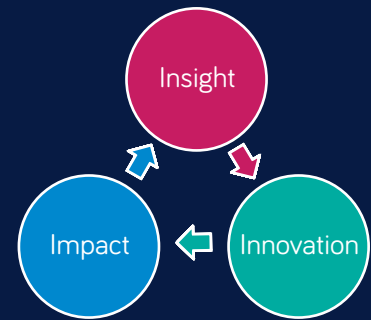


Tackling substance dependence and mental health problems among UK prisoners: An integrated approach



Pulse is a series of briefings from The Forward Trust for staff, partners, commissioners and stakeholders to communicate:

- **Insight** from our research team's analysis of client data and other findings
- Examples of **innovation** and continuous service improvement
- Evidence of our personal, social and economic **impact**

We also aim for these briefings to contribute to wider policy and practice debates.

The Forward Trust (Forward) came into being in July 2017, through the merger of two established organisations – RAPt and Blue Sky. We provide a range of care, support and employment services to people struggling with drug or alcohol dependence, or who have a history of offending. Despite our clients being amongst the most marginalised in society, we believe in everyone's ability to transform their lives and to achieve recovery from a lifestyle of addiction and crime.

Executive Summary

- Forward has over 25 years' experience of delivering drug and alcohol recovery services in custody, and currently works in 21 prisons, reaching over 15,000 service users each year.
- Our research shows that 71% of prisoners who engage with substance misuse services also present with one or more mental health symptoms, with an average of 3.4 mental health problems per client. The most prevalent of these are depression, anxiety and experience of trauma.
- Substance dependent offenders with 'co-occurring' depression problems are 9% more likely to re-offend and are at greater risk of suicide and self-harm.¹
- Given the prevalence of co-occurring needs among prisoners, it is clear that responding to mental health symptoms should be an integral part of substance misuse treatment and vice versa - an integrated approach within prisons is essential.
- In response to this, Forward now systematically screens all clients for mental health problems and has developed a suite of interventions and resources to support our clients with their low-level mental health and associated needs.
- New research shows our accredited Substance Dependence Treatment Programme (SDTP) has a positive impact on mental health. The number of service users reporting no symptoms of anxiety and depression increased by 25% and 50% respectively after completing the SDTP. It also has a proven significant impact on reducing re-offending.

The Problem

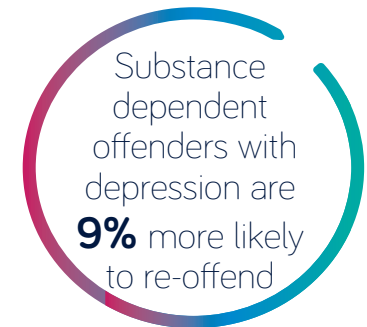
In 2015 Forward (formerly RAPt) published research² which showed that 71% of prisoners engaging with substance misuse treatment presented with symptoms of one or more mental health problems, with an average of 3.4 mental health problems reported per client. (Other research has shown that mental health problems feature in the lives of at least 46% of those involved in both substance misuse treatment and the criminal justice system.)³

There are many problems associated with mental health, substance misuse and their co-occurrence among prisoners:

- **Increased risk of re-offending** – The link between drug or alcohol misuse and offending behaviour is well established. There is also an emerging body of evidence⁴ to suggest that offenders suffering from psychiatric conditions are more likely to re-offend post-release. Forward's own research shows an additional increased likelihood of re-offending where problems co-occur – specifically, that symptoms of major depressive disorder increase the likelihood of re-offending among substance dependent offenders engaging with treatment in prison by 9%.⁵

- **Suicide and self-harm** – According to a 2016 publication by the Howard League for Penal Reform, "On average, a prisoner commits suicide every three days."⁶ The Ministry of Justice's (MOJ) September 2017 statistical bulletin⁷ also reported a high rate of self-inflicted death (0.9 per 1,000 to September 2017) as well as an increase in self-harm and numbers of individuals self-harming (up by 12% and 4% to June 2017) in prisons across England and Wales. The rise in the number of these incidents is clearly linked to the well-reported challenges faced within prisons. In January 2016, the Prison & Probation Ombudsman (PPO) published a review of the needs of prisoners with mental health problems.⁸ Of the 199 self-inflicted deaths in 2012-14, they found that 70% had identified mental health needs, excluding alcohol/substance misuse issues.

- **Public health and cost** – Mental health problems have wide-reaching public health and cost implications. The economic and social costs were estimated at £105.2 billion in 2009/10.⁹ Contributing to this total are costs incurred by health and social care services and losses to the economy through sickness absence and benefit claims. Equally important is the human cost on the quality of life of individuals who often feel marginalised and experience little hope for the future.



Policy Context

Providing treatment that improves health and wellbeing and impacts on re-offending rates, is a commitment enshrined in both Public Health England (PHE) and the Ministry of Justice (MOJ) departmental strategies:

- The 2016 White Paper on prison reform outlined the Government's resolve to reinstate stability and safety across the estate¹⁰ alongside effectively rehabilitating prisoners. It also committed to a reduction in re-offending rates.

- NHS England set out their '*Strategic Direction for Health Services in the Justice System: 2016-2020*,'¹¹ making commitments to quality assurance and evidencing real-life health outcomes that impact upon health inequalities and offending behaviour for people in prison. Moreover, the strategy document acknowledged that unmet mental health need pervades the prison estate and outlined a commitment to the development of a new mental health specification as a matter of priority.
- Nationally, commissioners are increasingly procuring Improving Access to Psychological Therapies (IAPT) services to improve offenders' access to primary mental health care. (IAPT is designed to provide faster access for people with depression and anxiety disorders to talking therapies such as Cognitive Behavioural Therapy (CBT)). While this should lead to a big improvement in support for prisoners with common mental health problems, those who present with co-occurring substance misuse and mental health problems (i.e. the majority) continue to "fall through the gaps".¹²
- PHE's Health & Justice Annual Review for 2015-16¹³ called for services to be better integrated, reducing unnecessary duplication of already overstretched resources. There is no doubt that greater integration in the assessment and case management of prisoners with substance misuse and mental health problems will avoid duplication, but a question remains regarding the availability of resources and effective recovery pathways to respond to the higher levels of need that will be uncovered.

Our Response

Forward has been screening prospective participants of our structured group-work programmes for symptoms of mental health problems for over 10 years, which has enabled us to make responsive and targeted adaptations to our programmes to meet the identified needs. Our approach has been to incorporate mental health interventions into our substance misuse services and train our staff, in order to be able to respond to prisoners with co-occurring substance misuse and primary (i.e. lower level) mental health problems. Clients assessed as having secondary (i.e. more serious) mental health problems are referred to specialist mental health services.

We have a well-established suite of accredited programmes, of varying lengths, which have been designed specifically to address the multiple and complex needs presented by the prison population. Our most established interventions are rooted in the 12 Step principles of Alcoholics/Narcotics Anonymous which are introduced to prisoners through extensive group therapy and engagement with mutual aid. The core 12 Step approach in these programmes is complemented by other evidence-based methods, such as Motivational Enhancement Therapy (MET) Seeking Safety and CBT and sessions addressing mental health issues.



"I have anxiety issues"



"My mind works overtime sometimes"



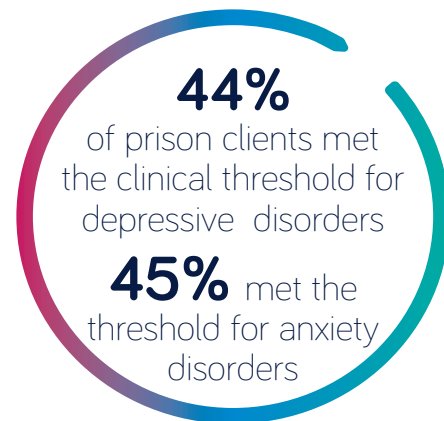
"When I have bad days I feel down and have negative thoughts"

Forward's CBT Delivery

Forward's delivery of CBT adheres to recognised best practice criteria (Landenberger & Lipsey, 2005)

- Targeted at high-risk offenders
- High completion rates
- Fidelity of implementation
- Content on anger management and cognitive restructuring

In April 2017, we extended systematic mental health screening to all clients who engage with our substance misuse services. As well as informing frontline care-planning, collecting this data allows us to better understand the needs of our clients and the impact of our interventions on their mental health and wellbeing. Analysis of the data collected to date shows that a significant proportion met the clinical threshold for depressive (44%) and generalised anxiety (45%) disorders. Just under a third of these clients warranted referral to specialist prison mental health teams as they had been experiencing moderately severe or severe symptoms (28% for depression and 37% for anxiety).



Given these insights, it is clear that responding to mental health symptoms should be an integral part of all substance misuse treatment, however brief the opportunity for intervention. Tackling these issues should also fall within a wider programme of personal development and recovery. That is why Forward has been developing a suite of standalone workshops and corresponding in-cell resources to complement our core treatment programmes. These are designed to support service users with their primary mental health needs alongside their substance misuse issues. Topics include:

- Stress and Anxiety Management
- Depression and Low Mood
- Decision Making and Impulsivity
- Healthy Relationships
- Sleep Problems

Mindfulness, which has a growing evidence-base, has also been incorporated into our service delivery and we are piloting an eight-session module to develop its practice.

Forward

Daily Mindfulness Part 4

By slowing down and paying attention to the thoughts, sensations and urges associated with eating, these exercises show that when observed, an automatic behaviour can actually offer a variety of different experiences.

Whenever you eat or drink something, take a minute and breathe. Look at your food and realize that the food was connected to something which nourished its growth. Can you see the sunlight, the rain, the earth, the farmer, the trucker in your food?

Pay attention as you eat, consciously consuming this food for your physical health. Bring awareness to seeing your food, smelling your food, tasting your food, chewing your food, and swallowing your food.

Our Impact

At Forward we have a long-standing commitment to developing evidence-based interventions that have a measurable impact on the lives of our service users.

Our core suite of structured programmes have undergone a series of externally validated outcome evaluations. We know that completers of our Substance Dependence Treatment Programme (SDTP) showed a 65% reduction in the volume of crime committed compared to participants of a less intensive prison-based programme.¹⁴ Our two 6-week interventions (Alcohol Dependence Treatment Programme (ADTP) and Bridge Programme) have been demonstrated to facilitate significant improvements on several aspects of psychological functioning (e.g. motivation to change; self-efficacy; social problem-solving skills) which are known to be associated with increased risk of re-offending and relapse.¹⁵

In addition, our most recent evaluation of the SDTP has also shown it to be effective in addressing symptoms of common mental health problems. Analysis of pre- to post-treatment scores on the Comprehensive Addiction and Psychological Evaluation (CAAPE)¹⁶ tool indicated that:

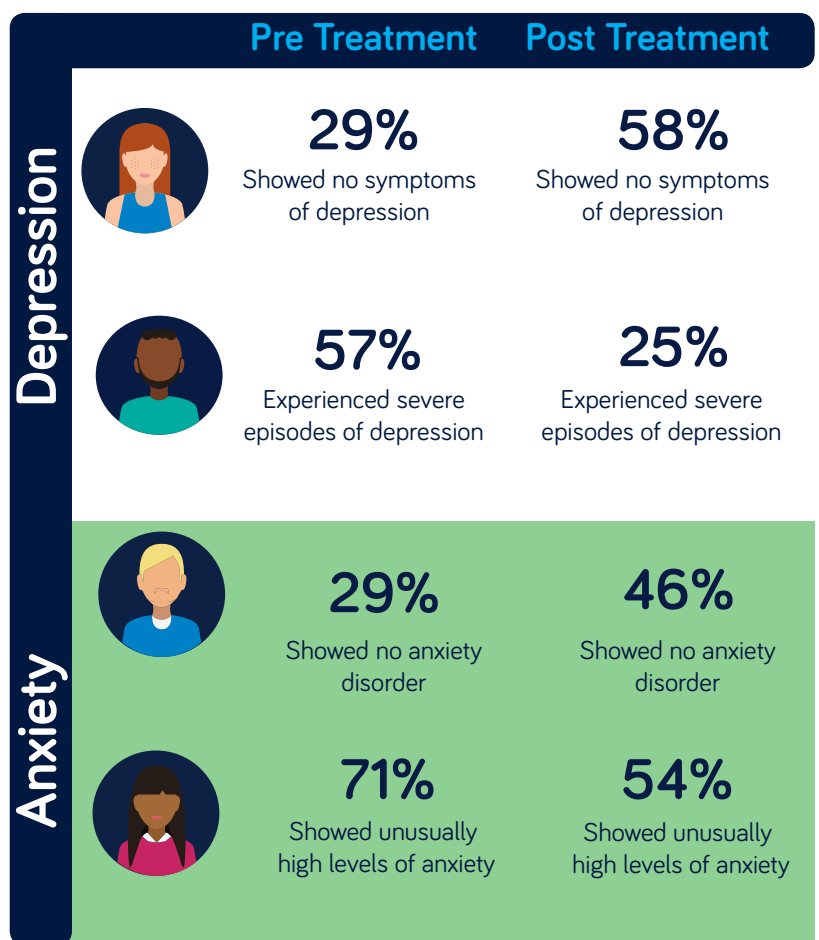
1. Far fewer participants were experiencing severe symptoms of depression or anxiety following treatment compared to before. In fact, after taking part in the programme the proportion experiencing the most severe symptoms dropped by almost a quarter for anxiety (71% - 54%) and over half for depression (57% - 25%).

2. At pre-programme assessment, participants met an average of 4 of the 7 criteria for depression and 2-3 of the 4 criteria for anxiety. At post-programme assessment, however, the average number of criteria met had reduced to 2 for depression and 1-2 for anxiety.

3. A much larger group of participants fell into the 'no disorder' category following treatment compared to the 12 months prior to engagement (58% vs. 29% for depression and 46% vs. 29% for anxiety).

In addition to statistical analysis, listening to what clients tell us about their experiences is another important way that we measure the impact of our interventions.

Through focus groups and satisfaction questionnaires, clients routinely tell us that engaging with Forward's services gives them the tools to change their lives for the better, enhancing their wellbeing and giving them a sense of hope. Quoted opposite is feedback from clients who use our mindfulness in-cell pack (referenced above) and take part in related workshops and interventions.





“I loved the mindfulness, it helps me get bad thoughts out of my head”



“Because of the meditation and things I’ve learnt, like the breathing technique, helps in managing the negative thoughts and feeling”



“I find myself doing most of the things I have learnt in my cell on a daily routine and I like it”

Further Development

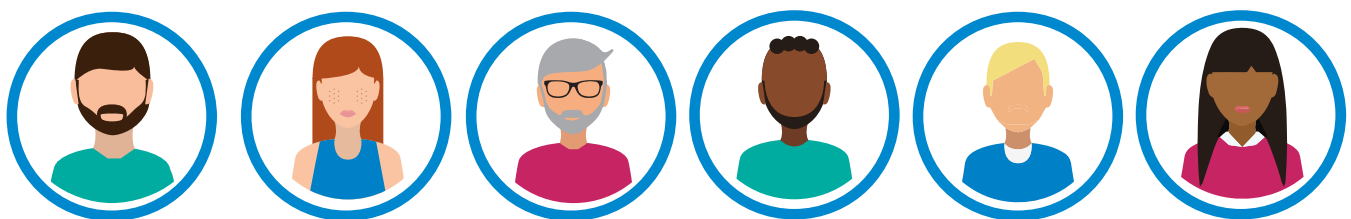
- It is clear from our research that responding to mental health symptoms should be an integral part of substance misuse treatment within prisons. To a large degree, the target groups for mental health and substance misuse services are the same people. In response to this need, Forward is increasingly delivering a comprehensive integrated approach which addresses generalised mental health and wellbeing within substance misuse services and facilitates smooth referral to specialist mental health services for more severe cases. We look forward to working with partners, Governors and commissioners to further develop and evidence this approach.
- Building on our evidence base, we are also seeking to screen clients for mental health problems (when appropriate) across our services - not only those receiving drug and alcohol treatment in prison, but also those accessing relationship and employment services in custody and the community. Forward has an unflinching commitment to reporting impact and we will continue to seek independent third-party validation for results wherever possible. This includes planned studies of the impact on re-offending of the full range of our interventions, via the MOJ's Justice Data Lab.
- We are always developing new interventions to expand our services in prison and community, with improved outcomes for mental health and wellbeing a driving force for innovation. Forward now offers clients a dynamic range of services that provide care and the inspiration to believe in change, backed up with clear opportunities for progression, facilitating the small steps that lead to lasting change. While every individual's journey is different and rarely smooth, our services are designed to help clients:

Pause – Providing clients with care and support to address their immediate needs, while giving advice on how to stay safe, providing space for them to think about what changes they want to make and what help they need from services.

Engage – Working with clients to assess their situation in more detail, build their motivation and self-belief and put together plans for making changes.

Develop – Supporting the clients who need it to go through structured programmes of support and personal development – either group based or one-to-one – designed to help clients move away from crime or addiction and towards healthy and independent lifestyles.

Prosper – Helping clients to maintain the progress they have made through practical help and engagement in positive networks.





Pause



Engage



Develop



Prosper

	Pause	Engage	Develop	Prosper
HEALTH AND WELLBEING	Assessment, triage, and harm reduction advice and information	1-2-1 support and group workshops to promote wellbeing and healthy behaviours	Pursuit of safe and healthy behaviours and activities that generate mental health and wellbeing	A long, contented and healthy life
DRUG AND ALCOHOL RECOVERY	Assessment and stabilisation of drug use. Immediate medical care and prescribing	Working on motivation to change, and skills for recovery Working through our	structured recovery programmes, engagement with support networks	Independent and positive lifestyle, free of crime and addiction
RELATIONSHIPS	Mapping and reviewing key relationships	Reaching out to family, friends and peers to develop positive connections	Working through difficult issues, building positive networks	Lasting, supportive and positive relationships with family and social networks
EMPLOYMENT	Assessment of employment status, and realistic job opportunities	Articulating dreams and ambitions; vocational skills and work-ready behaviours	Placement into real jobs or work experience	Economic independence, self-worth, career progression

Find out more

To find out more about our programmes and research contact Hattie Moyes, Research Manager: hattie.moyes@forwardtrust.org.uk

To find out more about the range of services that we provide or to discuss partnership opportunities with The Forward Trust contact Carwyn Gravell, Divisional Director of Business Development: carwyn.gravell@forwardtrust.org.uk

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