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**AGE, IMPRISONMENT AND SOCIAL RE-ENTRY:
EXPLORING THE NEEDS AND EXPERIENCES OF OLDER
OFFENDERS FOLLOWING RELEASE AND RESETTLEMENT
FROM PRISON.**

STEPHEN THOMAS PARTINGTON

A thesis submitted to the University of Huddersfield in partial fulfilment of
the requirements for the degree of MSc by Research in Criminology

The University of Huddersfield

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Abstract

This thesis is an exploratory study into the experiences of older ex-prisoners pre- and post-release from prison. Its theoretical framework draws upon convict criminology and intersectionality. Growing number of offenders aged over 50 pose unique challenges for the prison estate and for those involved in ex-prisoner resettlement. There are concerns that the criminal justice system is ill-prepared to meet these challenges. There is little research so far exploring the experiences of older ex-prisoners. This thesis contributes to this knowledge gap. The literature review identifies that there are concerns about the inadequacies of resettlement information, planning and support, which may involve breaches of human rights and equality legislation. An overarching concern is the implications of the absence of a national strategy for the lack of consistent and adequate provision for older prisoners and ex-prisoners. A small-scale qualitative research project was conducted involving thematic analysis of eight semi-structured interviews, two with older ex-offenders and six with professionals working with/in relation to older offenders. The researcher identified several problems recruiting older ex-offender participants, and ways in which these might be resolved in a larger scale project. The findings highlight many concerns regarding provision within the prison estate and community services, which included a lack of training, information sharing, and awareness among staff, combined with poor planning and resources. There is an urgent need for further research which identifies both the barriers and facilitators to resettlement among older ex-prisoners. There is a particular need to understand how older (higher risk) ex-prisoners are being dealt with by the Probation Service in comparison to those older (lower risk) ex-prisoners on CRC caseloads. The thesis makes the following recommendations: the production of a national strategy; the wholesale delivery of pre-existing toolkits on working with older offenders; the delivery of older age-specific training for CRC case managers.

Table of Contents

Abstract.....	2
List of abbreviations	6
Acknowledgments	7
1. Introduction.....	9
1.1 Overview.....	9
1.2 Background	10
1.3 Definitions.....	12
1.3.1 Older people.....	12
1.3.2 Older prisoners and ex-prisoners.....	13
1.3.3 Social re-entry, release and re-settlement.....	14
1.4 Legal contexts.....	15
1.5 Theoretical approach.....	18
1.6 Aims and objectives	19
1.7 Structure of the dissertation.....	20
2. Literature Review.....	23
2.1 Adults in prison: age differences.....	23
2.2 Older people in prison.....	24
2.2.1 Diverse issues and experiences	24
2.2.2 Health and social care needs	26
2.2.3 Significant relationships.....	29
2.2.4 Diversity issues	29
2.3 Community re-entry.....	31
2.3.1 Older age and re-entry.....	31
2.3.2 Housing, health and finances	34
2.3.3 Fear of the future	35
2.3.4 Vulnerability.....	35
2.4 Equality and human rights.....	36
2.5 A national strategy.....	37
2.6 Toolkits and guidance documents	39
2.7 Summary of literature and research gaps to be addressed.....	40
3. Methodology.....	42
3.1 Research design and approach	42
3.1.1 Design.....	42
3.1.2 Reflective research	42
3.1.3 Insider/Outsider research.....	42

3.2.	Methodology	43
3.2.1.	Data collection.....	43
3.2.2.	Interview design.....	44
3.2.3.	Qualitative approach	44
3.3.	Sampling and recruitment	44
3.3.1.	Sampling strategy.....	44
3.3.2.	Recruitment	45
3.3.3.	Participant profiles.....	46
3.4.	Analysis.....	47
3.4.1.	Thematic analysis.....	47
3.4.2.	Overview of themes	48
3.5.	Ethics.....	49
4.	Findings (A): Ageing and Imprisonment	51
4.1.	Lack of a national strategy and its consequences	51
4.2.	Journey of imprisonment.....	55
4.3.	Vulnerability and risk.....	58
4.4.	Faced with release	62
4.5.	Summary and concluding comments	65
5.	Findings (B): Ageing and Social Re-entry	67
5.1.	Resources.....	67
5.2.	Support options.....	72
5.3.	Forgotten or ignored?	74
5.4.	Filling the gap?.....	78
5.5.	Summary and concluding comments	82
6.	Discussion of Findings.....	84
6.1.	Research objectives.....	84
6.2.	Strengths and limitations.....	94
6.3.	Reflections.....	96
6.4.	Summary and concluding comments	98
7.	Conclusion and Recommendations.....	100
	Appendices.....	105
	Appendix 1: Interview Schedules.....	106
	Appendix 2: Invitation to Participate	110
	Appendix 3: Consent Form	114
	Statute, Standards and Regulations.....	117
	Bibliography.....	118

List of Tables

Table 1: Demographics by age	11
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List of Figures

Figure 1: Changes in prison population by age 2002-2016.....	11
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List of abbreviations

CRC – Community Rehabilitation Company

HDC – Home Detention Curfew

HMPPS – Her Majesty’s Prison and Probation Service

IPP – Imprisonment for Public Protection

MAPPA – Multi-Agency Public Protection Arrangements

MoJ – Ministry of Justice

NHS – National Health Service

NOMS – National Offender Management Service (now Her Majesty’s Prison and Probation Service)¹

NPS – National Probation Service

PSO – Prison Service Order

¹ As of April 2017, the National Offender Management Service is now called Her Majesty’s Prison and Probation Service: <https://www.gov.uk/government/organisations/national-offender-management-service>

Acknowledgments

When I finally graduated with a BSc (Hons) I was humbled. I recall all of the faculty staff, Lecturers, Administration, as well as those from the support services, disability services, and some auxiliary staff members who had seen me through the challenges of gaining the qualification. I left with photos of all those sharing in my achievement. That meant a lot and led to my decision to remain as a PGR researcher for my MSc(Res).

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despaired, and there became a point where I despaired. At this point I need to acknowledge Dr Sue. Someone I had known thirty-five years earlier and had become re-acquainted with just a year before. Dr Sue is a bully! Academically she bullied me into sticking with it. I then received an email from Andrew that was encouraging. Also, I became diagnosed with Asperger's, or ASD1 as it is now termed.

Each of these factors suddenly blended and I wanted to meet the challenge as best I could. I let myself be bullied by Dr Sue, I succumbed to providing my supervisors with drafts, I took on the challenge of keeping everyone informed, and listened, and acted on their advice where I felt able. This thesis could not have been completed without any of them being a part of the process.

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I hope I have done them all justice.

1. Introduction

1.1 Overview

This thesis is an exploratory study into the experiences of older people who have been in prison and then released. It is a small-scale study with the intention of informing a larger future research project. As prison populations in England and Wales experience a growth in the numbers of older inmates (House of Commons 2013) research is emerging which highlights the strains both the prison estate and older prisoners experience as a consequence (Howse 2003; Crawley and Sparks 2005; Aday and Wahidin 2016). With this increase the numbers of prisoners re-entering society as an older person are also likely to increase, presenting a unique set of challenges for both the individual and the services supervising them (Wiegand and Burger 1969; Williams and Abraldes 2007). There are concerns that the criminal justice system is ill-prepared to meet their needs (Cornish et al 2016).

The research focus has so far predominantly been on the prison estate's ability to cater for an ageing prison population (Wahidin 2006; Wahidin and Aday 2010). There has so far been little research which has explored the experiences of older ex-prisoners leaving prison and their resettlement in society. This thesis attempts to identify the unique perspectives of older people who have returned to society, and gain some understanding of the issues faced when doing so.

1.2 Background

As of December 2016 there were 79,350 adult offenders (i.e. aged over 21) held in prisons in England and Wales (Allen and Watson 2017). Of these, 8,386 (10% of the total prison population) were aged over 50, and 4,582 (5% of the total prison population) were aged over 60. The vast majority of these were men, with the average female population for 2016 being 3,854. Of the total population, 234 prisoners were aged 80 and over. The age breakdown of older prisoners as of December 2016 was: 219 aged between 80 and 89, 14 aged between 90 and 99 and one aged over 100 (MoJ 2017). A significant proportion (204 = 87%) had been convicted of sexual offences. In terms of prisoners between 50 and 80, the researcher was unavailable, despite extensive searching, to find a breakdown of their profiles (see Table 1, overleaf) which is more recent than that of the Ministry of Justice (MoJ 2014). This means that the age and offence profiles of offenders as of 2016 and the age and offence profiles of those between 60 and 80 at any date could not be identified. There has been an increase of 161% in those aged over 50 since 2002, which is higher than any other age group (see Figure 1 overleaf). Reasons for this include an ageing population (i.e. more people are living for longer and onto later old age, e.g. their 80s, 90s and even 100s), increases in sentence terms and a rise in older persons being convicted for historical sexual offences (MoJ 2014).

Table 1: Demographics by age

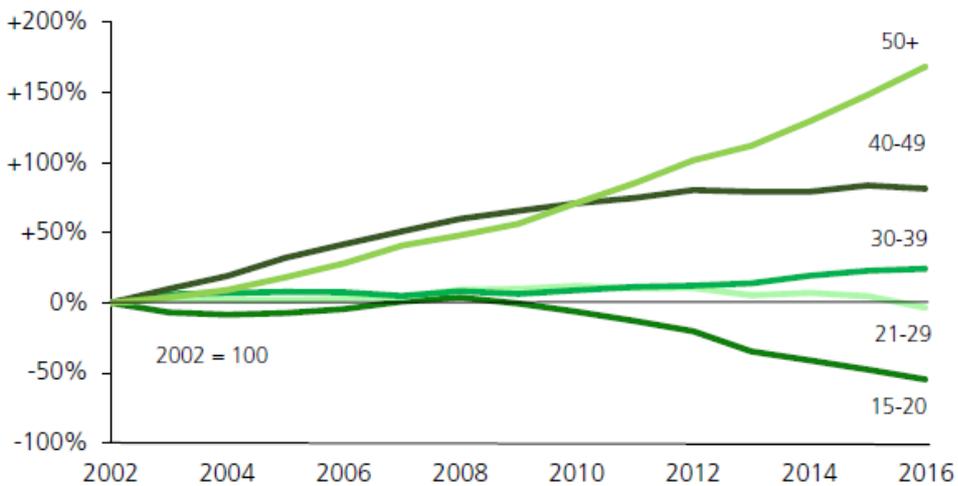
(Source: MoJ 2014)

Factor		18-49 (%)	50+ (%)	Total (%)
Gender	Male*	93	86	93
	Female*	7	14	7
Ethnic background	White	82	90	82
	Black, Asian or Minority Ethnic (BAME)	18	10	18
	Unknown	<1		<1
Age				
Under 50	18-20	17	-	16
	21-24	22	-	21
	25-29	20	-	19
	30-39	27	-	25
Over 50	40-49	15	-	14
	50-54	-	49	3
	55-59	-	27	1
	60-69	-	21	1
	70+	-	3	0.2
Marital status				
Marital status	Single*	57	17	55
	Living with a partner*	28	10	27
	Married*	9	35	10
	Divorced*	4	29	5
	Separated	2	4	2
	Widowed*	<1	4	<1
Total		2,056	115	2,171

Figure 1: Changes in prison population by age 2002-2016

(Allen and Watson 2017)

Prison population percentage change by age, 2002-2016



1.3 Definitions

1.3.1 Older people

The term 'older person' is not clear-cut (Phillipson and Dannefer, 2010). Chronological age alone can no longer be used to determine what constitutes an 'older person'. This is due to increased lifespan and healthier living standards (Sanderson and Scherbov, 2015). The NHS, Age UK (2011) and the Centre for Aging Better (2015) give the starting point of older age as 50. However, this is not universal, and may not always be helpful, partly because of the way society views older people (in terms of ageism, Bytheway 2005) and partly in terms of the way the person views themselves (so that someone who is 50 may not view themselves as older (Weiss and Lang 2012)).

The term 'elderly' has previously been employed in ageing literature but is now discouraged:

...using the term elderly for a person who is robust and independent as well as for a person who is frail and dependent says little about the individual. Since older individuals become more heterogeneous with age, a specific descriptor such as elderly is inaccurate and misleading...The term elderly is ageist.... The term older adult or older person is respectful and should be the standard term used... (Avers et al 2011 p153)

The National Service Framework for Older People (DoH 2001) has identified three key stages to 'older age'. The first is 'entering old age' (coming to the end of working life); the second is the 'transitional phase' (the point at which a person experiences transitions from an independent existence to increased dependency on others); the third is 'frail older people' (the point

at which the body and the mind enters its later stages of deterioration and dependence upon others may constitute the whole life experiences). This framework will inform how 'older people' in general and older prisoners and ex-prisoners are conceptualised in this thesis.

1.3.2 Older prisoners and ex-prisoners

Determining what constitutes an older person in prison has provoked much debate, though a common starting point of 50 years of age has become recognised (MoJ 2014) If, however, the idea of accelerated ageing is accepted, which suggests that prisoners 'age' ten years ahead of the general population (Cooney and Braggins 2010), this would mean that a prisoner aged 40 has the physical and mental characteristics of someone aged 50 who is living in the community. If 50 is considered to be the starting age for an older person in the community, 40 may be a more appropriate for those in prison.

Older offenders vary according to chronological age, and level of functionality, as well as gender, ethnicity, and disabilities. There is also considerable variation between prisoners of a similar age. For example, two 50-year-old prisoners may be functioning differently: one able to work and be engaged in a relatively active lifestyle; the other perhaps suffering from the long-term effects of drug and alcohol use, and of imprisonment, and so unable to work. This also varies further in relation to whether an older prisoner has aged in prison, i.e. on a long-term sentence, aged in-and-out of prison, i.e. repeat offenders, or has come into prison for the first time in older age.

There has been a recent increase in the numbers of older people entering prison for the first time as a result of historical sexual offences, 32% of whom are aged 50-59, and 59% aged 60 and over (MoJ 2014). Many of these individuals may enter prison with a wide range of pre-existing health and social care needs. Currently the oldest person convicted of historical sexual offences is Ralph Clark (101 years old), who received a thirteen-year sentence in 2016 (BBC News 2016). Given their diversity, across this thesis, when considering 'older offenders' consideration will be given to the common issues and concerns they share, and also the different issues and concerns they have based not only on age but also level of functioning.

1.3.3 Social re-entry, release and re-settlement

Maruna (2011) describes prisoner release and resettlement as 'turning prisoners back into citizens' (p. 4) and that 'successful reintegration is a two-way process, requiring both effort on the part of the former prisoner (e.g. desistance, repentance), but also on the part of some wider community (e.g. forgiveness, acceptance)' (p. 13). Vishner and Travis (2003) suggest that this process consists of four sets of factors: personal and situational characteristics which include peers; family; community; and state-level policies. The Social Exclusion Unit (2002) has identified several key 'resettlement pathways'. Briefly, these are: accommodation; education, training and employment; mental and physical health; drugs and alcohol; finance; benefit and debt; children and families of offenders; attitudes, thinking and behaviour (Home Office 2004).

The Ministry of Justice report (MoJ 2014) into the needs characteristics of older offenders suggested that there was little difference between young and old as to what would constitute successful re-integration and reduce offending. However, the research literature would suggest otherwise. For example, Crawley (2004) found that there was indeed a difference and that older prisoners had higher levels of anxiety about being released. Many older ex-prisoners face additional challenges in rebuilding their lives due to their age, health, and increased social care needs, and in some cases the nature of their offence (e.g. older sexual offenders) (Davies 2011; Forsyth et al 2015).

1.4 Legal contexts

Across the board the numbers of those supervised within the community have also increased as part of the UK coalition (2010-2015) government's rehabilitation revolution, which saw part of the Probation Services split and the creation of Community Rehabilitation Companies (CRCs) in 2015. The result of this is that now every person who is sentenced to more than a day in prison is placed on supervision following release, with the CRCs supervising lower to medium risk categories and the Probation Service maintaining supervision of higher risk individuals (The Offender Rehabilitation Act 2014). Little is yet known about how older ex-prisoners experience their involvement with either service.

The Care Act 2014 has placed an obligation upon local authorities by introducing a statutory framework for social care in prisons (RECOOP 2014) to provide appropriate and equal assessment of needs for older prisoners

in line with the provisions for those living within the community. It places an obligation on local authorities to provide assessment and support to those individuals with eligible needs who either have current links to an area or are likely to leave prison and reside in a specific local authority's jurisdiction (HM Government 2016). The National Framework for Older People (Department of Health 2001) further places an obligation on a local authority by stating in Standard 2: Person Centred Care. 'To ensure that older people are treated as individuals and that they receive appropriate packages of care which meet their needs as individuals, regardless of health and social care boundaries.' Whether and how local authorities are compliant with each will be discussed in Chapter Two.

Equality and human rights in the UK are covered under the Equality Act 2010 and the Human Rights Act 1998. Both have relevance for older prisoners and ex-prisoners. The Equality Act 2010 replaced previous anti-discrimination laws with a single Act. It also added new protections in relation to age discrimination (Government Equalities Office 2011). The Act has nine protected characteristics: age, disability, gender reassignment, marriage and civil partnerships, pregnancy and maternity, race, religion and belief, sex, sexual orientation. It makes it against the law to directly or indirectly discriminate against anyone because of those protected characteristics (EHRC 2016). Direct discrimination is when you are treated worse than someone else in a similar situation due to one of the protected characteristics covered by the Act. For example, if a person is denied access to rehabilitative programmes as a consequence of their age, this would be direct discrimination. Indirect discrimination happens when an

organisation has a particular policy or way of working which applies to everyone but puts those covered by the protected characteristics at a disadvantage. For example, if the rehabilitative process in prison favoured younger people, this would be indirect discrimination. Discrimination can be lawful if a particular practice is required to meet the needs of a particular group in relation to the protected characteristics. For older prisoners, the key protected characteristics are age and disability although other protected characteristics will also be relevant.

Section 148 of the Act also sets out the 'Equality Duty' ensuring that public bodies 'consider the needs of all individuals in their day to day work' (p. 3). Schedule 19 of the act lists those public bodies, which include criminal justice agencies. Prisons, both public and private sector, are obliged to comply with the Equality Duty as confirmed in Prison Service Order (PSO) 32/2011 which replaces the following previous Prison Service Orders (PSO): PSO 2800 – Race Equality; PSO 2855 – Prisoners with Disabilities; PSI 2008/31 – Allocation of Prisoners with Disabilities; PSI 2009/25 – Equality Impact Assessments.

The Human Rights Act 1998 incorporated the European Convention on Human Rights (ECHR) 1951 into UK law. The Act is of significance to older people in three key ways (BIHR 2012; Age UK 2015): Article 3, the right not to be tortured or treated in an inhuman or degrading way; Article 8, the right to respect for private and family life, home and correspondence; Article 2 the right to life. The Public Sector duty also places an obligation on all government agencies to comply fully with the Act.

1.5. Theoretical approach

The theoretical frameworks drawn upon in this thesis are those of Goffman, convict criminology, and intersectionality. Goffman (1963) highlighted the significance of stigma: 'The phenomenon whereby an individual with an attribute which is deeply discredited by his/her society is rejected as a result of the attribute.'(page 3). While stigma is of significance to all offenders, it is particularly significant for older offenders, who are affected by both the stigma of criminality and the stigma of older age (Bytheway 2005).

Convict criminology is a collection of individuals who believe that convict voices have been ignored, minimized, or misinterpreted in scholarly research on jails, prisons, convicts, correctional officers, and associated policies and practices that affect these individuals (Ross et al 2016 p491). The movement which started in the 1990s in the United States of America (USA) where having a criminal record can result in an individual being denied access to a wide range of resources, including education. Several criminology academics studying offenders realised that even ethnographic approaches did not provide sufficient insights into their experience, and that they needed to be actively involved in the research itself (Ross, Zaldivar and Tewksbury 2015). This led to the convict criminology movement, which promoted education for prisoners and ex-prisoners, and research projects conducted by both offender-criminologists and non-offender criminologists. In 2011 it was adopted in the UK (Ross et al 2014). Convict criminologists critically examine the literature from the perspective of lived experience and the state's position of power and the position of punishment theories of crime and desistance (Jones et al 2009). This is an approach and position

relevant to the researcher, who takes a critical approach to criminology, i.e. is interested in the voices and experiences that are under-represented in policy, practices and research, and who is also a convict criminologist (see Chapter Three). This critical approach supports thinking about how older offenders may be marginalised in policies, practices and research.

Intersectionality was first introduced in the late 1980s by Black American feminist scholars in recognition that Black women experienced intersecting oppressions because of their colour, gender and class (Crenshaw 1991). It has developed as a means of examining 'the social location of individuals within interlocking systems of oppression' (Fader and Taylor 2015 p. 247). There is increasing use of intersectionality in criminology, sometimes explicitly (Potter 2015) and sometimes implicitly (Potter 2013 p. 310). However, it has not yet been explicitly applied with regards to older offenders. This thesis applies intersectionality by considering how the lives of older people within the criminal justice system are shaped through multiple social identities of disadvantage including older age itself.

These three theoretical approaches will be tied together through thinking about the stigmatization of ageing identities, the intersectionality of those identities, and by placing the narratives of older offenders at the centre of critical analysis.

1.6. *Aims and objectives*

The aims and objectives of this study are as follows:

1. To explore the experiences of older persons who have been in, and released from prison.

2. To explore the processes (i.e. the procedures, systems and strategies) in place for older people transitioning from imprisonment to social re-entry.
3. To explore how both older age and imprisonment interact to affect an older person's social re-entry.
4. To better understand the age-specific needs of older persons in relation to release and resettlement.

1.7. *Structure of the dissertation*

Chapter Two reviews the current literature on older offenders both in prison and the community, and the social and legal contexts in which they do so. It identifies that the needs of older offenders are not being consistently met both in and out of prison. There are particular concerns about the inadequacies of resettlement information, planning and support with regards to the release of older people from prison. Several authors have argued that there are a number of areas in which both human rights and equality legislation are being breached. An overarching concern is the lack of a national strategy, which many consider to be a central factor in the lack of consistent and adequate provision for older prisoners and ex-prisoners. The literature review also highlighted a wide range of knowledge gaps and research that is needed, which have in turn been linked in with the research objectives of this thesis.

Chapter Three describes the methodology for a small-scale qualitative research project involving thematic analysis of eight semi-structured interviews, two with older ex-offenders and six with professionals working

with/in relation to older offenders, exploring the needs of older prisoners following release from prison. The researcher addresses recruitment problems he encountered which resulted in the small sample size, and the low numbers of ex-prisoner interviewees, and identifies ways in which this might be resolved in a larger-scale project.

Chapters Four and Five report on the findings from that empirical research. Chapter Four addresses ageing and imprisonment and Chapter Five ageing and social re-entry. The researcher chose to split the findings into two chapters in order to have sufficient space to analyse the data in sufficient depth to maximise the insights to be gained from a small sample size. Chapter Four highlighted many concerns regarding provision within the prison estate and community services, which included a lack of training, information sharing, and awareness among staff, combined with poor resources. A national strategy was identified as needed to provide clarity for both training front line workers and providing a package which recognises and responds to the needs of older prisoners and ex-prisoners. The chapter also raises a number of equality and human rights concerns, and key areas for future research.

Chapter Five reflects on the limited number of interviews with ex-prisoners, which meant that it was difficult to establish a comprehensive understanding of the resettlement experience and process. The two ex-prisoners who were interviewed spoke of a resettlement experience which lacked information, preparation, advance notice, and as a consequence they were left not knowing what to expect, with considerable uncertainty and anxiety as a consequence. They felt that there were insufficient resources

and support available to them once they had returned to the community. In terms of the professionals who were interviewed, the CRC case managers expressed a lack of knowledge, limited experience and uncertainty in working with older ex-prisoners. All of the professionals interviewed expressed concern about inadequacies in preparation for, and actual release of older prisoners. The findings again highlight the need for further research in this area.

Chapter Six discusses the key findings from this project, which are that: a) that the lack of a national strategy seems to be having a detrimental effect on the delivery of services, and in turn on the lives of older people being released from prison; b) they raise questions about the quality of information being filtered down to both prisoners preparing for release and offender managers who supervise them following release; c) issues of inequality and discrimination have been raised in relation to older prisoners, ex-prisoners, services and support; d) there is a clearly demonstrated urgency for these concerns to be addressed, particularly in the context of an ageing prison (and ex-prisoner) population.

Chapter Seven provides a summary of the thesis and makes policy and research recommendations. These include: the production of a national strategy; the wholesale delivery of pre-existing toolkits relating to working with older offenders; and the need to address training gaps, and the knowledge of practitioners in order to provide them with the skills required for working with older ex-prisoners. Key areas of further research are also proposed.

2. Literature Review

This section reviews the research literature on older offenders in prison and the community in relation to the central research objectives, as outlined in Chapter One.

2.1. Adults in prison: age differences

Research suggests that there exist significant differences between older inmates and their younger counterparts with regards to health, mobility and everyday life, as well as preparations for release, and ultimate release (Wahidin 2011; Mann 2012). Contributing factors associated with the pains of imprisonment (Sykes 1958), such as loss of liberty, autonomy, and the consequent frustrations, become exacerbated for older prisoners as not only must they adapt to a regime that is largely suited to younger, more able-bodied inmates, but also, where physical impairments exist, further barriers are created that exclude older inmates from participating in wider opportunities available to others. The assertion that prisons are a 'young man's game', Crawley and Sparks (2005) argue, 'masks the dimensions of age at the levels of policy and research' (p. 344).

Evidence suggest that a significant lack of age-related policies and practices in some prisons create a situation whereby older inmates' 'pains' are doubled (Crawley 2005; Ginn 2012). Older prisoners have until recently been a relatively hidden minority (Wahidin 2004; Crawley 2005; Crawley and Sparks 2005) with the UK government showing little appetite for producing a national strategy which addresses their needs (House of Commons Justice Committee 2013).

Health issues are markedly different for older and younger prisoners. Fazel et al (2001) reported that 85% of prisoners aged 60 and above had either one or more major illness, with 83% reporting at least one chronic illness. The Ministry of Justice (MoJ 2014) has also reported that 31% of older prisoners (aged 60 and over), compared to 14% of younger prisoners needed assistance with a medical problem, with 59% older prisoners compared to 27% younger prisoners reporting a longstanding illness or disability.

2.2. *Older people in prison*

2.2.1. Diverse issues and experiences

There are three career pathways for older prisoners: those who have aged in prison; those who have aged in-and-out of prison and those who have entered prison in older age. Humblet (2015) raises the challenge for criminologist and penologist in considering the variability in the ageing process, affected by 'biological, psychological, environmental and social aspects throughout the life course' (p.15) and the diverse pathways of both imprisonment and ageing. With regards to the perception that older people in prison experience accelerated ageing she argues that the deprivations experienced over the life course are in line with what gerontologist refer to as cumulative (dis)advantages (Dannefer 2003) which manifest themselves in later life, and that the prison environment itself may fuel the knock-on effect of cumulative deprivations. This needs to be further refined in relation to the age and functionality of an older prisoner (see Chapter One) and also whether that person (drawing upon the Department of Health Framework

2001) is 'entering old age', in 'transitional phase' or belongs to the category of 'frail older people'.

For someone entering prison for the first time in later life, this can be an especially daunting experience. Anxiety and depression may occur as a consequence of what Crawley and Sparks (2005) refer to as 'relocation stress', that is being removed from the relative comfort of their former life within society and placed within an environment that is both alien and hostile. For all older prisoners encountering age-related disabilities and deteriorations, there is a heightened sense of vulnerability. This is due to their increased reliance on others for support, limitations of mobility restricting their access to certain areas of the prison, and the increased risk of intimidation and bullying by their younger peers. Where their offences are sexually related, they may be further at risk from increased isolation from other inmates and activities as well as there being a greater potential for physical threats (Stojkovic 2007).

Some older people, particularly those in the 'transitional' and 'frail older people' phases, will no longer be able to work. They will receive a small prison pension, but this is less money than that given to those prisoners still able to work (House of Commons Justice Committee 2013), putting them at a financial disadvantage. In terms of social life, given the relatively small number of older people in any prison establishment, activities are geared up more for the younger prisoners (Haggith et al 2016), with limited age-specific activities.

Older offenders may also experience stigma and prejudice from younger prisoners due to ageism (Bytheway 2005), although this can depend on their ability and criminal past. Status is accrued in prison by certain offences (Cavadino and Dignan 2007). The Hatton Gardens offenders - a group of older criminals who committed possibly the largest burglary in the UK (Campbell 2016) will, for example, be held in high regard by many other prisoners. However, those older prisoners who do not meet those high-status conditions could become victimised both because of their older age and especially if they have committed sexual offences (Baidawi, Trotter and O'Connor 2016). This is particularly relevant with regards to current older offenders because there has been one of the largest increases of older people in prisons due to older people being convicted of historical sexual offences (House of Commons 2013).

2.2.2. Health and social care needs

Older people in prison present with multifaceted care needs not dissimilar to those within the community (O'hara et al 2015). Physical and mental deterioration associated with ageing (Gale, Cooper and Sayer 2015) can be exacerbated by the prison experience as well as prior lifestyle choices such as drug and alcohol use issues. A person in prison of 50 years of age could present with symptoms more common for someone in the community who is ten years older (Cooney and Braggins 2010). Kingston et al (2011) found that older inmates suffered from high rates of psychiatric disorders, which were under recognised and under treated. Davoren et al (2015) also reported that both older men and women prisoners suffered higher rates of mental illness compared to younger prisoners and older people living within

the community. Both studies found that depression and alcohol-related disorders were the most common issues affecting the health and well-being of older prisoners. For 'frail older' prisoners, particularly those facing life-threatening illnesses, or considering their frailty, thoughts of death and dying, and a predominant desire not to die in prison, can be a preoccupation (Aday and Wahidin 2016).

Access to health care professionals, diagnoses and appropriate treatments has also been found to be a problem (Prison Reform Trust 2008). As early as upon reception (into prison) medication previously prescribed by an 'outside' GP, for example, medications for heart conditions or diabetes, may not be permitted to pass into prison, with delays in being re-prescribed, and receiving, much-needed medication (Bowen, Rogers and Shaw 2009; Sullivan et al 2015). Maschi et al (2012) found evidence that dementia is high amongst the ageing prison population and continues to rise, but with a lack of skilled and qualified staff to recognise symptoms it is not always adequately diagnosed and treated. Moll (2013) reported that there is a 'dearth of provisions for older prisoners' (p.8), particularly those who have dementia. The Prison and Probation Ombudsman (2016) has acknowledged the unique challenges facing prisons in providing prisoners with dementia with appropriate care and support.

Older prisoners are at increased risk of cardiovascular, respiratory and endocrine health problems (Fazel et al 2001 and 2004) and these, together with associated physical disabilities can all contribute to the isolation, limitations of access and onset of additional well-being concerns (Hayes et al 2012 and 2013). Mobility can be one of the most challenging aspects of

prison life for older people who suffer with physical infirmities which restrict their ability to participate in a range of activities, particularly as the architecture of many prisons is not suitable for frail older people:

Only a small number of older prisoners are fortunate enough to reside in a prison which has allocated budget to the purchase of mobility aids, such as grab rails, stair lifts and standing frames' (Haggith et al 2016 p. 37).

Such restrictions can have a profound effect on the mental wellbeing of the individual (Hayes et al 2013; Barry et al 2016). There are some prisons, such as Northumberland Prison, which have units specifically for an older prison population, and programmes which aim to provide a sense of community for older prisoners (Kennedy and Kitt 2013). However, this is presently being done in a piecemeal way (Maschi, Viola and Sun 2013).

The Department of Health 'Pathway to Care for Older Offenders' (2007) has been overtaken by the Care Act in some ways but it remains important in its emphasis on integrated working between criminal justice, health and social care services both whilst an older person is in prison, and following release. Senior (2012) argued, prior to the implementation of the Care Act 2014, that there was an 'apparent lack of understanding of what constitutes "social care need" within a prison institutional setting' (p. 5). However, despite the publication by the UK government 'Caring for our Future: Reforming care and support' (HM Government 2012), and the subsequent implementation of the Care Act 2014. O'hara et al (2015) found that 'statutorily provided social care is often non-existent in prison, due to the lack of understanding of what it constitutes and who is responsible for its provision' (p. 279).

2.2.3. Significant relationships

Older prisoners are much less likely than younger prisoners to have ongoing supportive relationships in the community, and to have visits from family members and/or friends (Crawley and Sparks 2005; Hayes et al 2015; Brunton-Smith and McCarthy 2016). If they have been repeat offenders, going in and out of prison, moving around without a stable home - there are limits to how long the council will hold open a tenancy for someone in prison - their chances of maintaining stable relationships in the community are also low. They are more likely to have broken relationships and less likely to have continuity of relationships than younger prisoners. Those older prisoners who have aged in prison are less likely to get visits when they are older. As they age, their partners may have died, or become too disabled to visit, they might end up being the sole survivors of their families, or their families may have distanced themselves, and these can all be factors in them receiving fewer visits. These factors mean that older prisoners are more likely to be isolated from the outside world while they are in prison (Codd 2007; Mann 2012), which in turn contributes to the challenges they face when they return to the community.

2.2.4. Diversity issues

Older prisoners are differently affected by age-related physical and mental health issues and their experiences of imprisonment, according to gender, race and ethnicity (Harris, Hek and Condon 2007). However, there are disproportionately fewer older prisoners from black and minority ethnic (BME) backgrounds, as in society generally, because of migration patterns,

which mean that BME people are younger than the general population, and many BME people are only now beginning to move into the older age category (Harper 2006). With regards to gender, many of the issues previously identified apply to both female and male prisoners. However, 'there is a prison system for men, and women are everywhere tacked on in an awkward after-thought' (Stern 1998 p. 141 quoted in Wahidin 2011 p. 121). As the Corston report (2007) observed 'prison is disproportionately harsher for women because prisons and the practices within them have for the most part been designed for men' (p. 3). Older women are disadvantaged in similar ways to older men, especially those in the 'transitional' or 'frail older' phases, with their needs being ignored or overlooked (Wahidin 2004, 2007 and 2011). However, due to the relatively smaller numbers of older female prisoners this group has also been described as a 'double minority' (Handtke et al 2015) as a minority of older women amongst a minority of women within prison. The result of this is that they are further obscured and awareness and understanding of their age-related, gender specific needs are as well.

Aday and Farney (2014) highlight gender specific health care problems for older women in prison. Examples of these include limited access to health screening, i.e. routine screening for breast cancer and cervical cancer (Wahidin 2004; Wahidin and Aday 2005; Wahidin 2011). Consequently, there is a risk of later diagnosis, delays in appropriate treatments, and potentially poorer outcomes than older women who are not in prison (Wahidin and Aday 2012). Women prisoners in general have been found to be more likely than the male population to be affected by mental health

problems. The Corston report (Home Office 2007) observed that mental health and self-harm in prison is more prevalent among women than men. For example, while outside of prison men are more likely to commit suicide, in prison it is more likely to be women who do so. There is sparse dedicated support for the social support needs of older women prisoners. An exception to this can be found in the Rubies Project at Eastwood Park Prison, a weekly two-hour support group for older women, which attempts to fill the void created by a lack of clear direction provided to the prison staff (Annison and Hageman 2015).

The issues highlighted for both men and women, and the gendered differences experiences by each, demonstrate how a more comprehensive and distinct approach is needed to adequately respond to the needs of older people across the two estates. As the Home Office (2007) has observed: 'equality does not mean treating everyone the same because similar treatment affects people differently' (p. 23).

2.3. Community re-entry

2.3.1. Older age and re-entry

For some older prisoners, community re-entry may occur many years after sentencing, especially for those serving a life sentence or IPP² prisoners. However, for all older prisoners, regardless of when they are released, returning to society presents an array of age-specific issues which need to be better understood (Williams and Abraldes 2007; CLINKS 2014). Very

² Sentences of Imprisonment for Public Protection (IPPs) were created by the Criminal Justice Act 2003 and abolished in 2012. Their aim was to protect the public from serious offenders whose crimes did not justify a life sentence.

little is known at present about the release and resettlement process experienced by older inmates, and their re-integration into society (Davis 2011; Kennedy and Kitt 2013; Forsyth et al 2015). It is currently recognised (DoH 2007; Cornish et al 2016; Prison Reform Trust 2016) that many older prisoners have 'complex and often unmet, health and social care needs both in prison and following release' (DoH 2007).

For those older people who have served a lengthy period of incarceration, and for those convicted of historical sexual offences, release back into society can be as daunting as going into prison in the first place. For some, the outside world will be as alien to them as prison may have first felt as developments within society, especially those relating to technological advances present a whole new world (Age UK 2011). For a significant number of older ex-prisoners the use of plastic cards, using the internet or mobile phones may be completely new. Those who have lost contact with friends and family are left to rely on support services to enable the transition, for instance accessing finances, housing and health service providers.

With regards to older prisoners, Cornish et al (2016) have observed:

Resettlement support is often provided in silos. Distinct interventions for housing, employment, personal finances, drug dependency, and family relationships, if not well co-ordinated, can result in a lack of coherence for the offender. Breakdowns in communication and conflicting objectives can make resettlement a riskier and more unsettling process' (p. 15).

The co-ordination of services is an important factor in ensuring older prisoners' anxieties about release are lessened. Knowing what is available to them upon release, knowing where they will be living, how to access

finances and who and where to turn to for support can make a big difference to the psychological well-being of older prisoners. Many people coming out of prison, regardless of age, have profound needs (Edgar et al 2012), but older offenders have specific needs relating to older age. Prison Service Order 2300 'Resettlement' sets out mandatory requirements for the management and delivery of resettlement for prisoners. Yet there is no specific guidance in relation to older people. CLINKS (2015) have pointed out that the Offender Rehabilitation Act (2014) also fails to refer to older offenders. The Department of Health guidance (2007) recommended that: a resettlement strategy should take into account the health and welfare needs of older prisoners; that release planning should be informed by a complete assessment; and that this should 'be used to inform the whole release event, and where necessary ensure that planning with external organisations (e.g. housing, NHS, social care) occurs to enable safe and appropriate release for those prisoners who may be vulnerable or at risk because of their age or medical condition' (p. 26). However, Forsyth et al (2015) referring to the guidance observed 'Existing guidance outlining the need to plan for older prisoners' release from entry into prison is generally not adhered to' (p. 2023). This, they argue is 'resulting in a discontinuity of care' (p. 2023) and that as a result the perceptions of older prisoners is that 'they just throw you out' (p. 2011), and that because of this they experience high levels of fear and anxiety, both in preparing for and following release.

The Care Act 2014 has taken over from this guidance, but only relates to those older prisoners with eligible needs (see Chapter One), and so it is still

relevant for those prisoners whose needs are not eligible under the Act. A crucial issue is cost (Maschi, Viola and Sun 2013). If the prison system is already under strain with regards to resources and finances, the cost of implementing new arrangements for older prisoners – even though the Care Act stipulates that the prison authority is under obligation to meet the specific needs of every prisoner – could be regarded as too high (Haggith et al 2015).

2.3.2. Housing, health and finances

Housing and health are significant issues to be addressed prior to release (Appleton 2010). However, Forsyth et al (2015) found that there is a lack of information for older inmates regarding accessing appropriate housing, which benefits they are entitled to and how to apply for them, and, for those who are of pensionable age, how and when to apply for their pension. Forsyth et al also found that anxiety was highest amongst those who lacked a personal social network and who were being released into approved premises, although once released those who entered approved premises were more likely to have their immediate health and social care needs met than those who had their own address to go to.

Additionally, accessing funds such as benefits and pensions can place additional vulnerabilities if those avenues have not been explored in anticipation for release. Delays in receiving some measure of financial support upon release can increase anxiety and frustration (CLINKS 2014). Guidance is offered by the prisoner charity UNLOCK and The Prisoners Family and Friends Service (2016) providing information about benefits,

discharge grants and pensions, each of which recommends that the process begins pre-release. However, there is no single universal 'release package' for older prisoners available for all establishments.

2.3.3. Fear of the future

Such inadequacies compound the fears that are generated on the approach of a release date for older prisoners. Crawley and Sparks (2006) noted that for older prisoners a belief that they had 'nothing to go out to' and 'too little time left to start over' (p. 63) can have profound negative consequence for their psychological well-being, increasing the risk of suicide or continuing a life of criminal activity. The continued lack of consistent targeted support for older prisoners, Codd and Bramhall (2002) suggest, constitutes 'discriminatory systems and practices' (p. 27) resulting in older people leaving prison struggling to fully re-integrate back into society.

2.3.4. Vulnerability

Older people generally run a greater risk of being vulnerable and potential victims of discrimination and abuse (Wahidin and Aday 2010). For many older prisoners leaving prison the sense of vulnerability arises in part from their anxieties about what life outside of prison would be like, especially where release planning has been found wanting, and their awareness of their growing frailty, as well as additional concerns for those with a history of sexual offending, who may be marginalised and/or victimised in the community (Davies 2011). Where there is a failure in the continuity of care the 'pains of release' can, for some, be equal to the pains of imprisonment (Forsyth et al 2015).

2.4. Equality and human rights

One of the areas reviewed by the Justice Committee in gathering information about older offenders (House of Commons Justice Committee 2013) was 'whether the treatment of older prisoners complies with equality and human rights legislation' (p. 6). Concerns in this regard were raised by many of the 43 individuals and agencies who submitted evidence to the committee. Sean Humber (House of Commons Justice Committee 2013 Ev 10) highlighted the lack of disabled facilities across the prison estate generally, leaving disabled prisoners, many of whom were older, 'unable to fully participate in many of aspects of prison life'. He raised the concern that for disabled prisoners there was a 'lack of strategic oversight' across the estate. He also argued that as a result older prisoners experienced an 'isolated, excluded existence' amounting to unlawful discrimination on the grounds of disability and/or age.

Evidence by RECOOP (House of Commons Justice Committee 2013 Ev 59) pointed to a system which favours the younger prisoner and lacks alternative 'meaningful and purposeful activities' for older prisoners (i.e. those in the 'transitioning' and/or 'frail older' phases). As with previous evidence they acknowledge that some establishments are making some efforts to respond to the needs of older and disabled prisoners but that this is inconsistent, including in relation to the monies paid to older prisoners who are no longer able to work. They argued that these shortcomings could lead to possible litigation for failure to comply with equality and human rights legislation.

Leigh Day Solicitors (House of Commons Justice Committee 2013 Ev 68) stated that over recent years they have been approached by increasing numbers of older prisoners with concerns about a failure to (a) allow them

to fully and fairly participate in the prisons regime; (b) to provide adequate health and social care; and (c) to adequately assess and address their disability needs. They conclude that prisons are not complying with their obligations under the Equality Act 2010 and the Human Rights Act 1998. Age UK (House of Commons Justice Committee 2013 Ev 79) echoed this and also questioned whether prison authorities were compliant with the Public Sector Equality Duty.. Wahidin (House of Commons Justice Committee 2013 Ev 12) questioned the lack of resources and adaptations needed to enable female inmates, including older females, to properly, and with dignity, meet her personal hygiene needs arguing that this both constituted discrimination and a breach of Article 8 of the European Convention on Human Rights.

2.5. A national strategy

As Age UK (2011) has observed: 'The needs of older prisoners are not well met by current national policy, and there is no national strategy or guidance relating to the general welfare of older people in prison' (p. 6). As far back as Her Majesty's Inspectorates of Prisons and Probation joint report (HMIPP 1999), a national strategy was recommended to address the needs of older inmates. According to the Chief Inspector of Prisons:

A national strategy should ensure that prisons are able and expected to meet the needs identified above and set out minimum standards...It should set out a clear framework for delivery, define the responsibilities of the prisons and other agencies involved and include a common system for assessing the needs of older prisoners. (House of Commons Justice Committee 2013 Evidence 46 para 42)

Cornish et al (2016 p. 21) have argued that a national strategy would: i) establish older people as a priority group; ii) define minimum standards; iii)

respond to the increasing numbers of older prisoners and ex-prisoners; iv) profile different groups of older people in prison, so that their specific needs can be identified and met; v) target resources more efficiently; vi) prevent further inconsistent treatment and discrimination; vii) contribute to improved inter-departmental collaboration; and viii) help to ensure fairer treatment.

For more than a decade, there have been a series of reports raising concerns about the needs of older prisoners (and, to a lesser extent, older ex-prisoners) which have called for a national strategy. The review by HM Chief Inspector of Prisons (2004) highlighted inconsistencies throughout the prison estate in making reasonable adaptations for (frail) older and disabled prisoners. The review also expressed concern about the lack of knowledgeable and qualified staff to provide the support and care needed for old and older prisoners, and that in some instances prison staff being unwilling to assist a person with mobility problems, with older inmates relying on other prisoners for their assistance. Four years later the Chief Inspector of Prisons revisited the issue of older people in prisons and published a follow-up report (HMIP 2008) which observed that the National Offender Management Service (NOMS) (now Her Majesty's Prison and Probation Service (HMPPS))³ had not taken on board many of the recommendations made in the thematic review.

The report 'Doing Time', published by the Prison Reform Trust (2008), echoed previous concerns and calls for a national strategy, commenting that

³ As of April 2017, the National Offender Management Service is now called Her Majesty's Prison and Probation Service: <https://www.gov.uk/government/organisations/national-offender-management-service>

'there is no strand in the NOMS Resettlement Pathway that meets these needs' (p. 2). Five years later, and nine after the original thematic review, the House of Commons (2013) briefing report observed that there was still no national strategy to guide the prison service as a whole in meeting the needs of older prisoners, although NOMS had, in 2011/12 awarded a grant to the charity Resettlement and Care of Older ex-Offenders and Prisoners (RECOOP) 'to improve the capacity of prisons, probation trusts and voluntary sector organisations across England and Wales in working with older offenders' (House of Commons 2013 p. 12).

The Justice Committee's (2013) review 'Older Prisoners' yet again called for a national strategy. The government responded by rejecting this call: "A generic 'older prisoner strategy' is not in our view an appropriate way forward" (MoJ 2013 p. 17), proposing instead a broader policy document taking into consideration all prisoners with disabilities and social care needs. The government's reluctance is generated in part by the belief that 'older prisoners will not be a homogenous group and will not have homogenous needs' (Newcomen 2015 p. 1). However, many people continue to believe that a national strategy is essential. Indeed, Elaine Crawley (2007 p. 239) has described the lack of one as 'scandalous'.

2.6. *Toolkits and guidance documents*

There are several toolkits now available for those working with older prisoners and ex-prisoners. The 'Resource Pack for Working with Older Prisoners' (NACRO and DoH 2009) provides information about the various organisations that can support practitioners working with older offenders, as

well as providing guidance about setting up suitable activities for older prisoners and ex-prisoners. The guide 'Supporting Older People in Prison' (Age UK 2011) profiles the experiences and needs of older people in prison and makes specific recommendations for good practice regarding information, advice and advocacy, and through-the-gate services.

The more recent guide 'Working with Older Offenders' (CLINKS 2014) addresses health and social care, active ageing whilst in prison and through-the-gate continuity of care and support. It encourages providers to review current provision and how it may be enhanced by using the guide to further develop their strategies for working effectively with older prisoners and older ex-prisoners. This guide also highlights the importance of constant re-evaluation of provision in recognition that the older prison population has, and is continuing to grow. It remains to be understood to what extent, and how, these various resources are being used.

2.7. Summary of literature and research gaps to be addressed

This literature review has highlighted the specific issues and concerns affecting older prisoners and ex-prisoners, compared with their younger counterparts. Research suggests that the needs of older offenders are not being consistently met both in and out of prison. Concern has also been expressed about the inadequacies of resettlement information, planning and support with regarding to the release of older people from prison. A number of authors have argued that there are areas in which both human rights and equality legislation are being breached. An overarching concern is the lack of a national strategy, which many consider to be a central factor

in the lack of consistent and adequate provision for older prisoners and ex-prisoners.

Further research is required that: a) explores the experiences of older persons who have been in, and released from prison; b) explores the processes in place for older people leaving prison and returning to society; c) seeks to understand how both older age and imprisonment interact to affect an older person's social re-entry; and d) aims to better understand the age-specific needs of older persons in relation to release and resettlement. This research aims and objectives of this project are to make a preliminary, small-scale, contribution to these knowledge gaps. The following chapter describes the methodology used.

3. Methodology

3.1. Research design and approach

3.1.1. Design

This is a qualitative research project which explores the needs of older prisoners upon release from prison. It is a small scoping study comprising eight semi-structured interviews with older ex-offenders and professionals working with/ in relation to older offenders. It is intended as a precursor for a larger scale research project.

3.1.2. Reflective research

This research took a reflexive approach (Pillow 2003). Reflexivity is central to qualitative research (Berger 2015) and is: 'an awareness of the ways in which the researcher as an individual with a particular social identity and background has an impact on the research process' (Robson and McCartan 2002 p. 172). Throughout the process of this thesis the researcher was mindful of his own position and place in his interpretation of the literature and how he conducted the interviews. He undertook to learn, and continue to learn, how his own experiences and personal views can result in bias. He therefore reflected on how, during the research process, he needed to avoid being overly informed by his own experiences and views.

3.1.3. Insider/Outsider research

Insider/outsider research refers to whether a researcher is being part of, or separate from a particular group (Dwyer and Buckle 2009). For this researcher, as a convict criminologist, there were particular issues about

whether, when, and/or how to disclose that he had been in prison. He made different choices with different interviewee groups. With probation practitioners, the researcher chose not to disclose because he was concerned that to do so would influence their responses in that they might have become guarded because of their professional status. With those who had been in prison, the decision was made to disclose a shared experience of incarceration to enable them to be aware that he had some insights into their experiences based on his own lived experience, rather than from merely reading about them. With the other professionals (an academic and a charity worker) the researcher chose not to disclose, because to do so would bring no benefits to the interview process.

3.2. Methodology

3.2.1. Data collection

Data was collected via eight semi-structured interviews in order to enable the participants to fully engage with the process of reflecting on their whole experience, and how and what it means/has meant to them. The interviews were for between 60 and 90 minutes each, a single interview with each interviewee. To enable free flow and openness gentle prompts were used to guide interview participants rather than interrupt their narrative. Whilst some questions were specific others arose out of participants' narratives with the intention of achieving, within the confines of a time-limited interview, as much relevant information as possible.

3.2.2. Interview design

Please see Appendix One for copies of the interview schedules. In designing the interview schedule, the researcher tried to establish more relevant and pressing issues that needed exploring linked to the key research questions. Although more questions could have been asked the constraints of the project meant selecting those issues that had the most significance..

3.2.3. Qualitative approach

A qualitative approach was chosen as the concept behind the research was to access participants' narratives and views of the world, and to understand their feelings and perceptions. Semi-structured interviews enable this and also allow the participant to be involved in the research (by enabling them to raise their own issues).. Professionals were able to air views they might not otherwise be willing to express on paper. Being listened to, for prisoners and ex-prisoners in particular, can be empowering .

3.3. *Sampling and recruitment*

3.3.1. Sampling strategy

The researcher had initially hoped to interview between 8 and 12 people, with half of them being ex-prisoners, and half of them professionals in order to achieve a balanced cross section. The sampling strategies included: approaching other academic researchers (both criminology and non-criminology) asking them to pass information about his research on to their contacts; approaching charities which work with older ex-prisoners, and

specific charities which worked with women ex-prisoners; approaching one or two personal contacts working in probation; snowballing, i.e. asking an interviewee to suggest other potential interviewees. However, there were challenges with recruitment as outlined below.

3.3.2. Recruitment

The researcher had links (as an undergraduate degree student) with a gatekeeper working within the Probation Service, and following the recent changes he has moved to the newly established Community Rehabilitation Company (CRC) in a position of authority. The gatekeeper was again willing to support the researcher's work and enabled access to colleagues. The CRC was formally approached with support from the gatekeeper and were enthusiastic about what could be learned from undertaking such research. Following the approach for permission to interview members of their staff, and upon gaining ethical approval from Huddersfield University the researcher was fortunate to gain some rich insights from both experienced Case Managers (seconded/transferred to CRC) and those relatively new to the role of Case Manager. Whilst access to the staff was successful it was unfortunate that the number of probationers (i.e. those people under supervision by the Case Managers) over 50 was not that large and no-one came forward to take part in the study. West Yorkshire Probation were also approached but the time it would have taken to go through their own ethical committee, and the limited time available to complete this current study meant that they were unable to provide assistance.

There were a number of people whom the researcher had met over the years who had interest in this area of study and provided potential leads. The researcher had managed to gain some contacts through attending conferences and used these to expand the search for participants. Difficulties arose in following up on some interviews, even after they had been confirmed. This was in part due to personal issues arising out of the researcher's health problems, and partly due to the contacts being spread around England, and the distance needed to travel in some instances meant that it was not possible to conduct the interview. Should this research be furthered there have been a number of areas where strategies would need to be established in order not to repeat such a problem again.

3.3.3. Participant profiles

Please see Table 3.1 below for participant profiles.

Table 3.1 Participant profiles.

PARTICIPANT PSEUDONYM	TYPE OF PARTICIPANT (EP = Ex-Prisoner over 50; A = Academic)	GENDER (F = Female; M = Male)
Brenda	Charity worker	F
Margaret	Ex-Prisoner over 50	F
Catherine	Academic Researcher	F
Ralph	CRC Case Manager	M
Angela	CRC Case Manager	F
Louise	CRC Case Manager	F
Michael	CRC Case Manager	M
Harold	Ex-Prisoner over 50	M

As Table 3.1 shows, eight interviews were conducted in total, six of which were with relevant professionals. Whilst in no way representative this small

sample provided valuable insights and opened up possible new lines of enquiry. This is important as this thesis is a scoping exercise. It was anticipated that there would be many barriers to overcome (for example, the Probation Services' Ethical Procedure), which the time scale for this research project did not allow. A research project over a longer period of time would allow sufficient time to overcome such barriers, and enable access to more participants, including ex-prisoners.

3.4. Analysis

3.4.1. Thematic analysis

The data was analysed using thematic analysis, pooling all the interviews together. Thematic analysis was chosen rather than, for example, grounded theory, discourse analysis, or narrative analysis (Denscome 2004) due to its flexibility and because 'it minimally organises and describes your data set in (rich) detail' (Braun and Clarke 2006 p. 6). The methodology described by Braun and Clarke was applied. Data were first transcribed by replaying the audio recordings and typing them out. They were then anonymised by removing names and any other identifying information. The transcripts were then examined to look for emerging themes which had already begun to become apparent during the transcription process. The transcripts were then re-read, to cross-reference the themes, during which stage, new themes emerged. These were again cross-referenced across all the transcripts. The themes were then analysed, with the aim of putting them into thematic clusters. While being placed into clusters, the overarching themes were identified, which in turn informed the final thematic analysis

(Chapters 4 and 5). Ideally two researchers should analyse the data and compare their findings. However, as this was a solo research project this was not possible. In terms of reliability, another researcher with thematic analysis skills could also analyse the data using the same techniques. Because no two researchers are the same, and there is inevitably a subjective element to the analysis, it is possible that another researcher might come up with the same themes, similar themes, different themes, or a combination of these.

3.4.2. Overview of themes

Eight clustered themes were identified: 1) 'the lack of a national strategy and its consequences' (the criminal justice system being inadequately prepared for and often unable to respond to the needs of older prisoners and ex-prisoners); 2) 'journey of imprisonment' (the experiences of older ex-prisoners as they transitioned into, through and out of prison); 3) 'vulnerability and risk' (considering levels of vulnerability as experienced by older prisoners, from both male and female perspectives); 4) 'faced with release' (this highlights the thoughts feelings of older prisoners and ex-prisoners prior to and upon release); 5) 'resources' (exploring what resources are available or not available to and for older prisoners and ex-prisoners); 6) 'support options' (exploring opportunities for support, highlighting gaps in support, with consideration being given to the importance of old-age-specific support); 7) 'forgotten or ignored' (considering the perceptions older people have about the treatment they are receiving or lack thereof); and 8) filling the gap (considering the gaps in provision in the prison estate and the role in NGOs attempting to bridge the

gap). An overarching theme, running through the clusters related to possible breaches of equality and human rights legislation, which is explored in Chapter 6 (Discussion).

3.5. Ethics

The study received ethical approval from SREP (School Research Ethics Panel) at Huddersfield University and followed the British Criminological Society's research ethics guidance (British Criminological Society 2015). The researcher also reflected upon his own place in the research (see above). The researcher put thought into conducting the interviews in an ethical way, respecting interviewee's sensitivities and addressing issues of confidentiality and anonymity. Each potential participant when invited to participate was given an information sheet explaining the project and their possible participation in it (see Appendix Two). Those who decided to participate were required to sign a consent form (see Appendix Three). Each participant in giving their consent to participate were notified in advance that at any point during the research project they may choose to withdraw from the process without discrimination, and all their data destroyed. One participant withdrew consent shortly before a scheduled interview.

All data were subject to rigid controls and protection. Interviews were digitally recorded. At the end of the research project as subject to the University of Huddersfield protocol, all recordings were deleted. Copies of transcripts of each interview were duplicated with a copy held by the researcher and one held by the supervisor. Following completion of the

research project all data will be destroyed – subject to the University of Huddersfield protocol. During the research project both digital recordings and transcripts were held securely with only the researcher and supervisor having access. Anonymity was secured by the use of a unique number given to the data and linked to a pseudonym to avoid identification of individual participants.

The research findings are analysed in the following Chapters Four and Five.

4. Findings (A): Ageing and Imprisonment

This thematic analysis identified two sets of clustered themes. The first, ageing and imprisonment, the second, ageing and social re-entry. This chapter explores ageing and imprisonment where the following themes were identified: (1) a lack of a national strategy and its consequences; (2) journeys of imprisonment; (3) vulnerability and risk; (4) faced with release. The subsequent chapter will then explore ageing and social re-entry.

4.1. *Lack of a national strategy and its consequences*

A number of interviewees discussed the lack of a national strategy. Their comments demonstrated some of the consequences of its absence and impact on service provision and highlighted how ill-informed services posed challenges for providers and older prisoners and ex-prisoners.

This participant, who works in the voluntary sector, made the following observation:

There's no national strategy for older people. And I can kind of understand why they don't want a national strategy. Because one size doesn't fit all. (Brenda, charity worker)

Brenda remarks on how she 'kind of understands why they don't' because 'one size doesn't fit all.' This suggests that Brenda is possibly aware of the government's rationale for not producing a national strategy, and to some degree she accepts it. In doing so, however, she misses the argument in support of a national strategy which is that one size cannot fit all. National strategies exist for female offenders, young offenders, and foreign nationals, as well as the prison population as a whole. Older prisoners and ex-

prisoners are a collection of distinct sub-groups, with distinct, varied and complex needs of their own, and as such those needs also warrant a national strategy. Michael, a case manager, seemed uncertain of the existence of any strategies, national or otherwise:

There is no clear agenda for specific groups of people. It's like, 'we have this way of dealing with everybody' and if they can't deal with it then they can't deal with it, sort of thing, in terms of the offender. (Michael, CRC Case Manager)

This reflects how uninformed some frontline workers are about the various complexities associated with, and only experienced by, older offenders. Being ill-informed and ill-equipped as a frontline worker can lead to detrimental consequences for those they supervise and supporting in leading a law-abiding life.

Catherine, an academic, highlighted why a national strategy is so important:

We haven't got a national strategy. We've got PSOs, yeah, we've got the Equality Act, and we have the Care Act, which says that we have to provide equal care on the outside and inside prison. Yet we are unable to do that. And I think it's because we haven't got a strong voice. If we had something that was embedded in the structure and in policy, in legislation, and it was articulated through to the prison estate, and not just through amendments and PSOs, and the political will was there, then we would have facilities that are specially designed for older people, if they choose to go. (Catherine, senior academic)

Catherine sees the combination of Acts and various PSOs as not being helpful. In acknowledging the growing problem of an ageing offender population, the process of change has been piecemeal with the voice of older people not being heard. She questions how current guidance is being

filtered down, arguing that a national strategy would inform, as standard, and be shared with all stake holders.

One case manager interviewed demonstrated the consequences of being un-informed:

It's interesting, you know, talking about age, because I don't think there has been much thought given to the different needs and what might be more effective with the older client group. I think the focus has been on younger people, because they are much more numerous. But I can see that it would be good to make a worker more aware that that age group may face particular challenges that younger people don't face. (Ralph, CRC Case Manager)

Ralph offers both an admission and assumptions in relation to current practice. The admission being a lack of awareness and training about age-related issues and offenders. The assumption made is that thought has not been given to older age, even though it has. It would suggest recent research and literature has not filtered down to case managers. This is magnified by practitioners infrequently having older people on their caseloads.

I've got a couple of people in their forties. I've got one woman who's 42, 43. I've had one who was a pensioner, he finished a few months ago, he was 66. My youngest is 19. It's rare [older people on caseload]. It's that rare that when it happens you remember it. It's a bit like when I remember the females on my caseload. (Angela, CRC Case Manager)

Given the proportion of female and older offenders in relation to the wider offender population it is to be expected that they may work with them less frequently than the majority of their clients. It is therefore even more important that when they do work with them they understand their particular issues and concerns.

I remember having somebody in [date]. He was very elderly and he's been in prison a long time. An IPP prisoner [details of offence]. He was in his seventies And I didn't know anything about how to help him. I'm having to Google about pensions, what he had to do, trying to get him into retirement homes. He was very unrealistic about where he wanted to live [detail]. In the end we got him in a hostel (approved premises). He didn't have a clue about what benefits he was entitled to, about what healthcare he was entitled to, or not. [I changed roles and so] I stopped working with him while he was in the hostel. He'd got health issues, but thankfully the hostel had a disabled room. (Angela, CRC Case Manager)

Angela demonstrates the consequences of not having prior knowledge, understanding and access to resources relevant to the older person. She did not know in advance how to help an older offender and did not have access to the relevant resources. She was not able to find him age-specific accommodation. This indicates a lack of training provided to her, and the lack of access to any information/resource packs that she could use to help this person. It also suggests that a social care assessment had not been conducted or followed through by the local authority, who would have had access to more relevant information and resources. Although it should be acknowledged that some sheltered accommodation and retirement homes can be reluctant to take offenders. The result of the case manager's limited knowledge was that she could only place the client in a resource she knew of and had access to, a probation hostel. While the intention was not punitive, the unintended effect was, that this older ex-prisoner was placed in a criminal justice resource rather than one specifically for an older person. This could be argued as being as form of indirect discrimination under the Equality Act 2010.

4.2. Journey of imprisonment

A number of participants recalled both direct and indirect experiences of the various journeys of imprisonment for older offenders. The following extract is from an interview with a first-time older woman offender:

My transfer to prison from [Name] to [Name] took seven hours. I was never offered the loo. I had one bottle of water for the whole journey. I arrived at 9.30 in the evening, and they had nowhere to put me. Instead of putting me on an assessment unit, they put me on an 'open wing' within the prison. It gave me something to aim to go back to, back to that 'open wing'.... Then I went on to (another wing). The cell I went into was filthy... It was hell. I was just watching, waiting, waiting to see who was going to pounce on me. I think a lot of the women who were there were the same, were really frightened like me. (Margaret, ex-prisoner over 50)

Margaret's experience of not being allowed to use the lavatory and not being provided with enough water on a very long transfer to prison constitutes inhuman treatment and again, raises human rights concerns. The degrading conditions in prison then came as a rude awakening, quickly followed by fear and paranoia.

The following male participant was also a first-time inmate, and had made some preparations through researching prisons on the internet. Even so, the reality was not what he had been expecting:

Well you read blogs about what it's going to be like and what you should take with you. Well, at least I had done that. But nothing prepares you for the noise and the smell... The minute an alarm went off, which was practically every day, I mean that was it, there were no officers then. I think that's when a lot of people felt the most insecure, because when the alarm goes off, that's a perfect time for other people to kick off. So I did learnt very quickly that the moment that alarm went, best to get back to your cell. (Harold, ex-prisoner over 50)

For Harold, the prison environment was a shock, the reality not the one he had anticipated or prepared for. He was fortunate to be able to both deal with his fear and learn ways of staying safe.

The gendered differences in older offenders and imprisonment are demonstrated in the following quote:

The male population is very different from the women. The women who have grown old in prison, have generally committed a one-off offence. But then we are still drawing disproportionately from the lower socioeconomic groups. So if we look at the men, they have generally been in and out of prison in the majority of cases. It is either that or a first time sexual offence, for sexual offenders, if it's a historical offence, that's why the sentence is particularly long, and they will die in prison. (Catherine, senior academic)

This is an accurate reflection of current research and understanding about the gendered profiles of older prisoners. Older women are more likely to be in prison for a one-off offence. Older men in prison are very often career criminals, except for those imprisoned for serious crimes or convicted for historical crimes. The quote also highlights that for some older prisoners, death in prison seemed likely, as is further demonstrated in the following extract:

I do recall an older feller who did a lot in prison, and wanted to go out and work, he didn't want to die in prison. But he did die in prison, unfortunately. He'd spend most of his life in prison for various serious offences. (Ralph, CRC Case Manager)

Ralph highlights an institutionalised career in criminality, and an unwanted penal death rather than a civil one. It is a sad indictment of the prison estate. It brings to mind a quote from Foucault (1991): "So successful has the prison been that, after a century and a half of 'failures', the prison still exist

producing the same results, and there is the greatest reluctance to dispense with it.” (p. 277)

While there may be offenders who will die in prison because of the nature of their crimes, ages and sentences, there are many who may not. Most of the Hatton Gardens offenders (Campbell 2016) will probably die in prison, as may many of those convicted of historical sexual offences. Older people who are given long sentences may in effect be given a death sentence. They will die in prison, not because their offence justifies them dying in prison but because of their age when their offence was committed, their age when convicted, and/or length of sentence. Prisoners of all ages can be released if they are terminally ill, although this is not applied universally. This may under certain circumstances constitute a breach of Article 2 of the Human Rights Act, the right to life, by denying them a dignified death.

The following quote demonstrates the challenges and frustrations which case managers have to face in working with older offenders.

To me it seems absolutely ludicrous. I know that the laws are there and they need to be processed but it seems to me in cases like his, someone needs to sit down and say ‘actually, obviously, this hasn’t worked for 40 years, so how are we going to do it differently now?’ I think I had this [older] guy on eight different short prison sentences. So he’d get like a couple of weeks for theft, go to jail, detox for a bit, come out, straight out, nothing would be done, he wouldn’t come and see me anyway. But he’d get a suspended custody sentence, go to a different town, commit another offence, and then get another sentence on top of that. It got absolutely ludicrous. That’s obviously a very extreme case of career offending. (Michael, CRC Case Manager)

Here the journey of a career criminal who has aged and continues to offend has led to needing a high level of support, which services are either

struggling to provide, or may even feel helpless in trying to provide. In older age he is suffering from both the inability to address his re-offending cycle and his age-related needs.

Whilst these case manager participants are not necessarily representative of case managers as a whole, and only their personal experiences are being explored, the interviews highlighted how those who want to make a difference for their clients may be thwarted by a lack of training and joined-up services. Brenda also raised the possibility of alternatives to imprisonment for older offenders:

You know what's interesting is that there were very few older people on tag. Which is astounding really. Because you talk about whether custody is the right option for a lot of older people. I think it's not in some cases. And a tag would be a great way for a community sentence for an older person. It would allow them to keep their house, maintain links with their family and access G.P.s and healthcare in the community.
(Brenda, charity worker)

Brenda reflects the argument that older offenders should not be imprisoned at all. However, she does not address the offence profiles of many older prisoners which may negate such an alternative approach, e.g. older sex offenders.

4.3. Vulnerability and risk

The interviews raised a range of issues relating to vulnerability and risk. Margaret, a first-time offender, describes the experience of prison for someone entering prison for the first time in older age:

The most traumatic experience of my life, because I wasn't expecting it. Once the shock had died down, I kind of, my defence mechanism was to sit back and observe. Because I

didn't know the environment. I didn't know what it was and I had no idea what was going on. And I think that was when it dawned on me what I was seeing, which was standard practice, which was really questionable. Safety for the women that were there was non-existent. And there were huge amounts of young people with mental health issues, there were older ladies with mental health issues, there were people with learning disabilities. There was clearly nobody with any skills with these individuals. There were many women in crisis and there was very little there to help them.... (Margaret, ex-prisoner over 50)

Margaret's initial reaction was shock and fear, which soon changed to concern for her fellow inmates. She recognised both their needs and the severity of that need. It seemed to her that there was a lack of skill amongst staff to respond to the needs of women with mental health issues and disabilities. Her observations, which are, importantly, the first impression from a first-time prisoner, approaching prison with 'fresh eyes', reflect poorly on that particular prison's ability to meet its duty of care to vulnerable prisoners. Without realising it, she also has raised one of the main arguments for an alternative to imprisonment for women who require services which are better suited to their needs.

The following demonstrates how issues of risk also played a significant part in Harold's first time experience of imprisonment:

I mean I had two incidents where I had interactions with other prisoners where they ended in a less than positive way. One in [Cat B prison] where two gentlemen came in to tax me, I believe is the correct term. I said them before you go any further, guys, I suggest you look at the second name on the door [of cell]. It's not me you've got to worry about. One of them sensibly left, the other left by his collar, going backwards. (laughs) (Harold, ex-prisoner over 50)

Harold explained to the interviewer that 'taxing' was a form of bullying of one offender by another in order to obtain their possessions. Harold was able to defend himself both by his own quick thinking and sharing a cell with someone whose name instilled a degree of fear in a would-be aggressor. Not all older prisoners are as fortunate, and those suffering poor health and the long-term effects of imprisonment are more likely to become victims of such aggressors. There are implications here for a breach of Article 2 of the Human Rights Act (right to life) and Article 8 (in relation to mental and physical wellbeing), where older prisoners are located alongside the general population of younger, fitter, more able, and aggressive inmates.

Harold recalls a second incidence of violence, related to another prisoner's drug-use:

And the second gentleman I had a problem with was on Spice, which is a huge, huge problem. So he wasn't really with it. Fortunately. I did manage to get his arm behind his head, and point out that I might not be as slow and as daft as he was, and it just, um... (sighs)... And we managed to calm him down between two or three of us. He was so confused by the amount of Spice he was doing. He went over the wall three days later. Terrible, terrible. (Harold, ex-prisoner over 50)

Here Harold identifies the growing problem of drug use in prison and of the synthetic drug called Spice⁴. Although he was again forced to defend himself, on this occasion he describes being more concerned for his assailant, who was doing harm to himself through his drug use. The two quotes highlight two different kinds of risk: risk from others and risk to others. The issue of risk to self is further demonstrated in the following extract:

⁴ <http://www.bbc.co.uk/news/av/uk-38048622/spice-drug-paralysing-prison-system>

I've had a 50-odd year old who was remanded for a very serious offence, who did a couple of weeks, and then he came out, and he'd done 6-month to a year on-and-off sentences over the past decade, as he was deteriorating with drink and mental health and things. And he came back out, and obviously, I'm seeing him, and he's absolutely all over the place. I can't locate mental health services to engage with this guy. It looks like he'd been on the wing for six weeks and nobody had even spoken to him. Comes back out. Goes back in again. (Michael, CRC Case Manager)

Michael highlights the 'revolving door' life of a 'younger older' criminal with a lifetime of problems relating to alcohol and mental health issues, interacting with the effects of being in prison. It also raises questions regarding why the case manager was not able to involve mental health services, and issues of concern relating to joined-up working practices. The following quote also highlights issues of age-related mental health problems, specifically dementia:

One wing was where elderly people, people over 65, on whole life tariffs, go. It was a bit like for OAPs, you know a nursing home... these people are still going to get dementias. There was a couple of guys there, they didn't know where they were. And I honestly could see no point in them still being incarcerated, when they really didn't know who they were, never mind why they were there. They could have been in any nursing home. They weren't a danger to anybody. (Harold, ex-prisoner over 50)

Harold raises important questions about the purpose of continuing to hold prisoners with severe dementia in prison, when they are not coherently aware of where they are or why. This first-time offender's perception of imprisonment highlights what it means to break the law. It does not matter what age or state of health a person experiences, the law is intent on punishing even those who are not able to take in the extent of their

environment or whose risk is minimal. Goffman (1991), writing about the 'mortification of imprisonment' built on his research done in asylums not prisons. Now that asylums no longer exist, the courts choose to imprison, and the 'system' keeps them in prison when previously they may otherwise have been placed in some form of medical facility. It was how those asylums were run not the concept of an asylum that was the problem. Harold, even with his own problems and issues, saw his fellow captives as humans with significant mental disabilities, which led him to realise the futility of prison and imprisonment in certain cases.

4.4. *Faced with release*

For some professionals in the community there appears to be a lack of understanding of what is happening with older people in prison:

I remember reading something a while ago in [professional journal] about the ageing prison population and how it's going to be a massive problem. But that was ages ago...and it was sort of left saying what is in place for them, and there's nothing, and yes, it's terrible that there's nothing for all these elderly prisoners. (Angela, CRC Case Manager)

This case manager is under the impression that nothing is being done with older people in prisons, even though in some prisons there is some good work taking place. She is uninformed, again highlighting a lack of training. This shows the importance of filtering down the relevant information to case managers about provision for older prisoners and ex-prisoners. Brenda, who was involved with one community project, demonstrates a more detailed understanding of the issues older offenders face:

... for older people, at whatever point in their life that they're sentenced, if they're getting old in prison, they might lose

parents, or wives or husbands while they're in prison. They will lose access to children, some of them won't get visits. As their family become older, we have a lot of men in prison who don't get visits because their partners are too old or infirm to visit prisons which are often hundreds of miles away from home. They don't have accommodation, certainly not appropriate accommodation for someone with mobility issues. How the community feel about them on release is an issue. So often they're moved to different areas that they're not familiar with. So, there's lots of loss linked to going into prison and coming out. (Brenda, charity worker)

Brenda identifies the consequences of getting older in prison and going into, and coming out of, prison in older age. She recognises the range of losses that can occur and the additional challenges an older offender faces. The following participant points out that such losses and associated support needs are not specific to age:

.... It's the same I think for all ages, it's not any age in particular when they're released from prison, they just don't have the support that I think they need. (Louise, CRC Case Manager)

Whilst seeming to challenge the notion of the significance of age Louise recognises that there can be challenges upon release for prisoners of all ages. However, as a person becomes older, those challenges can become heightened by older age itself.

For older people, it's not always possible, depending on their age and ability, and how mobile they are, it's not always about getting them into work. It's more about retirement planning in resettlement planning. (Brenda, charity worker)

Brenda recognises the need to address resettlement planning for older people. The following participant talks about the particular challenges facing an older person who has been in prison for a long time:

The D Cat I was at, over 85% of the people there were at the end of a life sentence... it was shocking to talk to some of them. Their view of the world was through soap operas, it wasn't a real view of the world. I did find that that wasn't being addressed at all. The rehabilitation that was being given to them was not addressing the reality of what the world would be like when they got out. It was just a tick box exercise. And I found that really, really shocking. (Harold, ex-prisoner over 50)

Harold discusses the speed at which society is changing and how this can impact on resettlement. There are many changes that people not in prison are incorporating into everyday lives, that long-term prisoners do not have access to. For them their perception of the outside is like a 'soap opera'. Their reality of the outside world – similar to Harold, the first-time offender who thought he had prepared for prison – is very different from the reality that they think they will face. Planning and preparation needs to reflect that an older person may experience significant difficulties in returning to a world that is alien to them, compounded by them facing, in older age, less time and fewer opportunities.

But then I've seen... women who leave prison with nowhere to go because the prison can't find them anywhere, and they're released, because they have to be, and they're going to nothing, and that's really sad. And I've seen those same women come back in. Because it becomes a way of life. (Margaret, ex-prisoner over 50)

For some the revolving door of criminality may be a reality not solely down to their criminality, but also due to the limitations of the system not being able to respond to the needs of those older men and women who are in and out of prison. This could be a breach of the Equality Act 2010, in terms of failing to take (older) age into account, Article 8 of the Human Rights Act

1998, and also the Public Sector duties to promote equality and comply with the Act.

One guy who wanted to stay in the prison to help with the day centre and the forums. He didn't want to go home. He wanted to claim his benefits and stay in prison and do that as a job. Sad really. (Brenda, charity worker)

For some older people who have been in prison for a long time, remaining in prison may be a preferred choice. For this inmate, it suggests he is institutionalised. He sees what he has in prison as his best option compared with what he would have on release. This may be the case for many older prisoners. However, it will not be the case for all older prisoners and ex-prisoners.

One, he's over 50, he's a [tradesperson], he got a few qualifications while he was in prison, he's gone straight back into work now, he's been out three weeks, self-employed, working long hours and he's dead happy. He's doing really well. (Louise, CRC Case Manager)

Louise reflects on someone who has been able to make a successful transition from prison to community. This person is fortunate, having the health and skills which he can use to rebuild his life. Self-employment helps him to avoid awkward questions with no need for DBS checks. His past is hidden. He benefits further by reclaiming his identity and independence. This is not always the case for many older people leaving prison.

4.5. Summary and concluding comments

This chapter has highlighted many concerns regarding provision within the prison estate and community services. A lack of training, a lack of information sharing, a lack of awareness combined with poor resources

results from a lack of clear guidance steering policy and practice. A national strategy has been identified as being needed to provide clarity for both training front line workers and providing a package which recognises and responds to the needs of older prisoners, and those released in later life. The chapter has also highlighted the possibility that the prison system may, in some instances, be in breach of the Equality Act 2010 and the Human Rights Act 1998, leaving the door open to the possibility of action through the courts.

The following chapter explores the second set of themes, relating to ageing and social re-entry.

5. Findings (B): Ageing and Social Re-entry

This second chapter of the thematic analysis considers four themes which are: (1) 'resources'; (2) 'support options'; (3) 'forgotten or ignored?'; and (4) 'filling the gap?'.

5.1. Resources

A major concern raised in the interviews was the difficulties older prisoners experienced in preparing for, and following release. Access to resources relating to housing, benefits, pensions, health services and other supporting agencies were found to be difficult. The following quote highlights the possible scale of this issue:

They come out to nothing, really. Sometimes they have benefits set up but nine times out of ten they don't (Louise, CRC Case Manager)

Louise demonstrates the challenges faced by any ex-prisoner, but particularly an older ex-prisoner who may be released without adequate access to finance. Such challenges can place a released older prisoner into a more vulnerable position than their younger contemporaries, as Ralph shows:

[I think he was 70 years old] ... he was recalled, there was an impact on his house, because it went beyond 13 weeks...so it meant that his rent wasn't being paid, I think he was claiming disability benefit and he was also of pensionable age. So the impact was on his income and – I mean it's an issue for everybody I think, but more so perhaps for older people – because it interrupted his benefits. Which meant that when he came out we were having to contact the pensions office and all sorts of things because there'd been that interruption in his payment and certainly his rent had not

been paid for the time that he was in custody, so it was all those loose ends...There was endless issues with his payment card, so I would say access to benefits, when it's in the form of a pension, that's one of the biggest issues. Because obviously it affects accommodation and their ability to do all the things they need to be doing during any given day. (Ralph, CRC Case Manager)

The loss of home and the interruption of benefits created additional problems for this older ex-prisoner. It demonstrates the importance of prior planning and preparation for older prisoners' release as homes can be lost through imprisonment. This has implications for Article 8, of the Human Rights Act 1998, in relation to the right to a home and family life.

However, some older ex-prisoners are fortunate enough not to have this concern:

I am unusual. When I went into prison, my employer who kept me employed the whole time I was in prison, until I came out... [details]... they gave my family the ability to keep my house going (Margaret, ex-prisoner aged over 50)

Margaret was both fortunate and possibly a rarity amongst her inmates. She knew her home was going to be there upon her release, her family, and some modest means of finance options. The importance of knowing and feeling confident about where an older ex-prisoner is going to reside cannot be understated:

Housing is the single biggest issue. So for people coming up to release, sometimes they don't know until the day of release where they're going to be living. Sometimes they're released with no fixed abode. And the anxiety that that brings is enormous. (Brenda, charity worker)

Brenda is highlighting the importance of housing. The choices of accommodation for older people leaving prison leaves no guarantee that their destination will be able meet their needs. Older people are just as, if not more so, likely to be placed in approved premises if other arrangements such as a care home, residential home, or social housing cannot be made. Changes in legislation which were intended to address this were challenged by Michael as not going far enough.

The Offender Rehabilitation Act, that's supposed to make sure nobody leaves prison without accommodation. But this is all theory. From what I've seen, it's all excellent ideas, and brilliant initiative, but you're not putting any apparatus there for it to occur. (Michael, CRC Case Manager)

Michael clearly appreciates the potential of the Offender Rehabilitation Act, but conveys disillusionment with how this is being put into practice. Case managers can only work with the tools at their disposal and if those tools do not meet the job description then it renders them powerless.

A lot of the prison releases that I've got [detail] a significant number of them were released NFA⁵. And it's so difficult for them, isn't it? To find some sort of stable lifestyle when they've been taken away from it for so long. (Louise, CRC Case Manager)

Louise is reflecting on the potentially destabilising effects for ex-prisoners who do not have somewhere to go to following release. One of the key pathways to successful resettlement is having somewhere to live. The

⁵ No Fixed Abode

following statement demonstrates the lack of specialist provision for older ex-prisoners:

There isn't targeted accommodation for older offenders returning to the community. (Michael, CRC Case Manager)

The above statement highlights lack of targeted accommodation for older ex-prisoners. Age-specific accommodation provides additional safety and security for some older ex-prisoners. Sometimes approved premises may be the only option, and for the CRCs even this can be a problem:

But we can't refer people to approved premises any more, apart from the females, because all the people going to approved premises are the high-risk offenders. (Angela, CRC Case Manager)

As has previously been remarked, CRC caseloads are made up of low- to medium- risk offenders, and due to the profile of many older prisoners, those under CRC supervision may not qualify for the option of approved premises. In contrast to the broadly understood disadvantages faced by females, in this instance, due to their offence profile and gender, the older male is disadvantaged if they are on CRC caseloads, because they are denied the opportunity of being referred, due to their gender This, in turn, constitutes discrimination under the Equality Act 2010.

Making arrangements for any accommodation, whether targeted or not, can be made more problematic by a lack of advance planning and preparation, as the following demonstrates:

You'll get release documentation for an offender two days before they're released. And he's NFA, no fixed address, and I'm supposed to sort out accommodation within 48 hours...

And then there I am trying to sort out accommodation for this 52-year old guy with 400 offences, which slims down the chances of me getting him anything. (Michael, CRC Case Manager)

Michael demonstrates the problems involved in finding accommodation for an ex-prisoner at short notice, which are then further complicated in attempting somewhere suitable for an older ex-offender to live following release from prison.

Margaret observes from a women's perspective what effect little preparation and planning for release had on some of the women she had come to know.

The women who I know that were released and within days of being released, because there was nothing for them once they got through those gates, nothing to help them or support them or anywhere for them to go, two of them ended their lives. And they were women I'd got to know. And the officers, and the people who should have had something in place when they were released, knew the risks. But they seemed to be helpless in what they could provide. There's a lack of housing. I'm sure there is for men as well, but for women, there's very few safe places to go. (Margaret, ex-prisoner aged over 50)

Margaret identifies a perceived helplessness among those who otherwise were in a position to provide the care and support required. As with the older inmate who died in prison but didn't want to, the loss of life as a result of system failures is the most tragic of consequences.

5.2. Support options

Several support options were discussed during the interviews. The following highlights the implications of the Care Act 2014 for social care and support for older ex-prisoners:

So, the Care Act came into force last April [2015] and it's just started to make changes for people in prison and then on release. So, the local authority in the area that the prison is situated has a responsibility to provide health and social care to people in prison. Obviously, there are criteria, eligibility criteria that they need to meet, and if they meet the criteria then the local authority and the prison will provide that care whilst they're in prison. And then on release, the local authority has to provide that care, wherever they're released to... (Brenda, charity worker)

Brenda recognises that the Care Act provides clarity regarding who has responsibility for the delivery of health and social care to people in, and following release from, prison. The breadth of support required by older ex-prisoners (for example, those who do not meet the Act's eligibility criteria) may not be fully covered by the Act resulting in a need for NGOs input, as is shown here:

We (RECOOP) will get referrals for support for somebody coming out of prison, for example, from the G.P., which may be access to benefits, or to pensions, fundamental stuff, really, housing. And we will work with that person to get them to that place. Because, inevitably, they will have no support around them, in a new area, no friends or family, ostracised because of the offence, all of the things that older people in society generally don't have to deal with. (Brenda, charity worker)

Brenda shows how the charity RECOOP provides information and support to those older ex-prisoners who would otherwise not receive it. Access to

information can be vital both for the older prisoner prior to, and upon release:

It must have been very frustrating for him (older offender) in prison wanting to know this information, with no way of finding it out and needing other people to find it out for him. He wrote to me asking about benefits and sheltered accommodation. (Angela, CRC Case Manager)

The above indicates that even though the information exists, and can be provided, it would seem not to be reaching the older prisoner himself. For some, this can create severe anxieties associated with release which could be ameliorated by the simple act of information sharing, as the following demonstrates:

But when you're in that bubble, with no hope beyond, it can make a huge difference. Just signposting people to information can be so useful (Margaret, ex-prisoner aged over 50)

Margaret highlights the importance of access to information prior to release. Timing is also important, as frustrations can be exacerbated in situations that do not allow for any planning and preparation.

I was totally uninformed. So the night before I was due to be dropped off at [name of station] to go and have a tag fitted, I was told I might not be going. 12 o'clock at night, a slip of paper, a piece of A4 was slipped under my door 'Have everything packed for 6 o'clock'. (Harold, ex-prisoner aged over 50)

This suggests that there can be problems with appropriate planning for the release and resettlement of older offenders. Michael stated he had

insufficient warning, whilst some older prisoners are concerned about delays.

We set up a forum which was (older) prisoner-led.... One of the issues for them was the pace of, how slowly things happen in prison. So, they wanted to know about their HDC⁶ release date, and they'd been told it would be this date, but they had to have the paperwork through, but then it was delayed. So, they were entitled to perhaps six months' early release but by the time they got to it, they were perhaps released for a month, because the pace was so slow. (Brenda, charity worker)

Brenda indicates that in some instances older prisoners are having to spend longer in prison than they need as a direct result of the way in which their release preparation is approached. It is unreasonable and potentially unjust for the prison services to keep someone in prison longer than their release date, not through any fault of their own, but due to the machinations of the prison estate.

5.3. *Forgotten or ignored?*

A sense of being forgotten and/or ignored stood out as significant for some ex-prisoners, as is demonstrated by the following:

If [older offenders] have gone back into a family environment, then they're more connected to society. Those who haven't are isolated, alienated, dispossessed, and they feel that time has run out for them. So you've got dispossession, feeling alienated, feeling isolated, lack of facilities, a society that has changed without them. So where and how do they fit? And who is that connecting, that bridging person, between prison and the outside world? (Catherine, senior academic)

⁶ Home Detention Curfew

Catherine highlights the significance of informal support for older ex-prisoners. Those who continue to have close links with the outside world are more likely to feel less disconnected upon returning to society than those who have few or no informal ties. For older people leaving prison without a supportive informal network, coupled with a shortened life expectancy in which to re-build their lives, this can be a major challenge with regards to their ability to re-settle, making the role of the case manager vital in providing the bridging support referred to by Catherine. However, the working practices of the CRCs may not be conducive to this:

They don't really want you seeing people individually any more. You're a Case Manager. You're not supposed to get to know people. You're meant to assess people and then pass them on, you're not meant to do the work yourself. So, you need accommodation, go here. You need counselling, go and see this person. (Angela, CRC Case Manager)

The implication of this is that there now exists an impersonal nature to the role of case manager, which may make it difficult to fulfil the very individualised needs of older ex-prisoners. This is demonstrated in the following extract:

I don't even think that the Powers That Be that are meant to be giving you the support, the opportunities, they have no idea of what a woman like me – I don't mean just me, but the group of ladies who I made friends with through being in prison, certainly 10/12 of us of varying ages who have had very similar experiences on release, and that is, that there isn't anything. You've got to just try to keep yourself sane. And that's not easy. We've finished up having to support ourselves, because there isn't anything there. Where I live, there are no opportunities. I am struggling to find work. Because, I think my age goes against me. I live in a part of the country where there actually aren't many jobs. And also, where there are no CRCs in this area actually getting fast

track placements for people who've been in prison (Margaret, ex-prisoner aged over 50)

Here, Margaret challenges policy makers' understanding of the needs of women offenders, especially older female offenders, from her own lived experience, and sense of abandonment. She suggests that there is a difference in her circumstance to that of her peers and that her status as an individual older woman leaving prison is not being recognised. This goes in some way to reflect the position in which Case Managers find themselves. The following interview would appear to confirm that at least within the CRCs individualism is not part of their ethos.

They [CRC] try to encourage us to work in groups, they call it 'working in numbers'. They want more for less, so none of this working 1 to 1, none of this getting to know somebody. No, if you haven't done an intervention you haven't done a RAR day, with them. [Interviewer asks for clarification]. It stands for Rehabilitation Activity Requirement. So instead of seeing them like before, you'd get them in once a week, you know, get to know them and then do the work, it's all get them on [name of group] get them on [name of group], it's all about groups. (Angela, CRC Case Manager)

This particular case manager had prior experience before coming to the CRC of working with the Probation Service. She highlights a significant difference in practice and the way in which ex-prisoners are supervised. The problem with working in groups is that it does not always address individual needs or specialist requirements. For example:

Our programmes come with a criteria, like the re-offending potential score, and obviously older offenders will score less than younger offenders because generally they're lower risk and so they might not be eligible, they might not meet the

score for a particular intervention, like a thinking skills programme. (Ralph, CRC Case Manager)

Older offenders are considered less likely to offend following release (MoJ 2014) and it would seem from this statement that they are disadvantaged by the perception that they do not warrant referral to programmes that otherwise might be of benefit to them. This constitutes both direct discrimination (not being considered for the groups) and indirect discrimination (criteria which do not take into consideration the needs of older people) under the Equality Act 2010. It would also indicate a presumption that older people are unable to change:

With an older client, you're less likely to put them on a programme, because they've been there done that sort of thing, you know, you can't teach an old dog new tricks. I do remember a client saying that and he was in his 60s. (Ralph, CRC Case Manager)

This quote reflects the literature which has suggested that when older people are released from prison, they are both abandoned and forgotten (Forsyth et al 2015). The CRCs' working practice appears to favour the younger ex-prisoner population. Brenda has suggested that there may be some cost-benefit analysis involved:

And of course, from an older perspective, older people, ex-offenders, the statistics kind of say that they don't reoffend to the extent that younger people do, so in terms of being rewarded for results, where are the CRCs going to put their effort? (Brenda, charity worker)

Brenda also suggests that the way the CRCs are structured and rewarded, may not incentivise them to focus on older offenders. Where current

practice favours the younger person, in terms of education, training and employment. It would seem appropriate to consider how those programmes could at least also be made available to older ex-prisoners, and/or tailored to their needs.

The gaps in provision can also arise because of the actions of the older person under supervision, as the following shows:

I've got one (offender over 50), he's on post-sentence supervision and he's also got a community order running alongside it. He spent less than 12 months in prison and then when he came out on license he re-offended [details] and it's really difficult to get hold of him. He's at [name] hostel. Drug use, self-harm [details]. [Describes communication problems with his drug and alcohol worker] [Describes problems getting hold of him] He's very chaotic. He asked me to make a Community Mental Health referral. That was 6 weeks ago and I've still not been able to pin him down to put this referral in place. He had an appointment today and he didn't come in. (Louise, CRC Case Manager)

The above depicts a repeat older offender, who also has issues around substance misuse and self-harm, and who the case manager is struggling to engage with. This further highlights the importance of, and challenges in, working with other agencies in supporting older offenders with complex needs.

5.4. *Filling the gap?*

Overcrowding, staff shortages, budget cuts and strains on resources present challenges throughout the prison estate, placing them under enormous strain, and making it difficult for them to function in accordance with the expectations placed upon it. As the following statement indicates, the strains within prisons have a knock-on effect for the Probation Service:

Previously, someone would get, you know, a few months' custody in a less crowded jail. And maybe get more intervention in the prison. Come out of prison, with maybe something sorted out, in terms of accommodation, some sort of support, sorted from the prison side of things. But now you have completely and utterly overcrowded jails that are just bursting at the seams, and people coming out to a probation service that can't handle them. (Michael, CRC Case Manager)

Here Michael perceives an overcrowded prison system as having a negative impact on the probation service's (and also the CRCs) ability to handle the rising number of prisoners, including older prisoners, being released. The older prisoner or the Case Manager, or both, often appear to be ill-prepared for the transition from prison back into society to take place. The problems that arise can make it difficult for the Case Manager to fulfil their duties and can leave the ex-prisoner struggling to reclaim even the most basic of needs. Where the ideal of 'through the gate' offender management is not working such charities as RECOOP attempt to fill the gap by offering a bridge between services, supporting the person in their resettlement. However, they also face challenges and constraints upon the support they can offer, due to funding issues:

Because funding is notoriously difficult to get with this population, a lot of our work is in prison. And that's not to say we don't want to work through the gate, it's just that the funding is very difficult to get. (Brenda, charity worker)

Brenda, who is a RECOOP worker, highlights the difficulties charities face in acquiring funding to support older prisoners, particularly those who have been released, which limits the resettlement support they can provide, and

thus their ability to fill the gaps in the criminal justice system. She recognises the need for 'through-the-gate' services, but without funding this may not always be realised. Age UK, the leading national charity for older people, seem only to have limited direct involvement with older prisoners and ex-prisoners:

Age UK... is all small franchises and they have their own local priorities. Some Age UKs will work with the funders, and some won't, and some probably do without realising it. (Brenda, charity worker)

In contrast to the aspirations of RECOOP, i.e. reaching as many older prisoners and ex-prisoners nationally, Age UK, which, unlike RECOOP, is a national organisation, is itself not fully supporting older prisoners and ex-prisoners on a national scale. This would suggest that for all the good work that Age UK undertakes with older people in the UK, as a charity for older people, their lack of involvement with older prisoners and ex-prisoners contrasts with their remit. There are of course, exceptions. Age UK Northumbria, for example, is one of those franchises which provides wide-ranging service to older people in HMP Northumbria. Such services are, however, not consistently available across the country:

There's loads of pockets of good work going on around the country, whether it be RECOOP, or the prisons themselves, or the Equality Leads trying to support their older population, but it's a matter of joining it all up so that it's not a postcode lottery when you're released. (Brenda, charity worker)

The above statement indicates that there are two significant factors which contribute to such gaps. The first being a lack of joined-up working, for example, cooperation and collaboration by support agencies. The second

being due to the inconsistent nature of a postcode lottery scenario dependent on geographical location

The following quote suggests that only where the older person is deemed high-risk can they expect greater access to interventions.

I suppose there's hope with younger people, isn't there? And there's lots of money for multi-agency working with younger people, but there's not for working with older people. [Talks about scheme for younger people who were prolific offenders] And there was massive support. It was every successful. But there's nothing like that for older people. No multi-agency. Unless, of course, it's MAPPA⁷ for the more serious offences, then its multi-agency public protection arrangements. But nothing for the run-of-the-mill general older offender. (Brenda, charity worker)

MAPPA is an intervention which is focused on high-risk offenders and incorporates a range of agencies involved in the supervision, management and support for the individual. For those older people incarcerated for low-level crime, i.e. low-to-medium risk, the extent to which these services and provisions exist are would seem to be denied to them. There is here of course a distinction being made between two types of older offender: a) low-to-medium risk and b) high risk with regards to accessing the range of services that exist. This distinction is made further with the advent of the Offender Rehabilitation Act, with the Probation Service managing high risk offenders, and the CRCs lower risk offenders. It may be that older ex-prisoners receive different kinds of supervision and support. Further

⁷ Multi-Agency Public Protection Arrangements:
<https://mappa.justice.gov.uk/connect.ti/MAPPA/groupHome>

research is required to better understand the difference between the two services in supervision methods for older ex-prisoners.

5.5. *Summary and concluding comments*

Because of the limited number of interviews with ex-prisoners it was difficult to establish a comprehensive understanding of the resettlement experience and process. Consequently, the need for, and significance of continued research in this area can no longer be ignored. The findings highlighted that for these two ex-prisoners who were interviewed the experience of resettlement lacked information, preparation and advance notice, and consequently they were left not knowing what to expect. They felt that there were insufficient resources and support available to them once they had left prison. In terms of the professionals who were interviewed, the CRC case managers expressed a lack of knowledge, limited experience and uncertainty in working with older ex-prisoners. They gave examples of occasions where older ex-prisoners experienced difficulties which should have been addressed pre-release and post-release, but which were not, leading to particular resettlement problems, for example, in relation to accommodation, pensions, benefits and access to mental health services. The RECOOP worker showed that accessing appropriate and suitable accommodation can be a particular challenge in relation to older offenders. Some of the interviews raised questions regarding whether and how the Care Act 2014 is being implemented, and also regarding equality and human rights issues. Those older offenders with greater resources – i.e. informal social support, accommodation and the ability to get back into employment – are better placed to succeed in their resettlement. Those who

do not have access to such resources, as Catherine pointed out, can experience alienation, isolation and marginalisation. Michael's example of the older person with substance use and mental health problems, who is in-and-out of prison, is a clear example of someone in this latter group. The findings highlight the need for further research in this area, and in particular the barriers and facilitators to older ex-prisoners' successful resettlement.

6. Discussion of Findings

This section discusses the findings described in Chapter Four and in the context of the research literature identified in Chapter Two, linking them to each of the research objectives identified in Chapter One. It will also consider the strengths and limitations of this research. The researcher will also reflect on the research process and learning experiences..

6.1. *Research objectives*

The first research objective was:

1. *To explore the experiences of older persons who have been in, and released from prison.*

One of the researcher's main goals was to explore the narratives of older ex-prisoners as the literature review highlighted that little as yet was known about this. Desistance literature which focuses on ex-prisoners (Appleton 2010; Maruna 2011) but does not specifically address older ex-prisoners. Neither do older ex-prisoners' biographies (e.g. Erwin 2003; FF 8282 2002; Archer 2003 and 2004) specifically address ageing. Research on life for older people after imprisonment is still in its infancy.

The interviews offered insights into the experience of being released from prison and re-entering society for two individuals. However, because there were only two this did not make clear the extent to which the concerns raised can be generalised. The interviewees spoke of a lack of age-appropriate information pre-release, a lack of resettlement planning and preparation, and inadequate age-specific support for older people following their release. This confirms what was identified in the literature review, particularly the

work of Forsyth et al (2015) who described older ex-prisoners' experiences as 'they just throw you out' (p. 2011). These interviews added to current knowledge by highlighting how age, class, offence, and material privilege can influence the resettlement process. The difficulties in recruitment further highlighted the challenges of being able to access older ex-prisoners to achieve a better understanding of their resettlement experiences.

The findings suggested that some CRCs and their staff are not currently prepared to meet the needs of older ex-prisoners, and the implied consequences are that for some ex-prisoners there will be insufficient support upon release. This is a new insight which indicates the need to explore how both the CRCs and Probation Services are currently responding to the needs of older ex-offenders.

2. To explore the processes (i.e. the procedures, systems and strategies) in place for older people transitioning from imprisonment to social re-entry.

The findings identified that the transitioning process from prison to social re-entry is inconsistent. This is mirrored in the literature (HMIP 2014; Forsyth et al 2015). The findings suggest that management of older people pre-release and post-release is not standardised. There are some examples of good practice. For example, Northumbria prison has collaborated with Northumbria University, Age UK Tyneside and Northumbria Probation Trust (Kennedy and Kitt 2013) to provide specific support to older prisoners. However, this does not appear to be happening consistently across the

prison estate, and there seems to be very limited specialist support post-release.

With the supervision of ex-prisoners now split between the CRCs (low risk offenders) and the Probation Service (high risk offenders), which itself raises potential inconsistencies, it is possible that older ex-prisoners will receive two different types of supervision and support, depending upon which agency supervises them. This may further exaggerate the inconsistencies in support for older ex-prisoners.

The findings also highlighted possible weaknesses in the CRCs' processes and that their systems may be more suited to younger ex-prisoners. For example, interviews with CRC staff members demonstrated that they had not received sufficient information or training to prepare them for identifying and responding to the needs and issues affecting older ex-prisoners. Angela (CRC case manager) stated that she had had to use Google to find out relevant information for an older person due for release who had contacted her whilst in prison. Another CRC interviewee indicated that in some instances older ex-prisoners are being excluded from the various programs available because of their age. This is both an equality issues and accords with what Humblet (2015) highlights as the cumulative disadvantages of ageing and institutionalised ageism.

The absence of a national strategy was highlighted as a key issue in both the literature and the empirical research. The interviews suggested that the lack of such a strategy meant that there was no overarching plan for the release and resettlement of older ex-prisoners. CRC staff described

problems in accessing suitable and appropriate accommodation, which is one of the key pathways to resettlement (Social Exclusion Unit 2002). Three of the other pathways - education, training and employment opportunities - were found not to be given equal consideration for older offenders compared with younger offenders, among the CRC staff who were interviewed. This also raises a question as to whether *any* of the pathways are being considered with regards to older prisoners. While training and employment skills may not be relevant to all older ex-prisoners (i.e. those moving into retirement) (MoJ 2014) it will be relevant for some. Moreover, those older prisoners for whom it is less relevant require a pathway to resettlement which focusses on retirement itself, which the CRC managers interviewed did not seem equipped or enabled to provide. This would indicate a need to widen current attention to the resettlement needs of ex-prisoners of working age to also include the needs of ex-prisoners of retirement age. As Senior (2003) has written:

Effective resettlement is central to the economic and social regeneration of communities and the protection of victims. Reducing re-offending is not just a criminal justice issue: it is a health issue, a drug rehabilitation issue, an employment issue and a housing issue. Resettlement is, in short, everyone's business. (Senior 2003 p.1)

What clearly emerged from the interviews, and what is a new and significant finding is that, at least among the CRC staff interviewed, older prisoners are being excluded from groups due to their age. It could be that they are not prioritised because they are less likely to reoffend than younger ex-prisoners (Ministry of Justice 2014). It may also be, as Brenda (RECOOP) suggested, because there may be less hope with regards to the future

possibilities for older ex-prisoners and/or, as CRC employee Ralph suggested, an element of ageism, with the prevailing attitude being that 'you can't teach an old dog new tricks'. However, from this project the overall impression is that based on the experiences of the CRC staff interviewed, older ex-offenders may be getting an unequal service, compared with younger ex-offenders, adding to the literature on inequalities relating to older prisoners and ex-prisoners (Crawley 2007; Chief Inspector of Prisons 2013; Cornish et al 2016).

It would also appear that there are gaps in current legislation: the Offender Rehabilitation Act does not make reference to older prisoners and older ex-prisoners; the Care Act only covers older people with eligible needs. This means that older people with needs which do not fulfil the eligibility criteria are then left with those needs unmet (Age UK 2017). With regards to the Equality Act and the Human Rights Act, it would appear that, in some circumstances, these are being breached. For example, as noted above, in the interviews it appeared that older people were being denied access to CRC programs (direct discrimination) and suitable age-specific accommodation was not always available (indirect discrimination). Further investigation is required to identify to what extent and how this is occurring.

There is insufficient routine monitoring of the status of older prisoners and ex-prisoners. For example, the quarterly statistics (Ministry of Justice 2017) do not break down the age figures sufficiently to identify difference in ages of older prisoners and ex-prisoners. Greater and more detailed routine monitoring would mean that providers would more regularly assess their

provision and could respond more quickly in adapting their responses in ways which are more appropriate to the needs of older prisoners.

One of the more significant findings from this research project is with regards to the guidance and information packs, factsheets and toolkits available (DoH 2007; NACRO and DoH 2009; Age UK 2011; CLINKS 2014). These documents, which were produced specifically in recognition of the needs of older prisoners, do not seem to be consistently made available to offender managers in the CRCs. This suggests that whilst in some regions there may be staff who are trained specifically to work with older offenders, the toolkits are not being utilised to complement what may be a standardised practice when working with older ex-prisoners. Until a wider exploration of the institutions and organisations is undertaken, the extent to which this may be of significant concern nationally can only be speculated upon. If the concerns are widespread, and if this information is not being filtered down, this would suggest that the underuse of these resources should be addressed.

3. To explore how both older age and imprisonment interact to affect an older person's social re-entry.

Ageing heightens vulnerability both in and out of prison. The research literature suggests that older prisoners who have aged in prison suffer from accelerated ageing. However, the idea of accelerated ageing is one that arose in the U.S.A. penal context. It may be argued that the institutions, regimes, and sentencing expectations of the U.S.A are not comparable with the U.K. context. Those differences can be sentence lengths, the prison environments and regimes, as well as how each country is responding to

their ageing prison population. Ageing should therefore be viewed in terms of individual nations' response to crime, imprisonment and the wider criminal justice system which may or may not support, the notion of accelerated ageing with regards to the UK experience.

When older people enter prison for the first time, the initial shock and, for some the surprise of being convicted and incarcerated, can influence their physical and psychological well-being. The research literature demonstrated that at present the majority of older people being incarcerated for the first time have been convicted of sexual offences. This may create a situation where they are doubly vulnerable, as the reaction of other prisoners to their offence creates a situation where they are isolated from the general prison population (for their protection) and are therefore unable to fully engage with the prison's programmes, which presents additional limitations.

In terms of people ageing in-and-out of prison, their continued life of crime (criminal careers) and the repetitiveness of their deprivations, are more likely to lead to the early onset of age-related problems, particularly because they can be more likely to be affected by mental health, drug and alcohol issues. Michael, one of the CRC interviewees, spoke of a male repeat offender aged over 50 who was caught in a revolving door, in a cycle of drug and alcohol abuse, and deteriorating mental health which the system seemed unable to deal with. Michael also spoke of challenges in being able to get the local mental health services involved. This should be understood in terms of the cumulative disadvantages experienced throughout the life course.

Ageing research has written about cumulative disadvantage for older people in general, with a lifetime of poverty, associated poor health, and limited opportunities leading to relatively worse outcomes in older age (Dannefer 2003). Cumulative disadvantage has been cited in desistance literature, in relation to 'racism, poverty, neighbourhood disadvantage, lack of parental support, and negative turning points such as incarceration' (Fader and Taylor 2015 p. 254). Both analyses, from the ageing and criminology literature can be developed further with regards to some older repeat offenders, for a whom a lifetime of drug and alcohol use, and being in-and-out of prison produces cumulative disadvantages for them, one of the consequences of which is a worsening effect on their mental and physical health.

Depending on both chronological age and functionality older prisoners will have very different experiences of being older in prison. For those who have aged healthily and whose experience of imprisonment does not require them to be isolated from the general population research shows that some are more involved in the opportunities available to others, for example work opportunities. For those who have aged unhealthily, the level of dependence on the institution and its staff and on other inmates is far greater.

In respect of the three stages of the National Service Framework for Older People (DoH 2001), the first, 'entering old age' (coming to the end of working life), may not transfer fully to a prison context where the notion of coming to the end of working life and/or the concept of retirement might not apply to older prisoners whose working lives may not end until they become ill or

infirm. It could only be when they are facing release that the notion of retirement applies, and they may struggle with this reality, and may also require assistance in 'retirement planning' prior to their release.

For older prisoners in the second 'transitional phase' (the shift from independence to increased dependency on others) this could potentially heighten their awareness of ageing where a prison environment is not designed for people with disabilities, and their levels of impediment affects their (already limited) autonomy. Their perception of their release date can, for some, raise fear and anxiety that the level of support they need may not be available or accessible upon release. For some, this may lead to a sense that prison either is a better place for them to be. The level of fear and anxiety associated with the transitional phase can therefore differ by the way the individual perceives their ageing and reduced abilities.

With regards to the third phase, that of 'frail older people', for those who have dementia, for example, the awareness of their environment and what is happening to them can be almost non-existent, and their lives simply become a) one of total dependence and b) one in which they are just led, suffering the consequences of an unsuitable prison environment. Those not suffering from dementia, or a similar disease, but who experience severe mobility and/or physical deterioration may suffer the indignities where consideration for their needs is not being undertaken, and the fear of dying in prison may also be pervasive. Again, with regards to release, the fears and anxieties about where they are going, who is going to support them, and the limited time they have left, can have a severe psychological impact on their well-being. There needs to be further research about these different

stages, not only with regards to older prisoners' experiences of incarceration, but also their experiences following release.

It may be that the phases identified in the framework do not adequately reflect the lives of older prisoners, particularly in relation to the notion of an end-of-work. It may also be worth considering the effects imprisonment has in relation to the different stages. It is also likely to be highly significant depending on the stage of ageing at which an older person leaves prison, in terms of their resettlement needs, issues and concerns.

4. To better understand the age-specific needs of older persons in relation to release and resettlement.

This research has provided supporting evidence that the losses experienced as the consequence of imprisonment, the deprivations of imprisonment, and real-world views, are all contrasting realities upon release, which separate older ex-prisoners from their younger contemporaries (Crawley 2004). They therefore require support specific to age (Forsyth et al 2015). These findings suggest that there is a clear need for broadening and expanding upon what little research currently exists (Kennedy and Kitt 2013).

The challenges of leaving prison increases anxieties. There is a lack of information and information sharing, and what could be initiated prior to release, i.e. arranging accommodation and access to finances, seems to be inconsistently undertaken. For some there is nothing to come out to, for both younger prisoners as well as older prisoners. However, for older ex-prisoners this may be exacerbated by heightened social isolation and

marginalisation associated with both ageing and being ex-offenders. If the planning and preparation for release is poorly implemented, leaving the person both uninformed and underprepared, it leads to further issues around access to accommodation and finances which can compound psychological health and make worse any other ailments that an older ex-offender might have. The worst-case scenario is suicide as was highlighted in one of the interviews.

There is growing research interest in older people in prison. In comparison, the level of interest by researchers given to the post-prison experience has not yet been high enough to fully understand the range of issues and experiences of older ex-prisoners. This project has therefore been a timely exercise, though modest in its nature, to reflect upon the need to develop further research in this area, in order to bridge the gap between needs and provisions.

6.2. *Strengths and limitations*

Accessing older offenders, either in prison or post-imprisonment proved to be difficult. The researcher felt fortunate to gain access to two willing ex-prisoners, however, their status as first-time prisoners serving a short sentence is in no way representative of the wider older prison population or many older ex-prisoners. With regards to external criminal justice agencies it was not possible to access the Probation Service due to time restraints and their protocols, but access to CRCs was made possible by way of a gatekeeper who had previously helped with the researcher's undergraduate research project. The researcher was able to interview four members of a

regional CRC, two of whom had moved across from the Probation Service and two who had joined directly. Again, whilst in no way representative of CRC personnel or other CRCs their insights proved to be enlightening. The researcher was also fortunate to interview a professor of academia with many years of experience researching older offenders, and a regional representative of RECOOP. Whilst this sample size was small and therefore in no way representative of the wider population of older ex-prisoners or services their knowledge and experiences helped to shape this thesis and demonstrated the need for a much larger research project. However, it is possible that those individuals who were both available and willing to be interviewed may have had agendas of their own in relation to the research topics, which could have given a specific slant to their narratives. A larger and more representative study would be able to give a wider, and more comprehensive, range of perspectives.

As a convict criminologist, the researcher had his own views about the process of leaving prison and returning to society, and there was a risk of cognitive bias, both in the conducting of the interviews and in the data analysis. The researcher attempted to be rigorous in focussing on, and incorporating, narratives which might not have been in accord with his own, both in the interview conversations, and in the thematic analysis, by paying close attention to his own perspectives to try and avoid them influencing the findings.

6.3. Reflections

In reflecting upon the research process in undertaking this dissertation, I have come to learn much more about myself, and what it takes to be an academic. The experiences of my own life challenges and the experience and challenges of being a new researcher has led to many learning curves. For instance, the challenges that arose as a consequence of my chosen topic and accessing suitable participants proved to be rather frustrating. Whilst in part I considered this to be due to the potential size of my project, I also feel it was a reflection of my naivety. I often felt compelled to use easy access sources rather than draw upon the skills, knowledge and experiences of those who were supporting me through this process, who could have, and in some instances demonstrated, that some of those 'hard to reach' areas could be accessed. I became overawed by the potential magnitude of this research. I soon realised that a small-scale research project, at Masters level, would be insufficient for a full and comprehensive exploration of the lives of older ex-prisoners. On top of that, certain characteristics of mine (linked to a diagnosis of Aspergers), resulted in me being apprehensive and cautious in my approach.

In terms of the interviews I was conscious of my own status, as a researcher-by-experience, and as a researcher in general. The easiest of the interviews was with the charity worker, as I felt no status imbalance, as opposed to interviewing the CRC staff, where I could once been one of their clients. Similarly, I had to be mindful when interviewing the two ex-prisoners that my own knowledge and experience (not simply academic) should not bias or be compared with theirs. Finally, the interview with a senior

academic was daunting with respect to being a postgraduate Masters researcher, attempting to tap into someone who had a great deal more knowledge and experience (academically) on the subject matter. For the future, and to relieve some of the discomforts I experienced, I feel it important for me to establish a position of neutrality and consider that within the relationship of researcher and participant, it is they who are the expert.

One potential interviewee withdrew consent shortly prior to the interview. I accepted this person's decision, although the experience made me feel uncomfortable at the time, because I wondered if I had done something to contribute to her decision. However, I was reassured by my gatekeeper that this was not the case, although I had to take a break before resuming other interviews. Upon reflection, and discussing this with others, I now understand that this is something all researchers encounter, and knowing that, and having experienced it first-hand, this is something I now feel better prepared to deal with in the future.

I would also like to believe that any hesitancy in utilising the avenues available to me may be overcome by not doing so previously and reflecting upon the limitations this placed upon me and the project as a whole. Should the possibility arise where this research is taken further, and I am included, whilst I envisage it being a constant challenge to overcome I will endeavour to maintain the progress made during the production of this thesis and make better use of the growing network of people who can enrich both myself and the research outcomes. In particular, I would hope to develop my interview skills in the following ways: to adhere more closely to the semi-structured interview questions, and to gently guide interviewees back to those

questions if and/or when they strayed from them; to make greater use of reflective listening techniques (King and Horrocks 2010); to express fewer personal opinions during the interviews; and when interviewing academic experts in particular, to be fully aware of their work before the interview.

As well as having Aspergers, which was only recently confirmed, I have over a long period of time suffered from other mental health issues. This over my life course has made interaction with others at times extremely difficult, with one of my coping strategies being to withdraw, 'close my curtains' and have little to do with the outside world. It is with the support from the University and those people around me that I have battled through and achieved my first degree and undertaken this Masters research project. Whilst I have learned a lot, both about myself and what is required to be an academic, those challenges will remain. However, I have come to realise that the support offered is far greater than I had previously acknowledged. My hope is that I can continue to build on the recent progress, make use of and benefit from that support in finally coming to the realisation and accepting that with application and embracing that support, I can continue to develop both in academia and in challenging my health issues.

6.4. *Summary and concluding comments*

This research highlights four key concerns. Firstly, the impact no national strategy seems to be having on the delivery of services at a local level and the impact in turn that this is having on the lives of older people being released from prison. Secondly, it raises questions about the quality of information being filtered down to both prisoners preparing for release and

offender managers who would supervise them. Thirdly, it raises issues of equality and discrimination, for example older male ex-prisoners being excluded from the opportunity of approved premises, in contrast with female offenders. And fourthly, it clearly demonstrates an urgency for these concerns to be addressed. In the following and final chapter, recommendations are made with regards to the production of a national strategy, the wholesale delivery of the toolkits currently in existence, the need to address training gaps, and the knowledge of practitioners in order to provide them with the skills required for working with older ex-prisoners.

7. Conclusion and Recommendations

This thesis has been based on an exploratory study into the experiences of older ex-prisoners pre- and post-release from prison. Its theoretical framework has drawn upon Goffman's concept of stigma, convict criminology and intersectionality. With a growing number of offenders aged over 50, there are concerns that the criminal justice system is ill-prepared to meet related challenges. The literature review identified that there are concerns about the inadequacies of resettlement information, planning and support, which may involve breaches of human rights and equality legislation. A significant concern is the implications of the absence of a national strategy for the lack of consistent and adequate provision for older prisoners and ex-prisoners.

The small-scale qualitative research project conducted for this thesis involved a thematic analysis of eight semi-structured interviews, two with older ex-offenders (a man and a woman) and six with professionals working with/in relation to older offenders. The researcher identified certain problems recruiting older ex-offender participants, and ways in which these might be resolved in a larger scale project. The findings highlighted many concerns regarding provision within the prison estate and community services, which included a lack of training, information sharing, and awareness among staff, combined with poor planning and resources.

The interviews with CRC staff suggested that they are not currently fully prepared to meet the needs of older ex-prisoners, and the implied consequences of this is that for some ex-prisoners there will be insufficient

support insecurity and instability on release. With regards to both the CRCs and the National Probation Service, further research is required to understand how older (higher risk) ex-prisoners are being dealt with by the Probation Service in comparison to those older (lower risk) ex-prisoners on CRC caseloads. Future research should address the processes, networks, supports and strategies which inform the social re-integration of older ex-prisoners. It should also consider both the barriers and facilitators to successful re-integration. There is also a need to understand how the Care Act 2014 is being implemented with regards to older prisoners and ex-prisoners and what is happening with regards to those individuals who have social care needs which do not meet the eligibility criteria under the Act.

Incorporating an intersectional framework into such research would lead to a more comprehensive analysis of the different factors involved in transition and the barriers and facilitators affecting the resettlement of older offenders. Specifically, a) how (older) age intersects with offences, experiences of imprisonment, resettlement needs and access to resources to influence outcomes on return to society; b) how being an ex-prisoner intersects with ageing to influence how and in what way older ex-prisoners experience ageing in society compared with the experiences of older people who are not ex-prisoners.

The following research recommendations are made:

- Further research to be undertaken, inclusive of all stakeholders to better understand how widespread the concerns raised in this document are throughout the criminal justice system.

- Such research should involve work towards a) identifying needs specific to older offenders of different ages and stages, and b) examining whether existing processes are fit for purpose.
- Specific areas which should be addressed include: health and social care needs assessments of older prisoners and ex-prisoners; the suitability of the prison estate to hold older prisoners with age-related disabilities; the suitability of approved premises to support older ex-prisoners, including those with age-related disabilities; resettlement pathway planning and implementation for older prisoners and ex-prisoners.
- Research should also include, wherever possible, older prisoners and ex-prisoners in both steering the research agenda and actively participating in the research process itself.
- Nationwide forums for older prisoners and ex-prisoners to be established, to give them a voice which will serve to inform policy documents and delivery of service.

The lack of a national strategy is clearly having negative repercussions for the lives of older prisoners and ex-prisoners, and is flawed in respect to local policies and practices. The following is recommended:

- That a national strategy be produced with cross-party agreement and the input of the NHS, social care providers, and charities such as the Prison Reform Trust, RECOOP and Age UK.

Training and knowledge among CRC case managers in relation to older prisoners and ex-prisoners was found to be questionable, specifically with

regards to housing, finance and support options. Clearly there is guidance out there from various sources which could be explored but this information seems not to be widely distributed, which creates unnecessary challenges and problems for both ex-prisoners and case managers. The following is therefore recommended:

- Training and information packages for CRCs, case managers, Prison and Probation service staff to be standardised and delivered nationally.
- Information packs should be made available to all older prisoners preparing for release, informing them of the release process and methods to initiate contact with services beyond prison, i.e. benefits services, pensions agencies and housing services.
- Prisons create a resource space to enable older prisoners to find out about, and contact relevant agencies, i.e. benefits and housing agencies, prior to their release.

This project has identified several equality and human rights implications in relation to the unmet needs among older prisoners and ex-prisoners, which the House of Commons Justice Committee (2013) did not adequately address. It is therefore recommended that:

- The Equality and Human Rights Commission conducts a review into older prisoners and ex-prisoners in relation to the Equality Act 2010 and the Human Rights Act 1998.

In a fair and just society, the rights and need of all older people should be equally addressed, and met. Older prisoners and ex-prisoners should be no

different, and certainly recent legislation would appear to support this. However, there would appear to still be a long way to go before older prisoners and ex-prisoners are treated equally as well as other older people, and as compared with younger prisoners and ex-prisoners. As this research project has demonstrated, these inequalities and associated unmet needs must now be addressed as a matter of urgency.

Appendices

Appendix 1: Interview Schedules

See overleaf

Questions for semi-structured interviews with ex-offenders

(1) In your own words please can you share your experience of planning and preparing for your release from prison?

Exploring: Prison procedures and timeline for release preparation.
Health, housing and employment/ training/ education (ETE)
Support mechanism - family, probation, social services, health.
Emotional preparation - including anxieties, fears

(2) Prior to release did you feel adequately prepared for your return back into society?

Exploring: Expectations
Service provider involvement
Future access to health organisations and medication (where applicable)
Housing and consideration/adaptations for disabilities (where applicable)

(3) In your own words, please can you describe what it was like for you to be released from prison?

Exploring: Re-engaging with family
Re-engaging with prior acquaintances
What support was in place/present - if any
Accessing services - ease of/barriers

(4) Please describe the emotional experience of returning back to society following your incarceration?

Exploring: Confidence
Fears
Issues relating to health, housing and finance
Process of adaptation
Reframing identity

(5) How would you describe your overall needs, especially, but not limited to the early stage of release and how/if were you supported in having those needs met?

Exploring: Identification of age/offender related needs
Identification of future needs
Perceived barriers (Self-consciousness-stigma)
Role of service providers
Engagement

(6) What impact, if any, do you think your experience of imprisonment has on your future?

Exploring: Stigma
Social identity
Prejudice
Discrimination

(7) How confident would you say you are of your future?

Exploring: Sense of self

Questions for semi-structured interviews with Staff and Service Providers

1. Could you just briefly give an outline of your role/profession and experience of (working with older persons during release and resettlement).

Exploring: The experience of working/supporting an older person following release from imprisonment.
Role specific employment skills.
Length of service and experience.
2. What, in your view, are the main differences compared to working with younger persons?

Exploring: Issues of age specific focus.
Health, Family, Housing and employment/training, and compliance
3. What policies and principles do you follow in delivering your service?

Exploring: Employees code of practice.
Legislative directives.
Partnership agreements
4. What would you consider to be the key issues to be taken into consideration working with older persons?

Exploring: Issues of age specific focus
Health, Family, Housing and employment/training, and compliance
5. In your view are there any aspects of working with this group that differs significantly from the general population of aged persons?

Exploring: Needs/welfare
Social Support/care
Difference
Inclusion
6. In terms of adapting to a life after prison and resettling into the community is there anything you might be able to think about that could compliment both yours and other services that would aid in the process of a 'successful' resettlement for the older person?

Exploring: Gaps in service provision
Additional social/welfare/health related involvement/participation
Continuity

Appendix 2: Invitation to Participate

See overleaf

Age, Imprisonment and Social Re-entry: Exploring the needs and experiences of older offenders following release and resettlement from prison

Information Sheet for Potential Research Participants

What is the study about?

This study is being carried out by Stephen Partington BSc (Hons), for a Masters in Research Degree at the School of Human and Health Sciences at the University of Huddersfield.

The research is interested in older people who have experienced a period of incarceration within the prison estate following a conviction in the courts, experiences of release and re-entry back into society and issues relating to health, housing, employment and access to service providers.

The study is open to all people over the age of 50 who are no longer incarcerated.

Why am I being approached?

You are being invited to consider taking part in the research study 'Age, Imprisonment and Social Re-entry: Exploring the needs and experiences of older offenders following release and resettlement from prison'.

You are being approached because you are either a person over the age of 50 who has served a period of imprisonment or have professional experience of working with this age group following their release.

Before you decide whether or not you wish to take part, it is important for you to understand why this research is being done and what it will involve. Please take time to read this information carefully and discuss it with friends and relatives if you wish. Ask Stephen Partington if there is anything that is unclear or if you would like more information. His contact details are on the next page.

Do I have to take part?

You are free to decide whether you wish to take part or not. If you do decide to take part, you are free to change your mind and to withdraw from the study at any point before or during your participation and for up to 4 weeks after you have participated. You do not need to give a reason. If you wish to withdraw please contact Stephen Partington using the email below quoting your unique id number.

What do I have to do?

Taking part involves one interview. The interview will take place at a time and venue as agreed between you and the researcher. The venue must be somewhere where your conversation cannot be overheard and will not be interrupted, for example, a quiet cafe, wine bar or pub where you are not alone but cannot be overheard.

Unfortunately, there will be no remuneration for travel expenses, as the researcher does not have a budget for this.

The interview will be audio recorded, to make sure of an accurate record of the interview. No-one else will listen to the recording. The university will hold this for a period of 5 years after the research has been conducted by the research supervisor Dr Andrew Newton in a secure environment in line with University of Huddersfield requirements. Interviews will last for between 1-1.1/2 hours. After the interview you will not be required to do anything else.

If you decide to take part, you will need to complete the enclosed consent form and a short form asking for contact information.

What if there is a problem?

If you have a concern about any aspect of this study, you should speak to the researcher who will do their best to answer your questions. You should contact Stephen Partington at: stephen.partington@hud.ac.uk or telephone: 01484 422288 (ext. 2667) You can also write to him at the following address:

Stephen Partington (Researcher)
School of Human and Health Sciences
The Applied Criminology Centre ~ HHR2/04
University of Huddersfield
Queensgate
Huddersfield
HD1 3DH

If you continue to have a concern and/or wish to raise a complaint about any aspect of the way that you have been approached or treated during the course of the study please contact Stephen Partington's supervisor: Dr Andrew Newton, at

Dr Andrew Newton
Reader in Criminology
Associate Director – Applied Criminology Centre
The Applied Criminology Centre | HHR2/13
University of Huddersfield
Queensgate
Huddersfield
HD1 3DH
Email: a.d.newton@hud.ac.uk
Tel: +44 (0) 1484 473837

How will information about me be used?

Your anonymous interview responses will be used by the researcher to raise awareness of the issues that affect older people with an offending past, with regard to discrimination in public services, relevant law and

about advocacy services. He will ask you if you would like to receive a copy of the summary. Only pseudonyms will be used in reference to any and all information you share and no identifiable information such as real names and locations will be used.

Who will have access to information about me?

All of your interview responses will be kept confidential. Your confidentiality will be protected at all times, both during and after this study.

Your details will be held securely on a password protected computer and will be retained by the Supervisor for a period of 5 years following completion of the study. Only the researcher and his Supervisor will have direct access to your details and any and all information shared.

Written records of the interviews will be stored securely for 5 years in line with University of Huddersfield requirements.

Contact for further information:

If you have any questions please contact the researcher, Stephen Partington.

Appendix 3: Consent Form

See overleaf

CONSENT FORM

Title of Research Project:

Age, Imprisonment and Social Re-entry: Exploring the needs and experiences of older offenders following release and resettlement from prison

It is important that you read, understand and sign the consent form. Your contribution to this research is entirely voluntary and you are not obliged in any way to participate. If you require any further details please contact your researcher.

I have been fully informed of the nature and aims of this research as outlined in the information sheet, dated 15th April 2016

I consent to taking part in it

I consent to the interview being audio recorded

I understand that I have the right to withdraw from the research at any time without giving any reason

I give permission for my words to be quoted (by use of pseudonym)

I understand that the information collected will be kept in secure conditions for a period of 5 years at the University of Huddersfield

I understand that no person other than the researcher/s and facilitator/s will have access to the information provided.

I give permission for the research author to share their findings with other academics and professionals should the opportunity present itself having been assured that I will remain anonymous.

I understand that my identity will be protected by the use of a pseudonym in the report and that no written information that could lead to my being identified will be included in any report.

I confirm that I understand that my confidentiality will not be protected where I do to cause harm to others or yourself, commit an offence or disclose offences that have not been prosecuted.

If you are satisfied that you understand the information and are happy to take part in this project please put a tick in the box aligned to each sentence and print and sign below.

You are free to change your mind and to withdraw from the study at any point before or during your participation and for up to 4 weeks after you have participated. You do not need to give a reason. If you wish to withdraw please contact Stephen Partington using the email below quoting your unique id number.

All data will be stored securely for 5 years following completion of the research and then destroyed in line with University of Huddersfield requirements.

Signature of Participant: _____ Print: _____ Date: _____ Unique id. No. _____ Pseudonym _____	Signature of Researcher: _____ Print: _____ Date: _____
--	--

(one copy to be retained by Participant / one copy to be retained by Researcher)

N.B. Confidentiality will only be broken in instances where it is revealed intentions to cause harm to others or yourself, commit an offence or disclose offences that have not been prosecuted.

Statute, Standards and Regulations

Statute

Care Act 2014

Disability Discrimination Act 1995

Equality Act 2010

Human Rights Act 1998

Offender Management Act 2007

Offender Rehabilitation Act 2014

Standards and Regulations

Prison Service Instruction (PSI) 2008/31 – Allocation of Prisoners with Disabilities

Prison Service Instruction (PSI) PSI 2009/25 – Equality Impact Assessments.

Prison Service Order (PSO) 2300 - Resettlement

Prison Service Order (PSO) 2800 – Race Equality

Prison Service Order (PSO) 2855 – Prisoners with Disabilities

Prison Service Order (PSO) 32/2011 - Ensuring Equality.

Bibliography

- Aday, R. and Farney, L. (2014). Malign Neglect: Assessing older women's health care experiences in prison. *Journal of Bioethical Inquiry*, 11(3), 359-372.
- Aday, R. and Wahidin, A. (2016). Older Prisoners' Experiences of Death, Dying and Grief Behind Bars. *The Howard Journal of Crime and Justice*, 55(3), 312-327.
- Age UK (2011). *Supporting Older People in Prison: ideas for practice*. London: Age UK. Available at: http://www.ageuk.org.uk/documents/en-gb/for-professionals/government-and-society/older%20prisoners%20guide_pro.pdf?dtrk=true
- Age UK (2015). *Human Rights Toolkit*. London: Age UK. Available at: http://www.ageuk.org.uk/Documents/EN-GB/Campaigns/Our-Rights-Our-Voices/OurRightsOurVoices_toolkit.pdf?dtrk=true
- Age UK (2017). *The Health and Care of Older People in England 2017*. London: Age UK. Available at: http://www.ageuk.org.uk/Documents/EN-GB/For-professionals/Research/The_Health_and_Care_of_Older_People_in_England_2016.pdf?dtrk=true
- Age UK Northumberland (2016). Personal communication.
- Allen, G. and Watson, C. (2017). *Prison Population Statistics*. Briefing Paper SN/SG/04334 20th April 2017. London: House of Commons Library.
- Annison, J. and Hageman, A. (2015). Older Women Prisoners and the Rubies Project. In J. Annison, J. Brayford and J. Deering. *Women and Criminal Justice: From the Corston Report to Transforming Rehabilitation*, pp 137-150. Bristol: Policy Press.
- Appleton, C. (2010). *Life After Life Imprisonment*. Oxford: Oxford University Press.
- Archer, J. (2003). *Wayland: Purgatory* (Prison Diaries, Vol. 2). London: Macmillan.
- Archer, J. (2004). *North Sea Camp: Heaven* (Prison Diaries, Vol. 3). London: Macmillan.
- Aresti, A., Eatough, V. and Brooks-Gordon, B. (2010). Doing Time after Time: An Interpretative Phenomenological Analysis of reformed ex-prisoners' experiences of self-change, identity and career opportunities. *Psychology, Crime and Law*, 16(3), 169-190.

- Baidawi, S., Trotter, C. and O'Connor, D. W. (2016). An Integrated Exploration of Factors Associated with Psychological Distress Among Older Prisoners. *The Journal of Forensic Psychiatry and Psychology*, 27(6), 815-834.
- Barry, L. C., Wakefield, D. B., Trestman, R. L. and Conwell, Y. (2016). Disability in Prison Activities of Daily Living and Likelihood of Depression and Suicidal Ideation in Older Prisoners. *International Journal of Geriatric Psychiatry*. DOI: 10.1002/gps.4578
- BBC News (2016). *101-year-old Ralph Clarke Jailed for Child Sexual Offences*. www.bbc.co.uk/news/uk-england-38367103
- Berger, R. (2015). Now I see it, now I don't: Researcher's position and reflexivity in qualitative research. *Qualitative Research*, 15(2), 219-234.
- Braun, V. and Clarke, V. (2006). Using Thematic analysis in Psychology. *Qualitative Research in Psychology*, 3(2), 77-101.
- British Criminological Society (BCS) (2015). *Statement of Ethics*. London BCS. Available at <http://www.britsoccrim.org/documents/BSCEthics2015.pdf>
- British Institute of Human Rights (BIHR) (2010). *Your Human Rights: A Guide for Older People 2nd edition*. London: BIHR. Available at: <https://www.bih.org.uk/olderpeopleguide>
- Brunton-Smith, I. and McCarthy, D. J. (2016). The Effects of Prisoner Attachment to Family on Re-entry Outcomes: A Longitudinal Assessment. *British Journal of Criminology*, azv129.
- Bytheway, B. (2005). Ageism and Age Categorization. *Journal of Social Issues*, 61(2), 361-374.
- Campbell, D. (2016). One Last Job: the story of the Hatton Garden Heist. *The Guardian* 23rd January 2016: <https://www.theguardian.com/uk-news/2016/jan/23/one-last-job-inside-story-of-the-hatton-garden-heist>
- Cavadino, M. and Dignan, J. (2007). *The Penal System: An Introduction*. 4th edition. London: Sage.
- Centre for Aging Better (2015). *Later life in 2015: An analysis of the views and experiences of people aged 50 and over*. Available at: <https://16881-presscdn-0-15-pagely.netdna-ssl.com/wp-content/uploads/2015/12/Later-life-in-2015-Ipsos-MORI-Ageing-Better1.pdf>
- Chief Inspector of Prisons (2013). Evidence. In House of Commons Justice Committee *Older Prisoners*, EV 41, pp105–110, London: The Stationery Office.

- CLINKS (2014). *Working with Older Offenders: A resource for voluntary, community and social enterprise organisations*. London: CLINKS. Available at: <http://www.clinks.org/sites/default/files/basic/files-downloads/Working%20With%20Older%20Offenders%20-%20January%202014.pdf>
- Clone, S. and DeHart, D. (2014). Social support networks of incarcerated women: Types of support, sources of support, and implications for re-entry. *Journal of Offender Rehabilitation*, 53(7), 503-521
- Codd, H. (2007). Prisoners' families and resettlement: A critical analysis. *The Howard Journal of Criminal Justice*, 46(3), 255-263.
- Codd, H. and Bramhall, G. (2002). Older Offenders and Probation: A Challenge for The Future? *Probation Journal*, 49(1), 27–34.
- Cooney, F. and Braggins, J. (2010). *Doing Time: Good practice with older people in prison - the views of prison staff*. London: Prison Reform Trust. Available at: <http://www.prisonreformtrust.org.uk/Portals/0/Documents/doing%20time%20good%20practice%20with%20older%20peop,.pdf>
- Cornish, A., Edgar, K., Hewson, A. and Ware, S. (2016). *Social Care or Systematic Neglect? Older people on release from prison*. London: Prison Reform Trust. Available at: <http://www.prisonreformtrust.org.uk/Portals/0/Documents/Older-prisoner-resettlement.pdf>
- Crawley, E. (2004). Release and Resettlement: the perspectives of older prisoners. *Criminal Justice Matters*, 56(1), 32-3.
- Crawley, E. (2005). Institutional Thoughtlessness in Prisons and its Impacts on the Day-To-Day Prison Lives of Elderly Men. *Journal of Contemporary Criminal Justice*, 21(4), 350-363.
- Crawley, E. (2007). Imprisonment in Old Age. In Y. Jewkes (ed) *Handbook on Prisons*, pp 224-244. Devon: Willan Publishing.
- Crawley, E. and Sparks, R. (2005). Hidden Injuries? Researching the Experiences of Older Men in English Prisons, *The Howard Journal*, 44(4), 345–356.
- Crawley, E. and Sparks, R. (2006). Is there Life after Imprisonment?: How elderly men talk about imprisonment and release. *Criminology and Criminal Justice*, 6(1), 63–82.
- Crenshaw, K. (1991). Mapping the Margins: Intersectionality, identity politics, and violence against women of color. *Stanford Law Review*, 43(6), 1241-1299.

- Cunniffe, C., Van de Kerckhove, R., Williams, K. and Hopkins, K. (2012). Estimating the Prevalence of Disability Amongst Prisoners: results from the Surveying Prisoner Crime Reduction (SPCR) survey. *Ministry of Justice Research Summary*. Available at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/278827/estimating-prevalence-disability-amongst-prisoners.pdf
- Dannefer, D. (2003). Cumulative Advantage/Disadvantage and the Life Course: Cross-fertilizing age and social science theory. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 58(6), S327-S337.
- Davies, M. (2011). The Reintegration of Elderly Prisoners: an exploration of services provided in England and Wales. *Internet Journal of Criminology*, 1-26.
- Davoren, M., Fitzpatrick, M., Cadow, F., Cadow, M., O'Neill, C., O'Neill, H. and Kennedy, H. G. (2015). Older Men and Older Women Remand Prisoners: mental illness, physical illness, offending patterns and needs. *International Psychogeriatrics*, 27(05), 747-755.
- Denscombe, M. (2014). *The Good Research Guide: for small-scale social research projects*. London: McGraw-Hill Education.
- Department of Health (2001). *National Service Framework for Older People*. London: Department of Health.
- Department of Health (2007). *A Pathway to Care for Older Offenders. A Toolkit for Good Practice*. London: Department of Health.
- Dwyer, S. C. and Buckle, J. L. (2009). The Space Between: On being an insider-outsider in qualitative research. *International journal of qualitative methods*, 8(1), 54-63.
- Equality and Human Rights Commission (ECHR) (2016). *Age Discrimination*. Available at: <https://www.equalityhumanrights.com/en/advice-and-guidance/age-discrimination>
- Erwin, J. (2003). *A Life Inside: a prisoner's notebook*. New York: Atlantic Books.
- Erwin, J. (2016). *Redeemable: A memoir of darkness and hope*. London: Bloomsbury
- Evans, T. and Wallace, P. (2007). A Prison Within a Prison? The masculinity narratives of male prisoners. *Men and Masculinities*. 10(4), 484-507
- Fazel, S., Hope, T., O'donnell, I. and Jacoby, R. (2004). Unmet Treatment Needs of Older Prisoners: a primary care survey. *Age and Ageing*, 33(4), 396-398.

- Fazel, S., Hope, T., O'donnell, I., Piper, M. and Jacoby, R. (2001). Health of Elderly Male Prisoners: worse than the general population, worse than younger prisoners. *Age and Ageing*, 30(5), 403-407
- FF 8282 (2002). *Belmarsh: Hell*. (Prison Diaries, Vol. 1). London: Macmillan.
- Forsyth, K., Senior, J., Stevenson, C., O'Hara K., Hayes, A., Challis, D. and Shaw, J. (2015). 'They just throw you out': release planning for older prisoners. *Ageing and Society*, 35(09), 2011-2025.
- Foucault, M. (1991). *Discipline and Punish*. London: Penguin Books
- Gale, C. R., Cooper, C. and Sayer, A. A. (2015). Prevalence of Frailty and Disability: Findings from the English Longitudinal Study of Ageing. *Age and Ageing*, 44(1), 162-165.
- Ginn, S. (2012). Elderly Prisoners. *BMJ*, 345, e6263.
- Goffman, E. (1963). *Stigma: Notes on the management of a spoiled identity*. New York: Simon and Schuster.
- Goffman, E. (1991). *Asylums: Essays on the social situation of mental patients and other inmates*. London: Penguin.
- Haggith, L.C., Mann, N., Kuhn, I., Cater, B. and Van Bortel T. (2015). Older Prisoners and the Care Act 2014: an examination of policy, practice, and models of social care delivery. *Prison Service Journal*. 224: 35-41
- Handtke, V., Bretschneider, W., Elger, B. and Wangmo, T. (2015). Easily Forgotten: Elderly female prisoners. *Journal of Aging Studies*, 32, 1-11.
- Harper, S. (2006) *Ageing Societies*. New York: Hodder Arnold.
- Harris, F., Hek, G. and Condon, L. (2007). Health Needs of Prisoners in England and Wales: the implications for prison healthcare of gender, age and ethnicity. *Health and Social Care in the Community*, 15(1), 56-66.
- Hayes, A. J., Burns, A., Turnbull, P. and Shaw, J. J. (2012). The Health and Social Needs of Older Male Prisoners. *International Journal of Geriatric Psychiatry*, 27(11), 1155-1162.
- Hayes, A. J., Burns, A., Turnbull, P. and Shaw, J. J. (2013). Social and Custodial Needs of Older Adults in Prison. *Age and Ageing*, 42(5), 589-593.
- HM Government (2012). *Caring for our Future: Reforming care and support*. London: HMSO. Available at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/136422/White-Paper-Caring-for-our-future-reforming-care-and-support-PDF-1580K.pdf

- HM Government (2016). *Care Act Factsheets Factsheet 12: Prisoners and people in resident in approved premises*. Available at: <https://www.gov.uk/government/publications/care-act-2014-part-1-factsheets/care-act-factsheets#factsheet-12-prisoners-and-people-in-resident-in-approved-premises>
- HM Inspectorate of Prisons, HM Inspectorate of Probation and Ofsted (2014). *Resettlement provision for adult offenders: Accommodation and education, training and employment. A joint thematic review by HM Inspectorate of Prisons, HM Inspectorate of Probation and Ofsted*. Criminal Justice Joint Inspection. London: HM Inspectorate of Prisons.
- HM Inspectorate of Prisons. (2004). *'No Problems – Old and Quiet': Older Prisoners in England and Wales*. London: HM Inspectorate of Prisons.
- HM Inspectorate of Prisons. (2008). *Older Prisoners: A Follow-up to the 2004 Thematic Review*. London: HM Inspectorate of Prisons.
- Home Office (2004). *Reducing Re-offending: National Action Plan*. London: HMSO.
- Home Office. (2007). *The Corston Report. A report by Baroness Jean Corston of a review of women with particular vulnerabilities in the Criminal Justice system*. Home Office: London. Available at: <http://www.justice.gov.uk/publications/docs/corston-report-march-2007.pdf>
- House of Commons (2013). *Meeting the Needs of Older Prisoners*. London HMSO. Available at: <http://researchbriefings.parliament.uk/ResearchBriefing/Summary/SN06630#fullreport>
- House of Commons Justice Committee (2013). *Older Prisoners Fifth Report of Session 2013–14*. London: HMSO. Available at: <https://www.parliament.uk/documents/commons-committees/justice/older-prisoners.pdf>
- Howse, K. (2003). *Growing Old in Prison: A scoping study on older prisoners*, The Prison Reform Trust. Available at: http://www.prisonreformtrust.org.uk/uploads/documents/Growing.Old.Book_-_small.pdf
- Humblet, D. (2015). Older Prisoners. *The Howard League for Penal Reform ECAN Bulletin*. 27, 15-17.
- Jones, R. S., Ross, J. I., Richards, S. C. and Murphy, D. S. (2009). The First Dime: A decade of convict criminology. *The Prison Journal*, 89(2), 151-171.

- Kennedy, S. and Kitt, I. (2013) *Developing services for older offenders in Northumbria*. Northumbria Probation Trust and Age UK Tyneside. Available at: http://www.tdi.org.uk/files/downloads/research_older%20offenders.pdf
- Kimmett E, Aresti, A., and Cornish, N. (2012). *Out for Good: Taking responsibility for resettlement*. London: Prison Reform Trust.
- King, N. and Horrocks, C. (2010). *Interviews in Qualitative Research*. New York: Sage.
- Kingston, P., Le Mesurier, N., Yorston, G., Wardle, S. and Heath, L. (2011). Psychiatric morbidity in older prisoners: unrecognized and undertreated. *International Psychogeriatrics*, 23(08), 1354-1360.
- Luallen, J. and Cutler, C. (2015). The Growth of Older Inmate Populations: how population aging explains rising age at admission. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, gbv069.
- Mann, N. (2012). *Doing Harder Time? The Experiences of an Ageing Male Prison Population in England and Wales*. Farnham: Ashgate.
- Maruna, S. (2011). Re-entry as a Rite of Passage. *Punishment and Society*, 13(1), 3-28.
- Maschi, T., Kwak, J., Ko, E. and Morrissey, M. B. (2012). Forget Me Not: Dementia in prison. *The Gerontologist*, 52(4), 441-451.
- Maschi, T., Viola, D. and Sun, F. (2013). The High Cost of the International Aging Prisoner Crisis: Well-being as the common denominator for action. *The Gerontologist*, 53(4), 543-554.
- Maschi, T., Viola, D., Morgen, K. and Koskinen, L. (2015). Trauma, Stress, Grief, Loss, and Separation among Older Adults In Prison: The protective role of coping resources on physical and mental well-being. *Journal of Crime and Justice*, 38(1), 113-136.
- Maschi, T., Viola, D., T. Harrison, M., Harrison, W., Koskinen, L. and Bellusa, S. (2014). Bridging Community and Prison for Older Adults: invoking human rights and elder and intergenerational family justice. *International Journal of Prisoner Health*, 10(1), 55-73.
- Ministry of Justice (2013). *Government response to the Justice Committee's Fifth Report of Session 2013–14: Older Prisoners*. Norwich: The Stationery Office.
- Ministry of Justice (2014). *The Needs and Characteristics of Older Prisoners*. London: Ministry of Justice. Available at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/368177/needs-older-prisoners-spcr-survey.pdf

- Ministry of Justice (2017). *Statistical Notice: Further breakdown of the prison population by age and offence group as at 31 December 2016*. London: Ministry of Justice. Available at:
<https://www.gov.uk/government/statistics/further-breakdown-of-the-prison-population-by-age-and-offence-group-as-at-31-december-2016>
- Moll, A. (2013). *Losing Track of Time: Dementia and the ageing prison population: treatment challenges and examples of good practice*. London: The Mental Health Foundation. Available at:
<https://www.mentalhealth.org.uk/sites/default/files/losing-track-of-time-2013.pdf>
- NACRO and Department of Health (2009). *A Resource Pack for Working with Older Prisoners*. London: NACRO. Available at:
<http://socialwelfare.bl.uk/subject-areas/services-client-groups/adult-offenders/nacro/138053older-prisoners-resource-pack-09-939.pdf>
- National Offenders Management Service (2015). *Better Outcomes for Women Offenders*. London: HMSO. Available at:
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/457922/Better_Outcomes_for_Women_Offenders_September_2015.pdf
- Newcoman, N. (2015). Learning Lessons from the PPO about Older Prisoners. *The Perrie Lectures (online)* Available at:
http://www.ppo.gov.uk/wp-content/uploads/2015/06/Perrie-Lectures-2015_Ombudsman-speech_Older-Prisoners.pdf
- Newman, C. (2005). *Last Chance: Older women through the criminal justice system*. The Griffins Society Visiting Research Fellowship Programme. Research Paper 2005/02. London: The Griffins Society. Available at:
http://www.thegriffinssociety.org/system/files/papers/fullreport/research_paper_2005_02_newman.pdf
- O'hara, K., Forsyth, K., Webb, R., Senior, J., Hayes, A.J., Challis, D., Fazel, S. and Shaw, J. (2016). Links between Depressive Symptoms and Unmet Health and Social Care Needs among Older Prisoners. *Age and Ageing*, 45(1), 158-163.
- Phillipson, C. and Dannefer, D. (Eds.). (2010). *The SAGE Handbook of Social Gerontology*. New York: Sage
- Pillow, W. (2003). Confession, Catharsis, or Cure? Rethinking the uses of reflexivity as methodological power in qualitative research. *International Journal of Qualitative Studies in Education*, 16(2), 175-196.

- Potter, H. (2013). Intersectional Criminology: Interrogating identity and power in criminological research and theory. *Critical Criminology*, 21(3), 305-318.
- Potter, H. (2015). *Intersectionality and Criminology: Disrupting and revolutionizing studies of crime*. Abingdon: Routledge.
- Prison Reform Trust (2008). *Doing Time - The Experience and Needs of Older People in Prison. A Prison Reform Trust Briefing*. Available at: <http://www.prisonreformtrust.org.uk/Portals/0/Documents/Doing%20Time%20the%20experiences%20and%20needs%20of%20older%20people%20in%20prison.pdf>
- Prison Reform Trust (2016). *Comment: Prisoners with Dementia* (online). Available at: <http://www.prisonreformtrust.org.uk/PressPolicy/News/vw/1/ItemID/342>
- Prisoners Families and Friends Service (2016). *Release and Resettlement: Finance*. Available at: https://www.prisonadvice.org.uk/system/files/public/Release_and_resettlement_finance.pdf
- Prisons and Probation Ombudsman (2016). *Dementia*. Learning Lessons Bulletin: Fatal Incidents Investigations, Issue 11. Available at: http://www.ppo.gov.uk/wp-content/uploads/2016/07/PPO-Learning-Lessons-Bulletins_fatal-incident-investigations_issue-11_Dementia_WEB_Final.pdf
- RECOOP (2014). *Implementing the Care Act 2014: Care Options for Older Prisoners*. Available at: <http://www.recoop.org.uk/dbfiles/news/260/Implementing-the-Care-Act-2014-Care-Options-for-Older-Prisoners.pdf>
- RECOOP (2017). *About Us*. <http://www.recoop.org.uk/pages/home/index.php>
- Regan, J. J., Alderson, A. and Regan, W. M. (2003). Psychiatric Disorders in Aging Prisoners. *Clinical Gerontologist*, 26(1-2), 117-124.
- Robson, C. and McCartan, K. (2016). *Real world research 2nd edition*. John Wiley and Sons.
- Ross, J. I., Darke, S., Aresti, A., Newbold, G. and Earle, R. (2014). Developing Convict Criminology beyond North America. *International Criminal Justice Review*, 24(2), 121-133.
- Ross, J. I., Jones, R. S., Lenza, M., and Richards, S. C. (2016). Convict Criminology and the Struggle for Inclusion. *Critical Criminology*, 24(4), 489-501.

- Ross, J. I., Zaldivar, M. and Tewksbury, R. (2015). Breaking out of Prison and into Print? Rationales and strategies to assist educated convicts conduct scholarly research and writing behind bars. *Critical Criminology*, 23(1), 73-83.
- Sanderson, W. C. and Scherbov, S. (2015). Faster Increases in Human Life Expectancy Could Lead To Slower Population Aging. *PloS One*, 10(4), e0121922.
- Senior P. (2003). *Pathways to Resettlement*. Sheffield: Sheffield Hallam University Press. Available at: <http://shura.shu.ac.uk/999/1/fulltext.pdf>
- Senior, J., Forsyth, K., Walsh, E., O'Hara, K., Stevenson, C., Hayes, A., Short, V., Webb, R., Challis, D., Fazel, S. and Burns, A. (2013). Health and Social Care Services for Older Male Adults In Prison: the identification of current service provision and piloting of an assessment and care planning model, *Health Services and Delivery Research*, 1(5). Available at: https://www.ncbi.nlm.nih.gov/books/NBK259270/pdf/Bookshelf_NBK259270.pdf
- Sentencing Council (2017). *Extended Sentences*. Available at: <https://www.sentencingcouncil.org.uk/about-sentencing/types-of-sentence/extended-sentences/>
- Social Exclusion Unit (2002). *Reducing Re-offending by Ex-prisoners*. London: HMSO.
- Solomon, E. (2004). *A Measure of Success: An analysis of the Prison Service's performance against its Key Performance Indicators 2003-2004*. London: Prison Reform Trust.
- Stojkovic, S. (2007). Elderly Prisoners: A growing and forgotten group within correctional systems vulnerable to elder abuse. *Journal of Elder Abuse and Neglect*, 19(3-4), 97-117.
- Sykes, G. (1958). The Pains of Imprisonment. In G. Sykes (ed) *The Society of Captives: A study of a maximum security prison*, 63-78. Princeton, NJ: Princeton University Press.
- Thomas, T, Thompson, D, and Karstedt, S (2014). *Assessing the impact of Circles of Support and Accountability on the reintegration of adults convicted of sexual offences in the community*. Leeds: University of Leeds, online: <http://www.law.leeds.ac.uk/assets/files/research/ccjs/CoSA/CoSA-Full-Report.pdf>
- Trotter, C. and Baidawi, S. (2015). Older Prisoners: Challenges for inmates and prison management. *Australian and New Zealand Journal of Criminology*, 48(2), 200-218.

- UNLOCK (2016a). *The Information Hub: Housing – Going into prison and preparing for release*. Available at:
<http://hub.unlock.org.uk/knowledgebase/housing-going-prison-preparing-release/>
- UNLOCK (2016b). *The Information Hub: Pensions – Going into prison and preparing for release*. Available at:
<http://hub.unlock.org.uk/knowledgebase/pensions/>
- UNLOCK (2016c). *The Information Hub: Benefits*. Available at:
<http://hub.unlock.org.uk/knowledgebase/benefits/>
- Van Wormer, K. (2001). *Counseling Female Offenders and Victims: A strengths-restorative approach*. New York: Springer.
- Visher, C. A. and Travis, J. (2003). Transitions from Prison to Community: Understanding individual pathways. *Annual Review of Sociology*, 29(1), 89-113.
- Wahidin, A. (2005). 'We are a significant minority': Old women in English prisons. *British Society of Criminology online journal*. Available at:
<http://www.britsoccrim.org/volume6/001.pdf>.
- Wahidin, A. (2004). *Older Women in the Criminal Justice System: Running Out of Time*, London: Jessica Kingsley Publishers.
- Wahidin, A. (2006). 'No problems – old and quiet': Imprisonment in later life', in A. Wahidin and M. Cain (eds.) *Ageing, Crime and Society*. Cullompton: Willan, pp. 171-192.
- Wahidin, A. (2011). Ageing Behind Bars, with Particular Reference to Older Women in Prison. *Irish Probation Journal*, 8, 109-123.
- Wahidin, A. and Aday, R.H. (2010). Later Life and Imprisonment. In C. Phillipson and D. Dannefer (eds.). *The SAGE Handbook of Social Gerontology*. New York: Sage.
- Wangmo, T., Handtke, V., Bretschneider, W. and Elger, B. S. (2017). Prisons should Mirror Society: the debate on age-segregated housing for older prisoners. *Ageing and Society*, 37, 675-694.
- Weiss, D. and Lang, F. R. (2012). "They" are old but "I" feel younger: Age-group dissociation as a self-protective strategy in old age. *Psychology and Aging*, 27(1), 153.
- Wiegand, N. D. and Burger, J. C. (1979). The Elderly Offender and Parole. *The Prison Journal*, 59(2), 48-57.
- Williams, B. and Abraldes, R. (2007). Growing Older: Challenges of prison and reentry for the aging population. In R. Greifinger, J. Bick and J. Goldenson, *Public Health Behind Bars*, 56-72. New York: Springer.

Williams, J. (2013). Social Care and Older Prisoners. *Journal of Social Work*, 13(5), 471-491.