

# After a decade of austerity, urgent changes are needed to improve prison services

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## About the research

The UK government's austerity measures, implemented in English prisons by the 2012 Benchmarking Programme, have led to a sharp reduction in the prison workforce and a cut in budgets. This has left English prisons unable to provide safe environments for rising prison populations.

Current government efforts—building additional prisons, recruiting more prison officers, and pointing to the use of psychoactive substances as a reason for increased violence and poor healthcare in prisons—have been unable to improve the state of English prisons. Likewise, continual monitoring by prison oversight mechanisms has failed to hold the government to account for the deterioration in management and security in English prisons.

Funded by the Economic and Social Research Council (ESRC), this three-year interdisciplinary study uses data gathered via semi-structured interviews with 87 research participants. Interviewees included policymakers from key organisations relevant to international prison work, such as the United Nations, the World Health Organization, and Amnesty International, as well as national policymakers and prison reform advocates, prison governors, officers across

high-, medium-, and low-security prisons and resettlement prisons, and representatives from the voluntary and private sector organisations who were commissioned to deliver the prison health agenda across English prisons. This data is supplemented by existing longitudinal and economic analyses to ensure a rounded view of the investigation.

While mainly focused on prison healthcare in England, this study can shed light on other forms of detention and community settings, and indeed beyond England, particularly for countries that have adopted austerity measures.

## Austerity/deficit reduction

From 2010 to 2019 the UK government, first under the Conservative–Liberal Democrat coalition (2010–2015) and then under Theresa May's Conservative government (2015–2019), focused on reducing the UK deficit by cutting spending on public services. Despite these policies, the UK debt-to-GDP ratio reached its highest point in 2019, higher than in the pre-austerity era in 2010. The government of Boris Johnson abandoned the term 'austerity' but did little to improve the funding of public services, including prisons. Indeed, the Treasury announced in 2020 that more than £10 billion per year would be cut from departmental spending plans in 2023 and in subsequent years (HM Treasury, 2020).

Given the rejection of Liz Truss' 'mini-budget' in September, the new Prime Minister Rishi Sunak and his Chancellor, Jeremy Hunt, have made it clear that all government departments will be expected to make large savings in an attempt to balance the books. This, then, will deepen the impact of austerity across public services, prisons included.



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## Research findings

- Despite the Treasury's announcement of the end of deficit reduction policies in 2019, very little has been done to improve resources for both prisons and the community. The Treasury announced that more than £10 billion per year would be cut from departmental spending plans next year and in subsequent years (HM Treasury, 2020); this plan, combined with the Bank of England's prediction of a recession between October 2022 and December 2023, contradicts the political rhetoric about the end of austerity.
- Through an examination of how a decade of deficit reduction has impacted upon prison funding in England, this study found that austerity has failed to reduce the national debt or improve the health, safety and welfare of prisoners in England. Brexit and the COVID-19 pandemic, alongside the current cost of living crisis continue to impact economic uncertainty. Politicians, policymakers, nongovernmental organisations, and academics must act now to address the impact of austerity on prison healthcare and prisons.
- External regulatory mechanisms, such as the HM Inspectorate of Prisons (HMIP), the Prisons and Probation Ombudsman (PPO), and the Independent Monitoring Boards (IMBs), refrained from commenting on the direct impact of austerity on prisons and prisoners. Study participants expressed scepticism about the ability of trade unions, such as the Prison Governors Association (PGA) and the Professional Trades Union for Prison, Correctional and Secure Psychiatric Workers (POA), to improve prison conditions. They were also sceptical about the efficacy of parliamentary committees in regulating prison healthcare and prison conditions. The Lobbying Act of 2014 has increasingly prevented third-sector organisations from opposing austerity due to contractual clauses and statutory requirements.
- Silence and a lack of meaningful actions to challenge austerity have sustained acceptance and implementation of it, violated prisoners' rights to access healthcare and decent living conditions in prisons, and compromised working conditions for the prison workforce.
- This study has found links between the government's decisions to reduce access to the welfare services and an increase in criminality in areas of deindustrialisation including places that are in need of 'levelling-up'. As a result, when individuals are imprisoned, they often present with extraordinarily complex health and social needs and depend on scarce prison healthcare resources that have not been expanded since 2006—even as the prison population has increased.
- The government response to prison instability—mainly building more prison spaces, recruiting new prison officers, and blaming prison instability on the increasing use of the psychoactive substance Spice—has not resulted in improvements in security or systemic changes.
- Rather than reducing inefficiency and improving cost-saving and competition, participants observed how privatisation increases monitoring costs for the government. This is due to the need to improve accountability and quality control for these contractors. Furthermore, the transfer of HMP Birmingham from G4S to a public sector prison, the bankruptcy of Carillion, and the poor performance of private contractors who delivered the Transforming Rehabilitation programme post-imprisonment exemplify the arguments against privatisation.
- The growth of prison gangs and serious organised crime has coincided with rising drug use in prisons, a dynamic that can be partly attributed to staff reductions, reflecting a weakening of institutional governance. These circumstances could lead to further dysfunction and a loss of control in prisons, as seen in the Strangeways Riot in 1990.
- Longstanding issues of prison overcrowding since 1990 and more punitive sentencing policies have led to the 'warehousing' of individuals and more violence among prisoners, with an emphasis on punishment over rehabilitation. Today, overcrowding has increased the spread of COVID-19 in English prisons where lengthy confinement up to 23 hours a day within locked and poorly maintained cells can accelerate disease progression.
- Reoffending rates continue to be high: 45% for all individuals released from custody and 61% for those serving a sentence of less than 12 months. These figures suggest that imprisonment fails to rehabilitate prisoners. Yet thanks to an increase in policing and the new Police, Crime, Sentencing and Courts Act 2022, the imprisonment rate will likely continue to grow.

## Policy recommendations

- The UK government should increase resources for prisons and prison healthcare services to improve prisoners' access to healthcare and their quality of life. The increased funds should be used to make living conditions safer rather than to provide more prison places. The focus needs to be on improving prisoner health and counteracting the impact of austerity on prison institutions rather than building more prisons to imprison more people.
- Government should conduct a thorough assessment of the fiscal impacts on prisons of deficit reduction policies. It should publicise such an assessment prior to the imposition of future funding cuts.
- Increased spending on prisons should be matched with increased investment in preventive services in impoverished or underfunded communities—for instance, via early intervention and mentoring of at-risk youths—to reduce the risk of criminal involvement, and therefore reducing the pressure on prison places.
- Policymakers should reduce the rate of incarceration by using alternative routes such as fines and diversion of individuals from prisons to health institutions. Such efforts would be more financially sustainable, more proportionate to the severity of the crime, and more responsive to individuals' health and welfare needs.
- NGOs, researchers and other stakeholders should address the role of private prisons and expose their actual costs to the public purse through data monitoring and advocacy work.
- Government and NGOs should improve the data collection and publication of the true cost of imprisonment, over and above the annual average cost per prisoner of £38,042, to society and the economy.
- NGOs and other stakeholders should consistently articulate the impact of austerity on prisoners, remind the state not to breach health standards, monitor compliance, and, as a last resort, identify and discredit human rights violations.
- NGOs and other stakeholders should also call for an independent oversight authority to ensure proper implementation of recommendations derived from prison monitoring and inspections.



**Image credit:** Castle Hill Prison, Lancaster, July 12, 2022  
(Photo by [Jonny Gios](#) on Unsplash)

## Further information

Further information about this research can be found in Ismail, N. (2022) [The English Prison Health System After a Decade of Austerity, 2010-2020: The Failed Political Experiment](#)

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Ismail, N. (2020) 'The politics of austerity, imprisonment and ignorance: A case study of English prisons', *Medicine, Science and the Law*, 60(2), pp. 89–92. <https://doi.org/10.1177%2F0025802419899744>

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