

# THE IMPACT OF AND RECOVERY FROM THE COVID-19 PANDEMIC FOR CHILDREN IN CUSTODIAL SETTINGS

Dr Charlotte Lennox<sup>1</sup>; Dr Prathiba Chitsabesan<sup>2</sup>; Dr Louise Robinson<sup>1&3</sup>; Dr Florian Walter<sup>4</sup>; Dr Matthew Carr<sup>5</sup>; Dr Kenny Ross<sup>6</sup>

1. Division of Psychology & Mental Health, The University of Manchester, Manchester, United Kingdom; | 2. Pennine Care NHS Foundation Trust, Ashton-under-Lyne, Lancashire, United Kingdom | 3. Lancashire and South Cumbria NHS Foundation Trust, Preston, United Kingdom | 4. Division of Nursing, Midwifery and Social Work, The University of Manchester, Manchester, United Kingdom | 5. Division of Pharmacy and Optometry, The University of Manchester, Manchester, United Kingdom | 6. Greater Manchester Mental Health NHS Foundation Trust, Manchester, United Kingdom.

## BACKGROUND

- ▶ Children in custodial settings have much higher rates of mental health and neurodevelopmental disorders than children in the general population (1)
- ▶ Prior to the COVID-19 pandemic, HM Inspectorate of Prisons (HMIP) repeatedly expressed concerns about the safety of children in custodial settings (2)
- ▶ Evidence to suggest that the COVID-19 restrictions and limited social interactions had a significant impact on the general population and a disproportionate impact on children's mental health (3)
- ▶ There were concerns, given the vulnerability of children in custodial settings about the impact of the COVID-19 restrictions (4)

## METHOD

- ▶ This research had three phases.

### Phase 1

- ▶ We accessed and thematically analysed HMIP and Ofsted inspection reports for all sites during COVID-19

### Phase 2

- ▶ In total 41 semi-structured interviews were conducted with:
  - ▶ NHS Senior Health Professional
  - ▶ Other NHS and residential staff
  - ▶ External professional (e.g. commissioners, policy makers, Youth Offending Team)
  - ▶ Children who experienced custody at some point during COVID-19

### Phase 3

- ▶ We accessed the NHS England Health and Justice Children and Young People Indicators of Performance (CYPIPs).
- ▶ This is the primary source of healthcare reporting for the secure settings and is a commissioning tool use by NHS England.
- ▶ We accessed data across three time periods:
  - ▶ Period 1 – January 2019 – December 2019 (pre-COVID);
  - ▶ Period 2 – June 2020 – May 2021 (COVID restrictions);
  - ▶ Period 3 – June 2021 – June 2023 (COVID recovery)

## FINDINGS

- ▶ We found there were **direct** and **indirect** impacts on children in custody from the COVID-19 pandemic and the policies implemented to reduce transmission.

## DIRECT IMPACTS

- ▶ Children were not considered when COVID-19 guidance was being developed for custodial settings. There was no consistency of approach across the sites, and no one government department had oversight.

*"So there were some ridiculous policy things that went on... if we learned something from COVID in terms of the Secure Children's Homes, something needs to happen, because nobody took responsibility for them, everybody forgot about them...even by the Local Authorities, they had to basically manage the best they could." (Interview ID 4 – 1)*

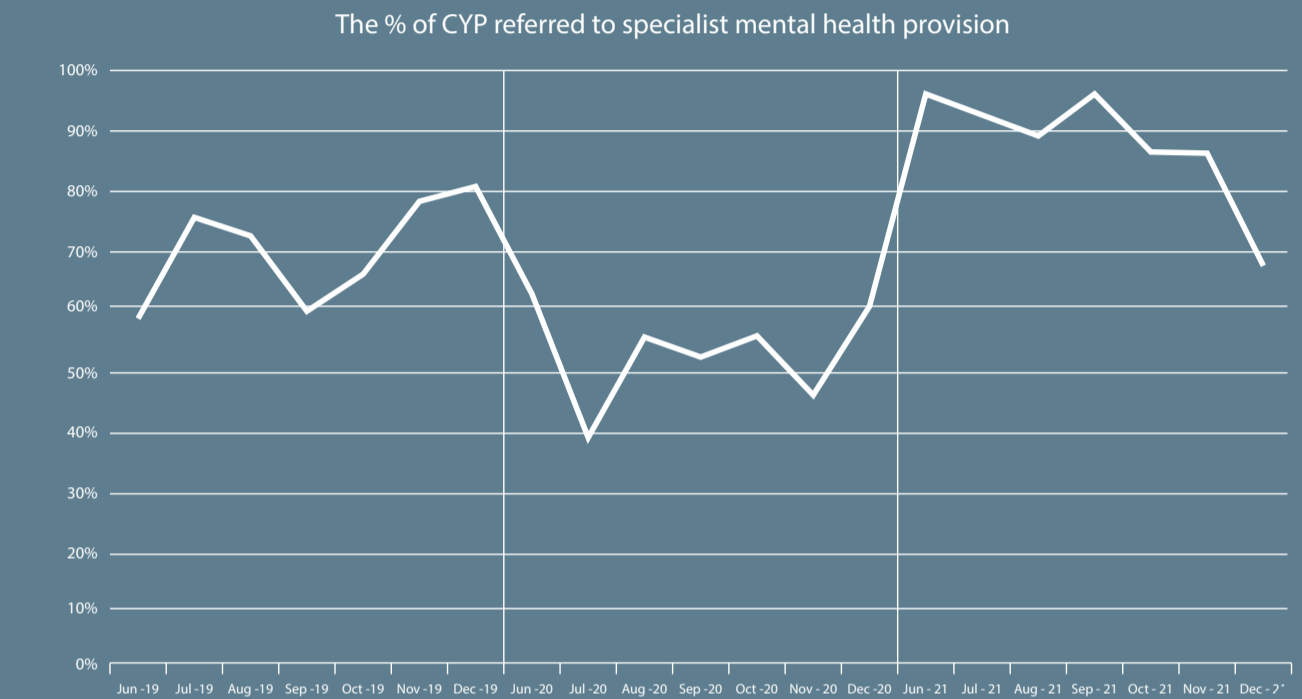


Figure 1: The percentage of children referred to specialist mental health provision at the three data time points

- ▶ This lack of guidance resulted in most sites adopting, to differing degrees, COVID-19 guidelines developed for the adult prison estate.
- ▶ However, this meant that children were locked in their rooms, in the worst cases, for 23.5 hours a day for weeks at a time.
- ▶ Staff reported that they felt this isolation resulted in a deterioration of children's mental health.
- ▶ The CYPIP data revealed an increase in referrals once restrictions were lifted compared to pre-COVID-19 rates.
- ▶ 'Bubbles' were one of the main ways sites managed children.
- ▶ Initially, these were successful as the smaller groups were easier for staff to manage.
- ▶ However, over time they led to rising tensions and inter-bubble conflict.

*"Of concern was the frequency of multiple perpetrator assaults... as the prison moved toward full landing 'communities' rather than the current small groups of children. Throughout the units, staff strictly controlled the unlocking of any cell door. This reflected a lack of staff confidence in managing individual children, and the widespread belief that children would attack each other at any opportunity" (Inspection Report YO1 1, Aug 2021)*

- ▶ Interview data showed that the rollout of the COVID-19 vaccination and conflicting messaging and behaviours from residential staff may have negatively impacted other vaccination uptake.

## INDIRECT IMPACTS

- ▶ COVID-19 and the policies implemented to minimise transmission affected staffing levels.
- ▶ Low staffing levels impacted many aspects of life, including how the children's behaviour was managed and their ability to access facilities, services and professionals, and ultimately resulted in further restrictions.
- ▶ Staffing issues were more acute in the larger sites.
- ▶ Concerns were also raised in the interviews about staff's compliance and attitudes to the COVID-19 guidance, which caused frustration in the children.

## RECOMMENDATIONS

### Future infection/emergency/ pandemic planning

- ▶ Need for consistent infection control policies that are suitable for children.
- ▶ If isolation periods are needed, this should be for the shortest amount of time and with effective senior leadership monitoring
- ▶ Need to encourage childhood vaccination uptake and staff adherence to infection control policies.

### Lessons learned from the COVID-19 pandemic

- ▶ There is a need to support staff wellbeing and staff recruitment/retention.
- ▶ The use of bubbles has been problematic and there is a need for better understanding of group dynamics.

### Areas of practice to be refreshed

- ▶ The use of the CYPIP data has the potential to be an effective research tool, but sites need to understand the value of reporting on this data to improve data quality.

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