fully achieved. Where commitments have been met through publication of guidance or instructions there is little or no information on whether they are having the desired impact. The strategy is not backed up by clear and comprehensive measures of success'

The three-day court hearing regarding the care of my son, was set for two days after my release from prison, which I would attend. There was no preparation for this. I had no idea what to expect. I was terrified to see my ex there and again no one to talk this through with.

My youngest son's social worker did her best by me and in fact bought my son up to visit me on one occasion. I felt that although she was clearly there to ensure my son was protected and his best interests were the priority, she showed me compassion and understanding albeit she was very honest, which at times was hard. I still have a special place in my heart for this lady. She did everything in her power to protect my son when I couldn't, even through especially challenging times with his father who often intimidated and made threats to anyone who tried to get in his way. This included her.

Was the custodial sentence proportionate? In light of the impact on myself and more importantly my children, I would say NO. It compounded trauma with trauma. There was certainly no rehabilitation or therapy. What there was were more traumatic experiences that reaffirmed to me I was a rubbish person that would never change and that my children would be better off without me. Hopeless.

I grew up in a household with a dad that was a drug addict and alcoholic that died of AIDS as a result of his active addiction and spent all his adult life in and out of prison and a mum who had undiagnosed (at the time) bipolar disorder. Whilst I knew that I was loved and my mum did an incredible job as a single parent, my childhood was dysfunctional. How was I

supposed to know how to change a spiralling negative pattern of behaviour without the support and guidance to do so. I was a child having a child and not knowing what to do. I had gone down a destructive path since I was 13 years of age and needed help to change the course before I dragged my child/children down the same path. I always remember thinking *“I love my dad so much, but I will never do what he has done to me, to my children when I have them”* Well I did...

The system in my view is punitive and archaic. As a woman in prison, I did not feel that there was adequate support for mothers and that in fact there is an under tone of “you gave up your right to be a mother when you committed an offense” attitude. There was no support to help you navigate the trauma of losing children, either through family or court proceedings. There was a family day offered twice a year that you could apply for, but it wasn’t guaranteed. On top of this, there was no provision to rehabilitate from specific traumas like domestic abuse including sexual abuse. Instead, what was available was to be prescribed multiple antidepressant and antipsychotic medications to keep us sedated instead of using the time to address some of these issues. During my time in prison, I managed to get myself addicted to various medications that the prison prescribed to me. I believed that I needed these to live. This was just not the case and in fact since being in recovery for coming up 11 years, I have not needed to take any medication to manage my emotions or mental wellbeing.

I didn’t grow up aspiring to be a drug addict or to go to prison. I was a gymnast that had a back accident. My life in prison as a drug addict who lost her children and caused harm to all her loved ones, wasn’t my dream. I believe it was a result of going down a wrong path as a teenager and being unable to find the way to turn it around.

Children experiencing parental substance use

Children experiencing parental substance use are at higher risk of developing substance use disorders themselves (Biederman et al. 2000, Meuleweater et al. 2022).

Meuleweater et al. (2022) highlighted the central role of feelings of loneliness, isolation and belonging in both childhood and adulthood. Three themes were identified from their analysis:

- 1) loneliness and childhood trauma and neglect
- 2) stigma and the self
- 3) the role of social connection in substance use and recovery.

They suggest that experience of stigma as a child regarding a substance using parent, can contribute to a lack of positive self-esteem and interpersonal difficulties for children for which substance use can be seen as a solution.

I relate to all three of these themes:

Loneliness and childhood trauma and neglect

Loneliness and lack of connection to anyone was a massive part of my childhood. I didn’t actually feel a sense of connection with myself let alone others. Due to the lack of structure

or routine in the family home, I was never sure when my parents would be around, what the mood would be when they were, (this was extremely volatile at times and unpredictable), who they would have with them and if this would be a positive experience or a negative one.

I was always aware from a very young age not to mention what was going on at home with anyone as this could cause problems if teachers, social workers etc. found out. I definitely felt feelings of shame and embarrassment about what my family life looked like and longed for a “normal family home”. Presence, consistency and routine.

I experienced physical abuse and emotional and material neglect. I am able to see now that my parents loved me greatly and were just doing the best that they could with what they had and in turn see the similarities with my experiences and the experiences of my own children. Whilst I was not physically abusive, I too neglected my children emotionally.

I also see how the feelings of abandonment and rejection played out in my life. I put a protective wall around me to not be vulnerable as everyone will leave me and let me down anyway.

Stigma and the Self:

During my childhood it was normal to lie to everyone, sometimes to hide what was going on but also it was normal to lie for my parents. It was normalised to lie and to live in a false reality. The feelings of low self-worth go back as far as I remember, blaming myself for my dad often going missing for weeks, months and at times years with no idea why. My mum either being in bed for days or out partying for days.

The shame of how poor we were and the conditions we were living in, dirty clothes, poor hygiene etc. massively impacted how I felt about myself. As I got older, into my early teenage years, I felt comfortable to seek out other people that were not living a “normal family life”. This way I didn't feel as embarrassed and ashamed. I gravitated to people drinking, taking drugs and committing crimes. When I was around them, I didn't feel different. I felt accepted and included. There was, for the first time, a sense of connection and community that I was part of.

The Role of Social Connection in Substance Use and Recovery:

Drugs and alcohol in the home were part of the norm in my childhood and the risk associated with that were also part of normal life therefore I didn't understand the severity of them.

Whilst my mum predominantly had alcohol, cannabis and at times cocaine in the house due to her partying lifestyle, my dad was an alcoholic and an IV heroin and crack cocaine user. I have many memories of seeing drugs in his house. My dad also sold drugs, so drug users were always about. They often bought me sweets and spoilt me. I felt cared for by loads of people in the drug using community so to me I felt like I was the lucky one. When I consider how I felt about this and how normalised it all was, I realise that I felt like my dad's life was

like the bright lights of Las Vegas. It was fun, exciting and I didn't feel isolated or alone. It was an attractive proposition to me. This seems insane, especially in light of my dad having HIV and essentially what was then a death sentence as a result of his drug use.

Social exclusion

I don't feel socially excluded now I am in recovery however it would be easy for people with my experiences to feel socially excluded. I think that due to my passion and drive to challenge oppression and to promote positive change, I haven't allowed the system to exclude me. I am lucky that I now work in drug and alcohol treatment services, who welcome people with lived experiences. I do feel that other areas of the health and social care sector may not be so inclusive.

I believe that having had experience of adversity in childhood has made me very driven. Often people like myself can be high achievers, that never feeling enough so are always looking at "what next". It's almost like proving to yourself you are good enough.

Throughout my career, I have always had to disclose my convictions due to the work I do. For every position I have been recruited to, I have had to go through a risk assessment with my manager, going through each offence and describing why I did it and how I feel about it now. This is quite a humiliating process as I have 58 convictions and have to discuss them all. I do however understand that working with vulnerable people requires robust safeguards to be in place so agree that this process needs to be done.

Today

Today I am 11 years abstinent from all mood/mind altering substances. I have both of my children in my life and am a fantastic parent. I am a manager of a drug and alcohol project and spend much of my time both inside and outside of work trying to challenge social exclusion to inform change. I am passionate about positive change and a system that supports and promotes this.

I would like to say that I managed this change as a result of the criminal justice system, unfortunately I didn't.

The change started when a drug and alcohol worker in the community had so much belief and faith in me, that I could do anything I wanted to, when I was absolutely hopeless. That worker would talk me through all my amazing attributes and look at what areas I was really struggling with and what support I needed. I felt supported, guided, understood. I was told it was ok, I had been ill and that it wasn't because I was a bad person. I was told that they would walk beside me on the long road of recovery and that change was hard but achievable, and that I was worth it.

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