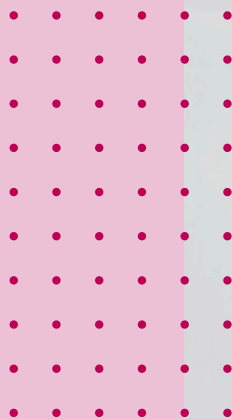




supporting the voluntary
sector working in the
criminal justice system

CLINKS' RESPONSE

The Independent Review of the Prison System - Call for Evidence



Introduction

Clinks is the national infrastructure organisation for the voluntary sector working in criminal justice in England and Wales and is the current holder of the HMPPS/MoJ infrastructure grant. We support, promote and represent over 500 members and advocate on behalf of the estimated 1700 organisations working with people involved in the criminal justice system.

The National Criminal Justice Arts Alliance (NCJAA) is embedded in Clinks and is dedicated to promoting, developing, and supporting high-quality arts and creative practice in criminal justice settings. By using the expertise and evidence from arts organisations and practitioners, Clinks helps inform government policy, influence commissioners, and shift public perceptions about the vital role of the arts in criminal justice.

In creating our response, we consulted with over 100 organisations working or delivering services in prisons across England and Wales. We held two roundtables to leverage the expertise of attendees, as well as collecting additional written responses. We have also consulted with the Research Reference Group and the Advisory Group within the NCJAA and feature a specific, arts-based perspective in our response under question 10. We also reference the work of additional voluntary sector organisations throughout our response.

For the purposes of this response, we have adapted the wording of some questions from the original call for evidence so that our collective submission can more effectively capture and reflect the realities experienced by voluntary sector organisations working in this space. To organise the response clearly, we have combined questions 4 and 5, questions 9 and 10, questions 8, 11 and 12, questions 15 and 16, and questions 17 and 18 from the call for evidence. We have also incorporated our responses to questions 20 and 21 into the body of the submission.

Summary

Across our engagement with the sector, there was a strong consensus that prisons should focus primarily on rehabilitation, resettlement and reducing reoffending, with public protection achieved through helping people successfully rebuild their lives and return to their communities. Participants emphasised the importance of addressing the underlying causes of offending, including trauma, mental health needs, substance use, social exclusion and lack of opportunity, within safe, decent and humane prison environments.

Overcrowding emerged as the most significant barrier to achieving these outcomes, limiting access to education, treatment, purposeful activity and meaningful support. Organisations also identified fragmented through-the-gate services, lack of continuity between custody and community provision, and inadequate housing on release as major obstacles to successful rehabilitation and reduced reoffending.

There was strong support for more personalised, trauma-informed approaches that recognise the distinct needs of women, older people, neurodivergent people, disabled people and those with complex needs. Participants also stressed the importance of investing in the prison workforce, strengthening relationships between staff and people in prison, and working more closely with voluntary sector and lived-experience organisations.

Education, employment, family support, therapeutic interventions and stable accommodation were consistently identified as the most important factors in supporting rehabilitation. Overall, organisations emphasised that lasting improvements would require long-term, cross-government action that extends beyond the prison system and addresses the wider social, economic and health factors that influence reoffending.

1. What are the top three key outcomes the prison system should deliver?

a. Rehabilitation, resettlement and reducing reoffending

Throughout our engagement with the sector, organisations consistently identified rehabilitation and reducing reoffending as central purposes of the prison system. The goal should be to ensure people leave prison less likely to offend and better equipped to contribute positively to society. Rehabilitative interventions should be incorporated into sentencing planning, available from the outset of a person entering custody, continue through the sentence and transition into effective resettlement planning. Resettlement was highlighted by some participants as a more useful framing than rehabilitation, reflecting the reality that most people will eventually return to society and need support to do so successfully.

To reduce reoffending, prisons should focus resources on supporting people to address the underlying causes of offending, including trauma, adverse childhood experiences, poor mental health, substance use, low literacy and numeracy, social exclusion, and lack of opportunity. They should support the development of hope, confidence, aspirations, self-worth, purpose and positive identity change, recognising these as essential foundations for successful resettlement and reduced reoffending. Participants emphasised that people should not leave prison in a worse condition than when they entered and that rehabilitation should be viewed as a continuous process before, during and after custody

b. Public protection and safer communities

Keeping the public safe was recognised as a core function of prisons. However, organisations consistently stressed that public protection is not achieved through short-term containment alone. Long-term safety depends on purposeful regimes in custody and then by ensuring that people leave custody with stable accommodation, support networks, and skills and opportunities that reduce the likelihood of future offending. Some individuals will require custody because of the risk they present, but rehabilitation and public protection were widely viewed as complementary rather than competing objectives.

c. Safe, decent and humane custody

Lastly, prisons should provide safe, decent, constructive and humane environments. Deprivation of liberty is the punishment; prison conditions themselves should not create additional harm. Prisons should support and, where possible, improve people's mental health, physical health, family relationships, housing prospects and employment prospects. Many groups emphasised trauma-informed and person-centred approaches that recognise the dignity and humanity of people in prison. Participants stressed that dignity, safety and humane treatment are not optional extras but preconditions for effective rehabilitation. Environments that undermine wellbeing, relationships or self-worth make sustained behaviour change significantly harder to achieve and act as a barrier to effective resettlement.

Additional outcomes that the prison should deliver include:

Education, employment and purposeful activity

Prisons should provide access to meaningful education, training, employment, treatment and other purposeful activities that are linked to opportunities after release. Success should be measured not simply by sentence completion but by positive outcomes related to employment, housing stability and reduced reoffending. Participants emphasised the need for realistic employment pathways, including entrepreneurship and self-employment, alongside traditional work opportunities. By creating and properly resourcing these opportunities, the prison can ensure that people have the greatest chance of successfully being resettled into the community.

Individualised and inclusive support

Participants emphasised that support should not be one-size-fits-all. The prison system should recognise and respond to the distinct needs of women, older people, neurodivergent people, people with disabilities, people with mental health needs, and people with complex trauma. Services should be tailored to individuals and delivered at the right time. This requires a stronger response to trauma, mental health needs, neurodiversity and disability across the prison estate, with support that adapts to individual circumstances rather than expecting individuals to fit standardised services.

Consistency and public confidence

There were concerns about inconsistency across the prison estate, resulting in a "postcode lottery" of support and opportunities. Participants called for more consistent standards and outcomes. Several groups also highlighted the need to build public confidence in rehabilitation by challenging misconceptions, improving public understanding of what prisons are for, and demonstrating the links between rehabilitation and public safety.

2. What are the three biggest risks that need to be addressed to support the future of the prison system over the next 5 to 15 years?

a. Continued overcrowding and overuse of custody instead of safe, effective community alternatives

The first major risk is that the prison system remains overcrowded because custody continues to be used too widely, including for people whose needs and risks could be managed more effectively in the community or in specialised health care facilities. Overcrowding undermines almost every part of a prison's ability to rehabilitate people, restricting movement, reducing access to education and treatment, limiting staff engagement and making it harder to run safe, decent and purposeful regimes.

The organisations we spoke to called for a significant reduction in the number of people entering custody, particularly where short sentences, remand, recall or low-level offending are involved. This includes reducing the use of custody for women, where imprisonment can have particularly damaging consequences for children, caring responsibilities, housing and wider family stability. A clearer distinction is needed between cases where custody is genuinely necessary for public protection and cases where better-resourced community provision would be more effective.

Safe and effective community alternatives should therefore be central to the future of the system. These must be sufficiently resourced and developed in partnership with probation, local authorities, health services, voluntary sector organisations and communities. Community-based support can address substance misuse, mental health needs, housing instability, employment barriers and family relationships in a more sustained and individualised way than short periods in custody.

This also requires a gradual shift in public and political understanding of safety, given that sustainable community safety depends not only on containment, but on prevention, repair, accountability, stable relationships and practical support. To help facilitate this shift, organisations highlighted the value of restorative justice, peer-led leadership, mentoring and community partnerships in creating conditions that reduce future harm.

b. Failure to provide effective rehabilitation, treatment and resettlement support

The second major risk is that prisons continue to operate in ways that do not provide the conditions, support and opportunities needed for rehabilitation. Organisations repeatedly argued that prisons should be places where people can address the root causes of offending, build skills and confidence, and prepare for life after release. If people leave prison without adequate resettlement planning, including accommodation, education, training, employment opportunities, treatment, family support or a sense of purpose, the system is more likely to reproduce cycles of offending rather than reduce harm.

Substance misuse is a central part of this risk. Addiction and drug use can drive offending, undermine safety in custody and make rehabilitation significantly harder. Participants described prison drug use as both a symptom and a driver of unsafe, inactive and overcrowded regimes: as activity is restricted and people spend longer periods locked in cells, boredom, fear and poor mental health increase, while access to effective treatment and support is limited.

Addressing this risk requires a strategic focus on drug and alcohol treatment, mental and physical health, wellbeing and the wider foundations of rehabilitation. Services should be fully funded, designed around need and connected to release planning. Participants also stressed that prison healthcare and substance use services should support genuine wellbeing, rather than simply managing immediate symptoms or crises.

This also means recognising the diverse needs of people in prison, including speech, language and communication needs, low literacy, trauma, mental health needs, neurodiversity and disability. Rehabilitation must include access to education, therapy, arts and creative activity, substance misuse support, positive relationships and opportunities to develop new identities, values and networks that support desistance.

c. Weak operational foundations, including staffing, estate, technology and security pressures

The third major risk is that the operational foundations of the prison system remain too weak to support safe, consistent and effective delivery. Participants highlighted risks relating to staffing, prison culture, the condition of the estate, technology, information-sharing, organised crime, drones and other security pressures. These are enabling conditions: when they are weak, prisons struggle to maintain stable regimes, move people safely around the estate, facilitate access to services, identify emerging risks and work effectively with partners.

The workforce is central to these operational foundations. Staffing pressures affect movement around the estate, regime stability, access to education and interventions, the delivery of voluntary sector services and the quality of relationships between staff and people in prison. Participants emphasised that improving staff recruitment, retention, training, wellbeing and culture is essential if prisons are to operate safely and consistently, rather than relying on crisis management and restricted regimes.

The physical and digital infrastructure of prisons also needs to be fit for purpose. Poor estate conditions, limited, suitable space, inadequate technology and weak information-sharing can obstruct healthcare, education, family contact, security, resettlement planning and partnership working. If these foundations are not addressed, prisons will remain vulnerable to instability, inconsistent service delivery and avoidable security pressures, regardless of the quality of individual programmes or policy intentions.

These three risks are mutually reinforcing. Overcrowding and overuse of custody place pressure on staff, buildings and services; unsafe and under-resourced prisons reduce access to rehabilitation; and weak rehabilitation increases the likelihood of reoffending, recall and further pressure on capacity. Addressing them therefore requires a coherent, long-term approach that reduces unnecessary imprisonment, invests in people and services, and places rehabilitation, resettlement and community safety at the centre of prison reform.

3. In the next 5 to 15 years, what are the biggest opportunities to address the risks facing the prison system and improve outcomes?

Participants argued that the current capacity crisis should be treated as a catalyst for long-term reform rather than as a driver for expanding prison capacity. The overarching opportunity, therefore, is to redesign the prison system so that it is explicitly geared towards prevention (in terms of interventions provided before people reach crisis point, thereby preventing any escalation of harm whilst someone is in custody), rehabilitation and effective resettlement into the community. This should be supported by a smaller prison population – that can be achieved through policies aimed at tackling the increasing number of recalls, the significant remand population and reducing the number of older people in prison – and through stronger, better resourced community provision. We provide more details on suggested policies around recalls and remand, below.

Organisations identified several areas within which there are opportunities to improve outcomes across the prison estate:

Reforming release and resettlement processes within prisons

As highlighted in [HM Chief Inspector of Prisons Annual Report 2025-26](#), current pre-release and resettlement planning is often ineffective and, though examples of good practice do exist, there is an inconsistency across the prison estate.

The opportunity is to reform existing processes, including through the already announced review of the Offender Management in Custody (OMiC) model to improve the quality and consistency of pre-release planning. We have previously set out recommendations in our [response to the 2025 Justice Committee inquiry on rehabilitation and resettlement](#), which set out a pathway towards a more accessible and sustained resettlement pathway, starting with early identification of need in custody and following the person into the community. As part of this pathway, there needs to be improve continuity of mental health support and substance use support, where appropriate, alongside access to employment-related and digital skills support.

Through-the-gate provision should be embedded within this pathway so that support is continuous rather than time-limited, with voluntary sector organisations involved early enough to build relationships, coordinate practical arrangements and maintain contact after release. This is particularly important for people with short sentences, complex needs or unpredictable release dates, who are most at risk of falling through gaps in resettlement planning.

Key to a functioning resettlement pathway is ensuring that release planning starts as soon as is practical and involves the range of agencies, both statutory and non-statutory, required to support effective resettlement. Such planning can be operationalised through pre-release boards, which have been established in a number of prisons. We recommend that these boards are rolled out across all resettlement prisons, as we wrote in a 2023-24 Reducing Reoffending Third Sector Advisory Group (RR3) report on [accommodation](#).

These boards would enable:

- Clear responsibility for coordinating support – which agency is responsible and at what stage
- Timely referrals into support services, enabling voluntary organisations to plan efficiently
- Warm handovers into community services and practical preparation so that people leave prison with a clear support plan in place, including access to the practical support that they need

Any improvements to existing resettlement services should include increased funding for the voluntary sector supporting people in the community, particularly given the extra demand on services that will result from the implementation of the Sentencing Act. As part of this, we recommend building on current best practice through the provision of Departure Lounges in order to make the case for a wider roll-out.

Developing tailored approaches for specific groups

The prison system should move away from standardised approaches and develop more tailored pathways for groups with distinct needs, including women, older people, neurodivergent people, disabled people and those with complex mental health or trauma-related needs.

Participants particularly emphasised the need for sentences that factor in the age of a person and release planning for older people, including greater recognition of frailty, lower reoffending rates in some older cohorts, health and social care needs, family circumstances and the importance of maintaining independence. Sentencing decisions should take account of how custody may affect older people differently, including the heightened impact of declining health, reduced mobility, cognitive impairment and separation from established support networks. Greater use of age-informed assessments would help ensure that custodial sentences, licence conditions and release plans are proportionate, realistic and tailored to individual risk, need and capacity. A more nuanced, risk-positive approach would support better decision-making and avoid unnecessary restrictions that do not reflect individual circumstances, as will be described further in this response.

Based on our [consultation on the Independent Sentencing Review](#), for older people, we suggest:

- Implementing a geriatric parole process for people with significant health or social care needs but who do not meet the criteria for compassionate release
- Improving collaboration with local authorities and NHS to provide social care pathways that may include use of temporary release to stay in care
- Establishing a statutory-non-statutory working group to develop and explore proposals to support a greater number of older people into secure care and forensic care

As described in our Reducing Reoffending Third Sector Advisory Group (RR3) Special Interest Group (SIG) on a 'Whole Systems Approach' for women in the Criminal Justice System, we suggest:

- Embedding a Whole Systems Approach across the criminal justice system, reflecting long-standing evidence that women's offending is often linked to trauma, abuse, mental health needs, poverty and caring responsibilities.
- Ensuring coordinated action across justice, health, housing, social care and specialist women's services, alongside greater use of community-based alternatives to custody.

For people who are neurodivergent, we suggest:

- Ensuring routine screening and early identification of neurodivergence, supported by clear referral pathways and regular review throughout a person's sentence.
- Embedding neurodiversity-informed practice and reasonable adjustments across prison regimes, including staff training, accessible communication and adaptations to education, interventions and resettlement support.

These recommendations are explored in greater detail later in this response, including specific proposals relating to women's centres, Intensive Supervision Courts, remand, recall and trauma-informed support.

Resourcing community provision and alternatives to custody

With more people now entering the community at an earlier point in their sentence, the key opportunity is to ensure that community provision is resourced as core justice infrastructure rather than treated as an adjunct to custody. This means sustained investment in housing, health and addiction treatment, mental health support, employment and education pathways, family support, women's centres, mentoring, restorative practice and voluntary sector provision. Without this, earlier release and greater use of community sentences risk shifting pressure from prisons into already stretched local services. Properly resourced community provision, by contrast, can support desistance, reduce recall, improve compliance with sentence requirements and provide a safer, more effective response for many people who would otherwise receive short custodial sentences or be held unnecessarily on remand.

We recommend drawing on the findings and recommendations of the Special Interest Group (SIG) on Community Provision, convened under the Reducing Reoffending Third Sector Advisory Group (RR3). The Community Provision SIG, comprising 28 voluntary organisations, examined the resourcing and modelling of community provision for people in contact with the criminal justice system, with reports focusing on mental health treatment and drug and alcohol services in the community.

Its recommendations include:

- Addressing postcode variation in services
- Improving equitable access for racially minoritised people and those with dual diagnosis or undiagnosed mental health needs
- Increasing the use and availability of Mental Health Treatment Requirements and Community Sentence Treatment Requirements
- More effective coordination across statutory and non-statutory support services
- The development of more flexible, sustainable commissioning and funding arrangements so that voluntary organisations are not simply filling gaps in statutory provision.

Significantly reducing the prison population

Reducing the number of recalls to prison and the size of the remand population would make a significant contribution to easing capacity pressures while improving outcomes. Both groups include people whose needs and risks could often be better managed through earlier intervention, clearer decision-making and properly resourced community support.

Reducing the use of recall

The rising number of recalls is a key driver of prison overcrowding. Organisations noted that, despite recent changes under the Sentencing Act introducing a new 56-day fixed-term recall model, insufficient attention has been given to why recall is being used in the first place. Recall can disrupt accommodation, family relationships, employment, treatment and other rehabilitative support, and can entrench cycles of instability rather than reduce risk.

There is therefore an opportunity to develop policy solutions focused specifically on reducing the use of recall, particularly where breaches are administrative or linked to unmet support needs rather than serious risk. Initially, we recommend that the Ministry of Justice and HMPPS should develop a clear decision-making framework, with escalation routes and safeguards, to ensure recall is used only as a last resort and to significantly reduce recalls for non-compliance breaches.

Further, as the majority of licence recalls relate to administrative breaches, we recommend abolishing recall for administrative breaches and replacing it with proportionate community-based responses.

A longer-term approach should examine why people breach licence conditions and focus resources on addressing those drivers, particularly unstable accommodation, poor access to treatment and gaps in post-release support.

Reducing the remand population

Tackling the number of people held on remand is a further opportunity, given that this group currently makes up 18% of the overall prison population. Measures that could reduce unnecessary remand include:

- An immediate, fast-tracked review of the legal framework for Custody Time Limits, which determine how long a person can be held on remand, to ensure people are not held beyond the limits set out in legislation.
- Following the amendment to the Bail Act 1976 given effect by the Sentencing Act, ensuring that the “no real prospect of custody” test is applied consistently and monitored transparently to assess its effectiveness.
- Increased investment in community accommodation services to ensure that accommodation is available as an alternative to remand

4. What are the main current and future risks relating to prison capacity in England and Wales? What are the biggest opportunities to address these risks in the next 5 to 15 years, and ensure there is space to best accommodate the current and future projected prison population?

Overcrowding

Overcrowding was consistently highlighted as one of the most significant challenges across the prison estate. The latest Ministry of Justice data illustrates that prisons have very little headroom - as of 30 June 2026, there were 85,858 people in prison which equates to 96.3% of the current operational capacity of 89,120 places. Yet, by the Ministry of Justice's own measure of safe and decent accommodation – known as certified normal accommodation (CNA), the prison population is significantly over the approximately 82,000 places deemed as the level at which people can be suitably and safely accommodated.

Participants described overcrowding as contributing to people spending longer periods locked in their cells and reduced staff capacity to meaningfully engage with people in custody. As highlighted in HM Chief Inspector of Prisons Annual Report 2025-26, approximately 34% of men and 15% of women reported being locked up more than 22 hours per day on weekdays.

It was emphasised that overcrowding impacts on almost every aspect of prison life, reducing access to education, purposeful activity, healthcare, treatment, family contact and staff support, while limiting the prison system's ability to run genuinely rehabilitative regimes.

Despite the ongoing implementation of the Sentencing Act, including measures such as the Progression Model, the prison population is still expected to grow. The Act's Impact Assessment states that though the Act will reduce demand by 7,500 places in 2028, the overall population is projected to increase by 3,500 by May 2029. As a result, the Act – once implemented in its entirety – will support a reduction in overcrowding but will not fully solve the capacity crisis.

Further, it was reiterated by many of the organisations that we engaged with that capacity pressures cannot simply be solved by building more prison places. Given longstanding government policy, namely sending more people to prison for longer, any additional capacity is quickly filled, and this more punitive approach does little to address the wider drivers of imprisonment, which would cut demand for prison places in the first instance.

Specific areas of policy were referenced as being significant contributors to ongoing capacity issues. Recall, in particular was referenced – supported by the latest Offender Management Statistics highlighting that between January and March 2026 more people were recalled to prison than were released. The numbers of people on remand is also a contributing factor to ongoing overcrowding – with the remand population making up 18% of the overall prison population.

Staff Shortages

Staffing shortages were also a significant barrier to capacity, as they significantly impacted the delivery of purposeful activity and limited the achievement rehabilitative outcomes. Voluntary sector programmes were often disrupted and could not be delivered effectively because there were insufficient officers to facilitate the movement of people across the estate. At the same time, limited staff capacity restricted people's access to education, employment, drug and alcohol-based interventions and other rehabilitative services provided within the prison. Staffing shortages were also noted to reduce purposeful activity and access to specialist support programmes, particularly in women's prisons.

5. What are the biggest changes that need to be made to the design, configuration and condition of the prison estate in the next five to 15 years to improve outcomes?

Organisations expressed serious concerns about the condition of the prison estate, particularly older Victorian prisons. Concerns included poor ventilation, excessive heat, cold temperatures, pest infestations, limited natural light, poor living conditions and environments that are not conducive to rehabilitation. These conditions can undermine physical and mental health, increase tension and make it harder for staff and voluntary sector organisations to deliver meaningful support.

In some prisons, the basic fabric of the estate was seen as working against the aim of creating safe, decent and purposeful environments.

Many advocated for smaller, more humane, rehabilitation-focused environments, including designs that support family contact, independent living, therapeutic work, access to nature and purposeful activity. This means creating spaces that allow people to spend less time confined to cells and more time engaging in education, work, treatment, creative activity, physical exercise and relationship-building. Scandinavian and Norwegian approaches were frequently cited as examples of more rehabilitative practice, particularly where the physical environment supports normalisation, dignity, responsibility and preparation for life in the community.

Participants also stressed that estate design must respond to the needs of different groups, including older people, disabled people, neurodivergent people, women and people with complex health or trauma-related needs. This includes improved accessibility, quieter and sensory-aware spaces, appropriate healthcare and social care facilities, safer visiting areas, and accommodation that supports independence where possible. The configuration of the estate should also allow services to be delivered consistently, with suitable rooms for confidential support, group work, education, arts-based activity and voluntary sector provision.

Some participants also highlighted the need to evaluate and learn from innovative approaches already operating within the estate, including therapeutic communities, specialist units and independent-living models. Learning from these models should inform future estate planning, including decisions about where specialist provision is needed, how people move through the estate, and how the physical environment can support progression, trust, autonomy and preparation for release.

6. What are the main current and future risks to prison security and the management of high-risk individuals, safety and decency in England and Wales?

Participants emphasised that prison security and the management of people assessed as high risk must be understood more broadly than preventing escapes, controlling prohibited items or restricting movement.

Effective security depends on whether prisons are safe, stable, decent and purposeful environments in which staff have the time, training and relationships needed to understand individuals, identify emerging risks and respond before harm escalates. A narrow focus on containment can overlook the conditions that generate insecurity, including overcrowding, poor mental health, trauma, drug dependency, debt, exploitation, boredom, weak relationships and limited access to meaningful support.

Organisations consistently argued that the management of high-risk individuals should be more individualised, evidence-informed and responsive to change. Risk management should recognise progress, motivation and protective factors, while ensuring that people with complex or acute needs can access specialist care, structured interventions and appropriate progression routes through the estate.

There was support for greater specialisation within the estate, including increased provision for people with severe mental health needs, drug or alcohol dependency, neurodivergence, acquired brain injury, vulnerability to exploitation and those requiring tailored therapeutic or behavioural interventions. Participants also highlighted the need for better support for people serving long or indeterminate sentences, who may experience institutionalisation, loss of purpose and uncertainty about progression. Without meaningful support, these factors can undermine safety, wellbeing and engagement with sentence planning.

Similar to what we have previously argued in a response to the [2025 Justice Committee Inquiry on tackling drugs in prison](#), organisations articulated that drug use, organised crime, violence, self-harm, debt, coercion, intimidation and illicit economies were significant current and future risks to prison security. However, organisations stressed that these should not be viewed solely as disciplinary or enforcement issues. They are often both symptoms and drivers of unsafe prison environments. When people spend long periods locked in cells, have limited access to purposeful activity, cannot maintain family relationships, or receive inadequate mental health, trauma and substance misuse support, frustration and hopelessness can increase. These conditions can make people more vulnerable to exploitation and more likely to become involved in illicit activity. Security should therefore support rehabilitation rather than operate separately from it.

A sustainable security response should combine proportionate measures to prevent drugs, weapons, phones and other illicit items entering prisons with measures that reduce demand, vulnerability and harm inside prisons. This includes timely drug and alcohol treatment, harm-reduction and relapse-prevention support, mental health care, trauma-informed interventions, meaningful activity that reduces boredom and increases hope and purpose, support for people experiencing coercion or debt, and strong relationships between staff and people in prison, enabling concerns to be identified earlier.

However, several factors currently undermine prisons' ability to manage these risks effectively, including:

- Staffing shortages, which increase time spent in cells, restrict movement around the estate, reduce access to education, treatment and voluntary sector services, and leave staff with less time to build relationships, identify tensions or notice changes in behaviour.
- Overcrowding, which intensifies pressure on staff and services.
- Unstable prison regimes, including lockdowns, cancelled activities and inconsistent access to sentence and pre-release planning, which can interrupt risk assessments, progression and engagement with support.
- Weak relationships and limited information-sharing between prisons, probation, health services and voluntary sector organisations, which can mean important insight into risk, vulnerability, coercion or safeguarding is missed.
- Insufficient screening and assessment for mental health needs, drug and alcohol dependency, neurodivergence, disability and acquired brain injury, resulting in unmet needs being misinterpreted as behavioural or compliance issues.
- Insufficient staff training and supervision in de-escalation, trauma-informed practice, neurodiversity, mental health, substance misuse and managing complex behaviour.
- Limited access to specialist provision for people with severe mental illness, complex trauma, addiction, high levels of vulnerability or behaviour linked to exploitation and coercion.
- Technology-enabled security risks, including drones, illicit phones and organised criminal networks, which require a proportionate response that combines enforcement, intelligence, safeguarding and constructive legitimate access to communication and digital services.

7. What are the biggest opportunities in the next five to 15 years to address these risks and improve the security, safety and decency within the prison estate?

The opportunities over the next 5 to 15 years follow directly from the risks set out above. As mentioned above, prison security is weakened when basic conditions, staffing, relationships, treatment and levels of purposeful activity are poor. The priority should therefore be to reduce the pressures that make prisons unsafe, while still using proportionate enforcement against drugs, drones, organised crime, violence and exploitation. This requires:

- Ensuring basic decency and humane treatment, including clean and safe conditions, healthcare, exercise, family contact and meaningful time out of cell.
- Increasing purposeful activity through education, work, treatment, creative activity, peer support and wellbeing provision.
- Embedding trauma-informed and psychologically informed practice into staff training, so staff can respond to distress, mental health needs, neurodivergence, substance misuse and conflict more effectively.
- Creating spaces physical spaces within the prison to strengthen trusted relationships between staff, people in prison and voluntary sector organisations, in order to identify concerns about risk, coercion, debt or safeguarding earlier.
- Improving access to drug and alcohol treatment, mental health support, harm reduction and recovery services, reducing demand for illicit economies as well as supply.
- Improving intelligence, information-sharing and partnership working with clear safeguards for trust, confidentiality and safeguarding responsibilities.
- Responding proportionately to drones, illicit phones and other technology-enabled threats, while expanding supervised digital access for education, family contact, health and resettlement.
- Ensuring consistent messaging about the purposes and functions of a prison and building public confidence by making clear that safety, decency and rehabilitation are part of public protection.

8. What are the main current and future risks relating to the prison workforce in England and Wales? What are the biggest opportunities in the next five to 15 years to address these risks and improve outcomes for staff and the wider prison system?

Participants consistently called for a more professionalised prison workforce with enhanced recruitment, training, induction, development and wellbeing support. Recruitment should place greater emphasis on values, motivation, interpersonal skills and suitability for a highly relational role. Many participants argued that staff recruitment, retention and professional development are fundamental to improving safety, rehabilitation and long-term outcomes across the prison system.

Prison staff training should cover:

- Trauma-informed practice.
- Understanding and identifying mental health needs and neurodiversity.
- Brain injury awareness.
- Physical and mental disability awareness.
- Gender-informed approaches.
- Cultural competence.
- Guidance on how to maintain appropriate communication with people in prison
- De-escalation tactics
- Understanding professional boundaries.
- Understanding the complex treatment and support on offer in their prison that enables rehabilitation and resettlement.
- How to work effectively and collaboratively with voluntary sector organisations.

Participants stressed the importance of "jailcraft", relationship-building and understanding people as individuals. Strong relationships were repeatedly identified as critical to safety, rehabilitation and the development of trust, hope and motivation for change. Some groups suggested coaching models for staff development and highlighted evidence that coaching can improve wellbeing, resilience and leadership.

To improve partnership working with the voluntary sector, participants recommended:

- Better mapping of available services.
- Clear referral pathways.
- Greater staff awareness of what external organisations offer.
- Improved coordination across departments.
- Better integration of voluntary organisations into prison operations.
- Increased engagement with and funding for lived-experience organisations and practitioners whose insights can strengthen service design, staff understanding and engagement with people in custody.

Moreover, staff wellbeing was seen as a core operational issue. Suggestions included counselling, clinical supervision, reflective practice, improved welfare facilities, peer support, predictable rotas, health and fitness support, and better recognition of prison work. Staffing shortages, burnout, turnover and low morale were viewed as major barriers to reform.

9. What are the main current and future risks which might prevent prisons from effectively rehabilitating people and reducing reoffending?

Participants identified inadequate pre-release planning as the most central barrier to rehabilitation and reducing reoffending. This weakness is driven by many of the challenges highlighted above, particularly overcrowding and staff shortages, which reduce the time, capacity and stability needed to prepare people properly for release.

When pre-release planning is inadequate or begins too late, people are more likely to be left without secure housing, continuity of healthcare (including mental health and drug and alcohol support), or timely access to benefits and identification, increasing the risk of homelessness, reoffending and recall. It also disrupts education, employment, and family ties, which are key protective factors, and often results in individuals being released into crisis rather than stability, particularly for those with complex needs or short sentences.

The lack of pre-release planning can be clearly evidenced through inadequate housing provision and increasing rates of homelessness on release. As noted in the latest publication [covering accommodation outcomes](#), it has been highlighted that rates of housing on the night of release from custody have consistently been in decline since the 2021/22 performance year, despite the Ministry of Housing, Communities and Local Government's [joint commitment with the Ministry of Justice](#) to halve the proportion of prison leavers under probation supervision who are homeless on their first night after release. Without stable accommodation, people struggle to maintain employment, access services, reunite with family, manage finances and sustain recovery from addiction.

Inadequate pre-release planning also means people leave prison without accommodation, identification, bank accounts, benefits, digital access, transport arrangements or clear support plans. Through-the-gate provision was widely viewed as inconsistent and fragmented, with planning too often treated as a last-minute administrative task rather than a sustained process beginning well before release.

Participants argued that rehabilitation is weakened by fragmented support systems that fail to provide continuity between custody and community. Inadequate pre-release planning compounds this fragmentation, since any progress a person makes in prison can quickly unravel when housing, healthcare, benefits, family support and employment services are poorly coordinated or only become involved at the point of release.

Other key challenges which may prevent prisons from effectively rehabilitating people and reducing reoffending include:

- Overcrowding and limited purposeful activity, which reduce the time, space and stability needed for meaningful rehabilitation and release preparation.
- Staffing shortages restricting access to interventions, movement around the estate, relationship-building and timely pre-release planning.
- Interrupted support between custody and community, with weak continuity of care and poor coordination at the point of release.
- Lack of funding for voluntary sector provision, including services that help bridge custody and community support.

- Probation capacity pressures, which limit the ability to provide consistent supervision, support and coordination after release.
- Weak relationships between staff and people in prison, which can undermine trust, motivation and engagement with rehabilitative support.
- Inconsistent provision across prisons, contributing to a postcode lottery in access to resettlement support.
- Digital exclusion, which makes it harder to access benefits, housing, healthcare, banking, employment and other essential services after release.
- Family separation, which can weaken one of the key sources of stability and support for resettlement.
- Public and political attitudes that discourage rehabilitation-focused approaches.
- Poor integration between justice, health, education, housing and social care systems.
- Institutional cultures can prioritise containment, security and compliance at the expense of rehabilitation, innovation and individualised support.

10. What activities and interventions in prison would be most effective in supporting rehabilitation and reducing reoffending?

In order to be most effective in supporting rehabilitation and reducing reoffending, activities and interventions in prisons must be personalised, begin early in custody, connect directly to life after release and help people develop confidence, purpose, positive identity and a sense of belonging.

These activities and interventions include:

Education, training and employment

- Providing access to qualifications and vocational training that are explicitly linked to local and national labour market opportunities, with clear routes into employment on release.
- Expanding access to training, accredited short courses and apprenticeship programmes with pathways that can continue seamlessly after release.

- Developing sustained prison-employer partnerships. Employers should be involved in co-designing training, offering work placements where possible, providing interview practice, identifying realistic vacancies before release and supporting fair recruitment practices for people with convictions.
- Providing access to employment brokerage services that begin well before release, including support with CVs, disclosure advice, applications, interview preparation, documentation, travel planning and warm handovers to employers, probation and community-based employment services.
- Supporting entrepreneurship and self-employment opportunities, particularly for people who may face barriers to mainstream employment, through business planning, financial literacy, mentoring, peer networks and links to community enterprise support after release.
- Offering flexible education services with flexible delivery options that reflect different starting points, interests and aspirations, including basic literacy and numeracy, ESOL, higher-level learning, distance learning and practical courses that build confidence as well as skills.
- Embedding digital skills training and digital literacy throughout education and resettlement activity so that people can access online benefits, banking, housing, healthcare, job search platforms, communication tools and everyday services after release.

Through-the-gate support

- Beginning rehabilitation and resettlement planning at the start of custody, with plans regularly reviewed and updated as release dates, risks, needs and family or housing circumstances change.
- Ensuring consistent support before and after release through named workers, clear responsibility for follow-up and warm handovers between prison, probation, health, housing, DWP, local authorities and voluntary sector providers.
- Prioritising practical release preparation, including accommodation, benefits, banking, identification, GP registration, prescriptions, transport, phones, clothing and employment or training appointments.
- Developing step-down models, specialist resettlement wings and transitional accommodation that allow people to practise independent living skills, rebuild community links and receive intensive support immediately before and after release.

- Providing stability support following recall, including rapid assessment of what triggered the recall, preservation of housing and community support where possible, and planning to prevent repeated cycles of release and recall.

Participants stressed that stable accommodation and continuity of support provide the platform on which employment, recovery, family reconnection and other rehabilitative outcomes depend.

Therapeutic and trauma-informed support

- Introducing routine and thorough screening for mental health needs, drug and alcohol use, neurodiversity, disability and traumatic brain injury at reception and at key points during custody, with clear referral routes into support.
- Providing timely mental health support that includes crisis response, ongoing therapeutic work, peer support and continuity with community mental health services before and after release.
- Improving drug and alcohol support by combining treatment in prison, harm reduction principles, relapse-prevention planning and links to recovery services in the community.
- Embedding trauma-informed interventions across the regime, recognising the prevalence of adverse childhood experiences, abuse, bereavement and violence, and avoiding practices that retraumatise people or undermine trust.
- Supporting emotional intelligence development through structured group work, one-to-one support and reflective practice that helps people recognise triggers, regulate emotions and strengthen communication skills.
- Providing opportunities to address adverse childhood experiences and generational trauma in a safe and supported way, with specialist provision for those whose needs are complex or acute.
- Ensuring substance misuse treatment is integrated with mental health, housing and resettlement planning so that recovery is not disrupted when people move between prisons or return to the community.
- Delivering neurodiversity-informed provision, including reasonable adjustments, accessible communication, sensory-aware environments and staff training so that people can participate meaningfully in education, work and interventions.
- Providing traumatic brain injury assessment and support, including adapted communication, memory aids, behavioural support and links to specialist services.

- Expanding therapeutic and restorative justice programmes where appropriate, ensuring they are voluntary, carefully facilitated and connected to wider rehabilitation planning.

Relationships and family support

- Improving family contact and visits by reducing practical barriers such as distance, cost, booking difficulties and restrictive regimes, and by making visiting spaces more child- and family-friendly.
- Offering family-focused interventions that help repair relationships where appropriate, support communication and prepare families for the practical and emotional challenges of release.
- Providing couples and network-based therapeutic work where safe and suitable, particularly where relationships can provide stability, motivation and accountability after release.
- Delivering programmes supporting parenting and family roles, including work with fathers, mothers, kinship carers and people seeking to rebuild relationships with children.
- Strengthening relationships between staff and people in prison, coaching and mentoring by creating time and training for staff to build trust, model pro-social behaviour, recognise progress and encourage engagement with support.

Purposeful activity, wellbeing and personal development

- Expanding reading programmes that support literacy, confidence, concentration and connection with family, including schemes that enable parents to record stories or share books with children.
- Providing fitness and wellbeing programmes, including in-cell workout options and collaborative sessions involving people in prison and staff, to support physical health, routine, discipline and positive relationships.
- Promoting journaling and self-reflection exercises to help people develop insight, track progress, manage emotions and build a more positive sense of identity.
- Increasing outdoor and horticultural programmes that provide access to nature, practical skills, therapeutic benefits and opportunities for teamwork and responsibility.

- Embedding strengths-based approaches that identify skills, interests, achievements and aspirations, rather than defining people solely by risk, deficit or offence history.
- Ensuring activities provide structure, confidence, purpose and routine, and are available consistently enough to form part of a meaningful rehabilitative regime rather than occasional diversion.

These activities were valued not only for the skills they develop but for their contribution to confidence, wellbeing, routine, social connection and the formation of positive identities beyond offending.

Arts-based Activity

As articulated by the National Criminal Justice Arts Alliance (NCJAA) Research Reference Group (RRG) and Advisory Group (AG), arts-based activity should be recognised as an important component of rehabilitation in prison, rather than treated as optional enrichment. There is a substantial body of evidence showing that participation in the arts can improve mental wellbeing, health, behaviour, confidence, communication, relationships and engagement with education. While the evidence does not establish that arts participation automatically reduces reoffending, these outcomes are closely connected to the processes associated with desistance.

Many arts-based approaches align closely with contemporary desistance research, particularly its emphasis on agency, hope, positive relationships, identity development and meaningful participation. Creative activity can help people reconnect with education, build confidence, improve family relationships and develop emotional and social skills. It can also engage with several aspects of a person's life at once, including identity, communication, relationships, mental health, aspirations and motivation, rather than addressing these issues in isolation.

Arts projects create opportunities for dialogue, collaboration and shared achievement between people in prison, prison staff, education teams, artists, families and members of the public. They can strengthen relationships and trust, improve the prison environment and make engagement with other rehabilitative interventions more likely to succeed.

Exhibitions, publications and performances can also improve public understanding of rehabilitation and the efforts made by people in prison and staff, helping to build support for second chances among future employers, landlords and community members.

To achieve these benefits, arts provision must be properly integrated into prison education, rehabilitation and resettlement strategies. Participation alone is not a direct or automatic route to reduced reoffending. Instead, impact depends on the conditions in which programmes are delivered. Stable regimes, sufficient staffing, appropriate and accessible spaces, reliable transport from wings to activities, senior leadership support and effective partnership working are all essential. Consistent access should be included when prisons assess the quality of their education, rehabilitation and resettlement activity.

Prisons should therefore work with experienced voluntary-sector arts organisations, including those with established expertise, evidence and partnerships with funders, cultural venues and grassroots organisations. Such organisations can provide high-quality interventions at reasonable cost and create progression routes into further education, community arts, volunteering or employment after release. People with lived experience should also be supported and, where appropriate, trained to contribute to delivery, mentoring and creative projects. Vetting and other procedural barriers should be managed proportionately so that this added value is not lost.

Maintaining this provision requires leadership and investment. Cuts to education staff, shortages of prison officers, inadequate infrastructure, inaccessible spaces, overheating and security restrictions can all prevent people from attending activities or undermine the quality of delivery. In periods of financial pressure, arts programmes are particularly vulnerable when they are viewed as supplementary. They should instead be understood as a practical, evidence-informed contribution to the wider rehabilitative culture of the prison and to the conditions that support long-term desistance.

Peer support and lived experience

In delivering the services described above, participants highlighted the value of peer mentoring, lived-experience roles and voluntary sector organisations in supporting engagement, building credibility and demonstrating realistic pathways to change.

People with lived experience can often build trust quickly because they understand the realities of custody, release and resettlement, and can offer practical insight that complements professional expertise. Their involvement can help people in prison to see change as possible, particularly where support is delivered by individuals who have navigated similar barriers and are now working, volunteering, mentoring or contributing positively in the community.

Lived experience should therefore be embedded across the design and delivery of rehabilitative activities in prisons, rather than treated as occasional consultation. This includes involving people with lived experience in co-producing programmes, reviewing whether interventions are accessible and relevant, developing induction materials, supporting peer-led groups, contributing to staff training and helping services understand how prison processes are experienced by the people who use them.

Peer support roles should be properly structured, trained and supported. This means clear role descriptions, supervision, boundaries, safeguarding processes, progression routes and recognition for the skills developed. Where peer mentors are supporting others with resettlement, they should be linked into wider through-the-gate provision so that advice on housing, employment, benefits, relationships and wellbeing is accurate, timely and connected to practical support after release.

Participants also stressed the need to remove unnecessary barriers that prevent people with lived experience from contributing to prison-based work. Vetting, security and procurement processes should be proportionate, transparent and timely, recognising both the need to manage risk and the distinct value that lived-experience practitioners bring to rehabilitation. Without this, prisons risk excluding some of the people best placed to build credibility, challenge stigma and support others to engage with services.

11. What are the biggest risks facing women's prisons within the English and Welsh justice system? What changes to the custodial estate and targeted interventions would have the greatest impact on improving outcomes for women over the next 5 to 15 years?

Women's experiences of prison are shaped by distinct and often overlapping forms of disadvantage. Before entering custody, many have higher levels of mental health need, acquired brain injury, poverty, trauma and domestic abuse, and often have caring responsibilities. Most women are imprisoned for non-violent, low-level offences, such as theft, and are more likely to receive short sentences. These sentences can still have far-reaching consequences for women's housing, family relationships, caring responsibilities and wider stability.

Despite this profile of need and disadvantage, the prison system is not designed around women's lives or circumstances. This creates a distinct and often challenging environment for women, compounded by a lack of professional curiosity, willingness, training and resource among prison staff to understand and address the root causes of women's offending behaviour.

For example, organisations highlighted a lack of comprehensive screening for and assessment of women's mental health needs, neurodiversity and traumatic brain injury when they enter the prison. Often, whether these needs are addressed can be a postcode lottery, since unless there is voluntary sector support commissioned within a prison that is relevant, resourced, and available to women, their specific needs may never end up being captured and addressed throughout their sentence.

Women in prisons were also often observed to lack an understanding of what healthy relationships with family, friends and partners should look like. This lack of understanding arises from childhood experiences of neglect, maltreatment and abuse resulting in early normalisation of damaging relationships. These experiences follow them into adulthood since women in custody are frequently victims of sexual violence, domestic abuse and coercive control. As many organisations have highlighted, prison environments are not appropriate for therapeutic treatment and support to address the complex needs that arise from these experiences.

Participants overwhelmingly argued that many women in prison would be better supported through community-based alternatives and that custody should be used more selectively where appropriate. Short custodial sentences were widely viewed as particularly harmful for women because of their impact on children, caring responsibilities, housing, employment and family relationships. Instead, there need to be gender-responsive, trauma-informed models of support, which deliver improved outcomes for children, families and communities, and are ultimately more cost-effective.

Other commonly cited challenges included housing insecurity, which can result in breached licence conditions, as well as high rates of recall and remand. As illustrated in the latest edition of the Offender Management Statistics Quarterly, the population of women who are on recall in prisons across England and Wales has more than doubled from September 2015 to June 2026. In addition, over a quarter of women in prison are there on remand. Migrant women are particularly over-represented in this population.

Participants also highlighted the impact of women being held far from their homes and communities, which can exacerbate family separation and make it harder to maintain relationships that support rehabilitation.

A further concern was the lack of appropriate transitional accommodation on release that is safe, secure and sufficiently close to community services. Participants also identified inadequate gender-specific services within prisons and through-the-gate provision, alongside uncertainty about the future of the women's estate, particularly in light of recently announced plans to use a greater proportion of the estate to support male people in prison. Funding reductions affecting programmes and support were also seen as a significant challenge.

On the basis of these challenges, in order to improve women's outcomes in the justice system it is essential to prioritise:

- Investment in trauma-informed, gender-specific support that directly responds to women's pathways into offending, including abuse, coercive control, caring responsibilities, mental health difficulties, poverty and other forms of social disadvantage.

- Expanding the use of community-based alternatives to custody, particularly for women convicted of non-violent offences or receiving short custodial sentences.
- Further expansion of the use of Intensive Supervision Courts (ISCs) across all areas in England and Wales as a part of a Whole Systems Approach to supporting women in the criminal justice system
- Increasing investment in women's centres and residential women's centres, so that more women can access holistic support in the community, including help with housing, health, relationships, safety and resettlement.
- Embedding trauma-informed, family-centred and gender-responsive practice across prison regimes, healthcare, education, resettlement planning and through-the-gate services.
- Broaden recognition of patterns of violence against women and girls (VAWG)
- Improve recognition of hidden homelessness, as women's homelessness does not always involve rough sleeping
- Improving the communication of bail information to reduce remand in custody.
- Increasing investment in voluntary sector services offering court-based advocates who could assist bail decisions and pick up non-probation referrals.
- Improving access to safe, suitable transitional accommodation and supported housing on release, including provision that is close enough to community services, family networks and specialist women's support.
- Strengthening continuity of care after release, with joined-up support for mental health, substance misuse, domestic abuse, housing, benefits, family relationships and caring responsibilities.
- Improving the identification of domestic abuse, coercive relationships, trauma, poor mental health and unmet support needs, with clear referral pathways to specialist services.
- Providing sustainable, long-term funding for specialist women's services in custody and the community, including voluntary sector organisations delivering gender-specific support.
- Providing greater strategic clarity about the future of the women's estate, including how capacity decisions will protect access to safe, gender-specific provision and services.
- Creating regular co-learning and information-sharing spaces for prison staff, voluntary sector staff and specialist women's services to improve understanding of women's needs and strengthen partnership working.

12. Which cohorts have specific needs and vulnerabilities in prison? What are the biggest changes needed to address the needs of different cohorts in order to improve outcomes for the prison system?

From our consultation, the sector made it clear that a one-size-fits-all approach did not work for the people that they support, particularly for women (as described above), older people, and people with neurodivergence, mental or physical disabilities. Instead, as described below, members of these groups require tailored, one-to-one support.

Women

Further to the discussion above, the specific gender-related needs of women in the criminal justice system have been well-documented over decades. Baroness Corston called for “a distinct approach” in recognition of what she described as women’s particular “vulnerabilities”, grouped into three categories:

- domestic circumstances and needs including domestic violence, child-care issues, being a single parent;
- personal circumstances such as mental illness, low self-esteem, eating disorders, substance misuse;
- socio-economic factors such as poverty, isolation and unemployment.

She concluded that women experience a combination of factors from each of these groups and urged the “*the need for a distinct, radically different, visibly-led, strategic, proportionate, holistic, woman-centred, integrated approach*”. More than 20 years on from the Corston Report, that call for a radical overhaul of the criminal justice system for women, has not been achieved. Women’s needs have become more acute.

The rate of self-harm among women in prison has increased dramatically in the last 10 years and is now eight-and-a-half times higher than in men’s jails. A [thematic report from HMIP](#) published in 2025 found astonishing gaps in basic decency and an overreliance on using physical force to manage women in acute and obvious crisis. To address women’s needs, the government should look to the [Women's Justice Board Report](#) presented to the previous Lord Chancellor in March this year and implement their recommendations in full.

Older people

Participants emphasised the importance of addressing the growing population of older and life-sentenced people in prison, given that as of 31 March 2026, approximately two in five people in prison were aged 40 or over. The population aged 50 and over accounted for almost one in five.

Because age in prison is not equivalent to chronological age in the community, as noted in the 2025 Chief Medical Officer (CMO) for England report on the health of people in prison, on probation and in the secure NHS estate in England, people in prison experience earlier onset of age-related illness, dependency and frailty. More than 40% of men over 50 admitted to hospital in an emergency showed signs of frailty.

As we have previously explored in a 2021 joint report with Recoop, despite their frailty, older people are not being appropriately accommodated in prison with the facilities being difficult to navigate and their specific needs not being fully met, as the estate has been largely designed for a young male population. As a result, we have suggested that all prisons should conduct a physical environment check to ensure that all areas are accessible for those with mobility, visual and hearing impairments and that staff are trained to understand and support the needs of the older population. It is also key that older people have access to purposeful and accessible activity tailored to meet their needs and that health and care assessments are completed upon reception.

It is essential that resettlement planning takes place as soon as possible with older people being involved in the process, and for those who will come to the end of their lives in prison, that palliative and end of life care be a priority.

Our engagement with the sector revealed that the sector continues to grapple with many of these same concerns. Given the existing older cohort and the predicted increase in the amount of life-sentenced people in prison, organisations working across the sector have articulated the need for age-appropriate healthcare, mental health support, dementia support and social care.

Participants in our roundtables also emphasised the importance of ensuring that a person's entire journey through the prison estate is accessible, allows them timely access to necessary medication, has adaptable and appropriate accommodation and provides mobility support, such as wheelchair access, and ultimately, gives older people the ability to maintain their independence.

Participants repeatedly emphasised the importance of ensuring that older people have access to purposeful activity, are able to build and maintain meaningful social connections with prison staff and with their families, where appropriate. Without these foundations, and the hope that they provide, older people have found it difficult to engage with other services offered within the prison and struggled to participate in rehabilitation and release planning, even where it has been successfully tailored to older adults.

Considering the proportion of older women in prisons, who represent a small but significant minority in prisons and face unique health and social challenges, participants also highlighted the importance of making the response to ageing in custody gender responsive. Older women should be explicitly recognised in both older people's and women's strategies, supported by sex-disaggregated data, with targeted attention to menopause, trauma, mental health and relationships, and the co-designed piloting of peer-led wellbeing approaches.

Several organisations we spoke to also suggested a greater utilisation of compassionate release where appropriate.

Neurodivergent people and people with mental or physical disabilities

In delivering their services, organisations reported seeing increasing levels of neurodiversity, mental health needs, disability and brain injury across the prison population. They emphasised the need for:

- Routine screening and identification.
- Reasonable adjustments.
- Accessible education and interventions.
- Increased access to creative and arts-based treatment given its proven efficacy in supporting neurodiverse people.

- Specialist support services.
- Neurodiversity-informed practice.
- Brain injury assessment.
- Improved staff training.
- Continuity of care from the prison to the community.
- Accessible prison design and equipment.
- Consistent implementation of support arrangements across prisons.

Nonetheless, they stressed that the identification of a person's need alone is insufficient without consistent implementation of support arrangements, appropriate adjustments and prison environments that promote accessibility, inclusion and dignity.

Prisons should not be used as a place to house people with serious mental health needs or neurological conditions, as their needs cannot be reasonably addressed within the prison estate, and instead, require stable, ongoing, specialist care within a healthcare setting.

At the same time, organisations also emphasised that prisons should also not be used as a place of safety. This was one of the key aims of the [Mental Health Act 2025](#), which sought to ensure that individuals with severe mental illness in prison cannot be detained temporarily in prison as a 'place of safety' while awaiting a hospital bed for treatment or assessment. However, it is unclear how this aim will be achieved, nor how progress will be monitored.

13. What further role should technology and digital tools play over the next five to 15 years in helping to address the risks highlighted in this Call for Evidence and improve prison outcomes?

Technology was seen as an important enabler of rehabilitation, resettlement and operational efficiency, which should complement rather than replace relationships and professional judgement.

Some groups raised concerns that AI-based risk assessment tools could reinforce bias or fail to recognise individual circumstances, emphasising that technology should not replace human judgement.

Digital inclusion was increasingly viewed as essential preparation for life after release, given the growing reliance on digital systems for employment, housing, banking, healthcare and access to public services. Organisations were especially concerned about older people and longer-sentenced people who leave prison, since without digital skills or access to technology in prison, these cohorts can face additional barriers to resettlement and risk further exclusion from opportunities available in the community and subsequent recall for failing to engage with systems and processes they would have had no prior exposure to or knowledge of.

It is essential to prioritise:

- Improving information sharing between prisons, probation and voluntary sector services.
- Supporting release planning and appointment coordination.
- Mandating digital literacy training far in advance of release to ensure that people are able to access benefits, healthcare, housing services, online banking, transport and everyday services upon release
- Ensuring all prisons have secure devices available
- Expanding the use of digital tools to allow people to make self-referrals for services within their prison that they may not otherwise know exist or feel comfortable asking for
- Increasing access to in-cell learning opportunities.
- Facilitate more opportunities for people in prison to communicate with their families through digital systems.
- Assistive technology for neurodivergent people, people with mental or physical disabilities, accessibility issues, low literacy and those with English as an additional language.
- Improved prison digital infrastructure.
- Better mapping and coordination of support services which can deliver digital systems and technology training.

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