

Local Justice

Family-focused Reinvestment

Clare Hyde MBE

Editors: Simon Duffy, Jon Glasby and Catherine Needham

POLICY PAPER 23.03.2011





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About this series

Joint policy document series

In the summer of 2010 The University of Birmingham's Health Service Management Centre hosted a two day think-tank to explore whether recent innovations in health and social care might be the key to a more radical redesign of the whole welfare state.

As part of the think tank papers were produced which proposed significant policy developments. These papers were then subject to debate and criticism. The papers were then further developed for publication.

Each paper in the series has been produced by a leading practitioner and social innovator. The papers combine evidence and ideas for policy reform which are rooted in the real experience of bringing about change from the 'bottom-up'.

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Acknowledgements

Thank you to the women who have trusted me with their stories and with themselves over the past 16 years. It has been a privilege and an inspiration to work with so many strong and incredible women who, despite their own serious traumas and difficulties, have not lost their humanity, humour, warmth and kindness. Thank you also to Clare Jones and Angela Everson for sharing so many challenges and experiences and to Simon Duffy for his support, encouragement and energy.

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Preface

In the early twenty-first century, elements of the welfare state are in the middle of a ‘transformation’ process based on the concepts of personalisation and self-directed support. Beginning in adult social care, these approaches seek to recast users of state welfare away from being passive recipients of pre-purchased services towards a situation where they are active citizens with a right to control and shape their own support. Various described as a form of ‘co-production’ or in terms of individuals becoming the ‘micro-commissioners’ of their own support, this has been seen as a shift away from a ‘professional gift model’ towards a citizenship-based approach, arguably more in keeping with other aspects of our lives (Figure 1).

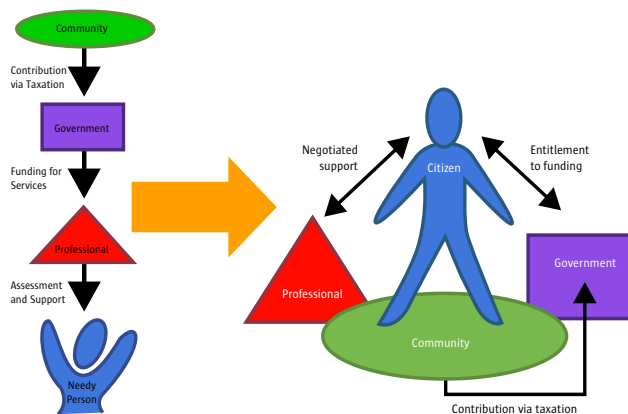


Figure 1. From Professional Gift to Citizenship Model

Central to this agenda to date has been the concept of direct payments (pioneered by disabled people's organisations and developing in the UK from the mid-1980s onwards) and individual budgets (developed from 2003 onwards by In Control). Beginning with 60 people in six local authority pilots in late 2003, there are now possibly 100,000 people receiving an individual budget and the government has stated that all adult social care will be delivered by this mechanism in future.

Although starting in adult social care, this approach is now being piloted in children's services and in healthcare, with several leading think tanks and commentators interested in its possible extension to other areas of state welfare (such as the tax and benefits system, housing, education, rehabilitation for ex-offenders, substance misuse services and support for young people not in education, employment or training). If privatisation was the key focus of the 1980s, it has been claimed, then personalisation could be the key focus of the early twenty-first century. Unsurprisingly, such issues have acquired even greater relevance in the current financial and political context, with debates about reduced state expenditure and potential government shrinkage.

Despite recent progress, much more remains to be done, including:

- Fully embedding personalisation in the training of social workers and other public service practitioners and managers.
- Exploring the implications of self-directed support for broader areas of state welfare.
- Understanding key levers for embedding change in policy and practice.
- Understanding more fully the implications for cost-effective use of scarce resources in a challenging economic climate.
- Developing more explicit theoretical and conceptual frameworks around citizenship, ethics and social justice.

Against this background, this series of papers was first presented and discussed at a national ‘think tank’ funded by the University of Birmingham’s Advanced Social Sciences Collaborative (ASSC).

We invited real experts to explore the changes they think could bring about positive change in:

- Local government and civil society
- Services for children and families
- Our health and social care systems
- The criminal justice system
- The tax-benefit system

In turn these ideas were challenged and reviewed by an audience of leading policy makers, managers, practitioners, policy analysts and researchers. We are publishing these papers in their revised form.

Underpinning many current policy debates is a sense that the ethos, law and structures that underpin the current welfare state is dominated by 1940s thinking and assumptions – and that some of the concepts inherent in debates about personalisation and self-directed support could help to shape future welfare reform. The Beveridge Report is widely credited with establishing the thinking behind the post-war welfare state. It is time to engage in the same depth of thinking about the relationship between the state and the individual in the twenty-first century. We hope that these papers contribute some fresh thinking.

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Summary

This policy paper argues that the current criminal justice system is failing communities by drawing resources into damaging and inefficient systems rather than enabling communities, families and individuals to become safer and stronger.

Four strategies are proposed for reversing this damaging cycle of public spending:

- 1.** Start with a focus on women, children and families. The current system is particularly damaging to women and to their families. Building strategies around families and using a gendered approach may be the key to tackling crime for the whole community.
- 2.** Create a new financial system where local areas have an incentive to invest in their own communities and where low rates of crime and imprisonment lead to increased levels of local investment.
- 3.** Change the way funding is used locally. Abandon the unhelpful division of funding into different service pots and create ways in which funding can be focused on communities, families and individuals.
- 4.** Use personalisation as the key to unlock family problems. Build on the high quality work of community organisations like the WomenCentre and Catch 22.

Criminal justice and social justice are not the same. But unless we attend to the deep injustices perpetuated by our society, injustices which are often reinforced by the current welfare system, we will continue to fail those who are most often the victims of crime and fail to tackle the underlying causes of crime.

Introduction

We are living in a time of unprecedented cuts to public sector spending. However the drive to reduce the high costs associated with ‘problem families’ and reduce the use of custodial sentences does give us the chance to rethink and radically improve our responses to individuals and families in need; and recognise that our response in the past may well have contributed to the difficulties some families face today.

This paper is written in the context of two important government policies. The ‘Rehabilitation Revolution’ promises to reduce the inappropriate use of prison; and the pledge to cut benefits either by catching ‘benefit cheats’ or by raising thresholds of eligibility promises to reduce public spending. Yet we also know that poverty is an important indicator of risk and that many women, living in poverty as lone parents, are prosecuted for benefit fraud or low-level crimes.

But we should respond differently and more efficiently to families at risk, not just to save money. We should do so because it is the right thing to do.

This policy paper proposes that a different approach is possible, but it will require a radical rethink of criminal justice and social policy, to achieve greater social justice and address the needs and aspirations of some of the most at risk and disadvantaged families in our communities. This paper focuses in part on individuals who offend, but it also describes how generation after generation of the same families are facing complex, multiple needs and are as likely to be victims of crime as they are perpetrators. We will also see the central role women play in halting these intergenerational cycles of disadvantage.

Focus on Families

Families dealing with complex, multiple issues need intensive, long term and highly personalised support. They need a trusted relationship with as small a number of helping individuals and agencies as possible. Women and children living with domestic violence for example, have to visit up to 13 different agencies to get the help they need. Systems and services are complex and can exclude the very people who need them most.

Families may not have trusted relationships with statutory agencies and may be reluctant to, or actively avoid, seeking help. We must therefore learn from people and organisations that are able to form trusted relationships with individuals and families who are labelled ‘difficult to engage’.

Families also need people to acknowledge and work with their natural assets and strengths despite the fact that they may have a multitude of ‘deficit labels’ attached to them individually and as a family unit.

This paper proposes that three innovations, when combined, can provide us with the thinking and the technologies required to achieve greater social justice and tackle entrenched inequalities.

These three innovations and approaches are:

1. Justice Reinvestment
2. Total Place Commissioning
3. Personalisation

1. Justice Reinvestment

Justice Reinvestment has the potential to unlock the resources required to work differently with families who offend and those at risk. Justice Reinvestment describes the process by which money currently spent centrally on custodial sentences is devolved to local places. This money can then be invested in developing and delivering prevention and early intervention services and supports in those neighbourhoods that have the highest number of residents going into and returning from prison.

This policy paper sets out the business case for Justice Reinvestment that has the potential to:

- Achieve public sector savings by reducing custodial sentences.
- Reinvest savings to tackle poverty and social exclusion in specific communities.
- Transform local services to disadvantaged people and places.
- Shift the relationship between individual, community and the state for people and places in poverty.
- Devolve decision making about the criminal justice system and services.
- Address inequality, build citizenship and create a local justice system.

2. Total Place Commissioning

In every village, town and city in the UK there are ‘problem’ families, some of whom are well known to a number of services. These families have complex health and social needs, cause multiple issues for their communities and are a drain on local resources.

Every member of such a family may have individual needs that are compounded by the context of their family environment, for example: domestic violence, drug and alcohol use, offending, worklessness and educational under-achievement. The experiences of some of the children who are born into these families will include neglect and abuse, spells in local authority care, youth justice interventions and, ultimately, prison or early death.

The Social Exclusion Task Force’s report *Reaching Out* published in September 2006 notes that adults living chaotic lives were often in contact with multiple agencies, “with each person costing statutory services tens of thousands of pounds every year. Individual agencies sometimes miss those who have multiple needs and may fail to look holistically at the individual.”

We will see that individuals and families facing severe or multiple disadvantages, who often live at the very margins of

society tend to be less likely to access statutory services and when they do are less likely to benefit from them. Contact with services tends to happen only at crisis points in their lives, like children being taken into care or a prison sentence. Individual services are not set up to address complex needs. Each agency tries to deliver services within its own remit and funding follows along similar fragmented service lines.

Total Place Commissioning approaches offer an opportunity to rationalise the chaotic and complex way in which we respond to chaos and complexity. We can reshape services and supports with and for specific people and places, improve outcomes and achieve efficiencies.

3. Personalisation

Personalised approaches are at the heart of existing successful work with people at risk including offenders and people with complex needs. Some of this existing work is described in detail in the paper and we will see that it reduces risk, addresses need and fosters and promotes citizenship, hope and recovery.

This paper describes integrated Family Service Funds as a possible future development in working with families with complex needs. Personalisation, with citizenship at its core also offers us an opportunity to redefine our relationships with individuals and families who do not necessarily share our values or view of the world.

Of course each of these innovations requires major systemic change and good leadership. The development of each innovation separately is already proving very difficult. These developments will still be highly dependent upon sympathetic reforms of the welfare state more generally. But the very depth of the problem here and the opportunity for radically improved solutions provide the ideal conditions for creating the necessary will and effort to make these changes real.

Women and Children First

The best place to start work in reforming the current system is with women and children. The impact of prison on women and children is particularly damaging and unfair. In addition women, as the cornerstone of most families, may hold the key to breaking the vicious cycle that is drawing increasing numbers of men and women into prison's failing system.

Women and children represent a minority within the criminal justice system but the use of custodial sentences has been shown to have a disproportionately devastating impact on them (Women in Prison, 2010). The vast majority of women offenders do not pose a risk to the public and the use of custody for non-violent women who are mothers has obvious implications for their children, with just 5% of women prisoners' children remaining in their own home once their mother has been sentenced (Prison Reform Trust, 2000). Prison also appears to do more harm to women than to men and although they accounted for only 6% of the prison population, women accounted for 46% of all self-harm incidents in 2007. Their levels of distress in a prison system literally designed and built for male offenders are acute and critical.

A 2006 *Health of Women in Prison Study* by the Department of Public Health, University of Oxford details the findings of one of the largest studies examining the health of 500 recently imprisoned women in England and Wales during a three month period of custody.

This study found that:

- Women in custody are more than 5 times more likely to have a mental health concern than women in the general population.
- 78% of women exhibit some level of psychological disturbance when measured on reception into prison, compared with a figure of 15% for the general adult female population.
- 58% of women had used drugs daily in the six months before prison and 75% of women prisoners had taken an illicit drug in those six months. Crack cocaine, heroin, cannabis and benzodiazepines were the most widely used drugs.
- 42% of women prisoners drank alcohol in excess of government guidelines prior to imprisonment. (The comparable figure for the general adult female population is 22%.)

The Oxford researchers also found that women coming into prison had very poor physical, psychological and social health; worse than that of women in social class V, the group within the general population who have the poorest health (Plugge et al, 2006). Two recent Government commissioned reviews on vulnerable women and people with mental health problems or learning disabilities in the criminal justice system, make many far reaching recommendations across the health, social care and criminal justice systems (Corston, 2007; Bradley, 2009). Both reviews make the point that the very systems which exist to support and protect vulnerable members of our society regularly fail to do so. It is rarely one profound and cataclysmic failure, rather a long series of failures: missed opportunities, disengagements, miscommunications and inefficiencies, one of the outcomes of which is that some vulnerable people end up in prison.

As one of the reviews states:

Many women in prison have been failed by society including the NHS long before they arrived at the prison gates and many are simply too ill for prison to be an appropriate location for them. Prison is being used to contain those for whom there is no proper provision outside prison, or who have already been excluded from society.

(Corston, 2007)

The use of custody for children is also highly contentious. There were 2,195 10-17 year olds imprisoned in England and Wales at the beginning of 2010, a rate higher than almost all other Western European countries (Lawlor et al, 2010). Most children coming into custody have experienced some form of abuse or family dysfunction and prison causes further distress and harm. Young people and children in prison are 18 times more prone to commit suicide than children of the same age in the community (Frühwald and Frottier, 2005).

Between June 2000 and June 2007, there was a 13.2% increase in the population of children and young people in the secure estate i.e. Young Offenders Institutions (YOI), Secure Training Centres (STC) and Local Authority Secure Children's Homes (LASCH). The last two decades have also seen an 800% rise in the use of custody for younger children. In 1992 only 100 children aged 12, 13 and 14 were sentenced to custody; in 2006/07 this figure had risen to 844 (Youth Justice Board, 2007).

There is significant evidence that offending behaviour is linked to early childhood abuse, violence and neglect. Currently 71% of children in custody have been involved with, or in the care of, social services before entering custody and 75% of children in custody have lived with someone other than a parent at some time compared with only 1.5% of children in the general population (Youth Justice Board, 2007).

These are complex inter-generational cycles of violence, abuse and offending and we know that 65% of boys with a convicted parent go on to offend themselves (Social Exclusion Unit, 2002).

A recent study demonstrated that:

Women and men enter into the criminal justice system through unique gendered pathways. For women, a distinct pathway begins with early childhood abuse which leads to mental illness, most notably depression. To cope with the depression, many women turn to substance use. This substance use and later abuse is purported to contribute to criminal behaviour.

(Gehring et al, 2009)

This 2009 study empirically tested the pathways perspective. Using a random sample of females and males from the National Longitudinal Study of Adolescent Health, the study tested for hypothesized interrelationships between abuse, substance abuse, and mental illness. Results indicated a distinct “pathway” for women. The effect of childhood abuse on offending was mediated by depression and serious alcohol problems. A similar pathway was not evident in the male sample. The results suggest support for the pathways perspective, evidence of gender-specific risk factors for offending, and support for the link between abuse and offending for both females and males.

In other words, equality demands different approaches for men and women. Taking an insensitive, gender-neutral approach is more damaging to women and men and completely fails to address the different patterns of behaviour that draw people into crime and into the prison system.

Blind Justice

Crimes against women and children often seem to go unnoticed. Child abuse, rape, sexual assault and domestic violence (especially rape in a domestic violence context) often go unreported and are therefore not in the sight and consciousness of the criminal justice system or the general public.

Only 15% of serious sexual assaults against adults are reported to the police and of the rape cases that are reported only 6.5 percent result in conviction (Smee, 2009). Every minute in the UK, the police receive a call from the public for assistance for domestic violence. This leads to police receiving an estimated 1,300 calls each day or over 570,000 each year (Stanko, 2000). Of these, 89% were calls by women being assaulted by men. However, according to the government National Domestic Violence Delivery Plan, less than 24% of domestic violence crime is reported to the police (Walby and Allen, 2004).

In *Power, Crime and Mystification* Stephen Box points out that domestic violence and sexual assault (he also includes police and corporate crimes) are all largely marginal to dominant legal policy, enforcement, and indeed academic agendas (Box, 1983). Yet all are, at the same time, creating widespread harm, specifically amongst already disadvantaged and powerless people.

Thus criminal laws against murder, rape, robbery and assault do protect us all but they do not protect us all equally. They do not protect the less powerful from being killed, sexually exploited, deprived of what little liberty they possess, or being physically or psychologically damaged through the greed, apathy, negligence and unaccountability of the relatively more powerful.

(Box, 1983)

This ‘system blindness’ perpetuates conditions where horrific crimes which are fundamental abuses of human rights, of power, trust and control are not tackled. The fact that the majority of

these serious crimes are committed against women and children is a symptom of some societal malaise which needs to be acknowledged and addressed because it is a critical part of the solution.

A high proportion of women and young offenders are victims of childhood sexual abuse, have lived with domestic violence as children and in their adult relationships.

- 2 out of 5 girls and 1 out of 4 boys in custody report suffering violence at home.
- 1 in 3 girls and 1 in 20 boys in prison report sexual abuse (Prison Reform Trust, 2010).

Their own crimes are often linked to the damage that this abuse has inflicted. Some very young women leave homes where domestic abuse and child sex abuse are present and are then coerced into prostitution and controlled through drugs and alcohol by their pimps. Children who live with domestic violence are at an increased risk of behavioural problems and emotional trauma, and mental health difficulties in adult life (Kolbo et al, 1996). Nearly 75% of children on the 'at risk' register live in households where domestic violence occurs and 52% of child protection cases involve domestic violence (Farmer and Owen, 1995).

If we accept this inter-connecting evidence then we also have to accept that women, as mothers, are the key to breaking the cycle of victimhood and offending. Women's acceptance of violence and abuse, their expectations for themselves and their children, their ultimate inability to protect themselves and their children is the thread that links the vast majority of people in prison today.

Study in Failure

The recent high profile case of two young brothers from South Yorkshire graphically illustrates the problems outlined above. The brothers at the ages of 10 and 11 carried out a 90 minute attack on two other boys aged 9 and 11. The victims, who appeared to have been randomly chosen, were stripped, strangled, stamped on, hit with bricks, and forced to sexually assault each other. The brothers were sentenced in January 2010 to indeterminate sentences for public protection. The minimum term they will serve is five years.

The boys were members of a family with seven sons. The mother had depression and a drug dependency. The father was routinely cruel and violent to his wife and children. At their trial, the court was told that the boys were regularly witnesses to and victims of their father's extreme domestic violence, were allowed to smoke cigarettes and cannabis, drink alcohol and watch pornography, and were treated as adult confidants by their mother in relation to her personal and emotional needs (Guardian, 2010). The brothers along with the other 5 children in the family were well known to a number of agencies and the 10 and 11 year olds had, in fact, been taken into local authority care just 3 weeks before the attacks took place.

A serious case review found that various local agencies missed 31 opportunities to intervene with the family and Doncaster council subsequently apologised to the victims and their families for its failings.

Should there have also been an apology to the family of the two young perpetrators? An apology to their mother that no GP, midwife or health visitor throughout her 7 pregnancies and births asked the right questions about the life she and her children were living at home? They were each a victim of the 'hidden' crimes of domestic violence and child abuse. Yet the brothers are not clear cut victims. They had reached their tipping point and committed serious crimes; and, worryingly, organisations which exist to promote child welfare led the campaign for the sentences to be increased.

This case raises a number of questions which suggest the urgent need for alternative approaches to child offenders to be developed:

1. Any intervention by an agency coming into contact with the family in 2009 would have had to have been drastic, long term and resource intensive in order to be successful. It is apparent that an intervention did take place as the brothers were taken into care but the very act of taking the boys into care could have inflicted further damage. The 'placement' certainly did not last very long nor was it effective in reducing risk.
2. Taking the two young boys into care certainly did not address the fact that their mother and siblings were still living with a violent and abusive man and were daily victims of a serious crime within their own home. Providing a successful intervention which does not involve taking children into care is extremely challenging at such a late stage in a family's history, when patterns of behaviour are entrenched and children tip from being a vulnerable child into a dangerous adult.
3. It was obvious that members of the South Yorkshire family were at risk of offending as there had been many incidences of anti-social behaviour before the horrific attack took place. It is also clear that any intervention at such a late stage in the family's life would have had to be highly personalised and tailored not just to the meet the needs of each individual family member but the needs of the family unit as a whole. The first issue to be addressed would have been the safeguarding of the mother and the children as victims of the ongoing domestic violence. Identifying risk, needs, strengths and natural supports and subsequently creating an integrated, intensive 'family support plan and budget' would have been possible only through beginning to build a trusted relationship with the family.

The 31 missed opportunities identified in the serious case review tell us a great deal. Enormous energy and resources were presumably spent in trying to engage or intervene with this family.

Our hypothesis is that three different approaches could be combined so that the risk of these kinds of cases could be reduced:

1. **Justice Reinvestment** - Give local agencies better incentives to invest in local resources, rather than encourage the use of a centrally funded prison system.
2. **Total Place Commissioning** - Enable local agencies to make better and more flexible use of their shared resources, rather than each working to centrally defined priorities.
3. **Personalisation** - Work with individuals, families and communities to enable tailored and effective solutions to problems, rather than a limited and fixed menu.

In the following sections we explore each of these distinct innovations in some more detail. Already there is early evidence that each strategy can succeed.

1. Justice Reinvestment

Work is just beginning in the UK to explore the potential of Justice Reinvestment to address the current over use of prison sentences for low risk, vulnerable offenders and to tackle the health and social inequalities faced by some of our communities.

In Yorkshire and the Humber, early discussions have already taken place drawing upon the experiences of people who are or have been involved in the criminal justice system, the agencies who work with them and the recent research work of The Foundation for Families, The Centre for Welfare Reform and WomenCentre (Duffy and Hyde, Forthcoming).

Justice Reinvestment describes the process by which funds spent on custodial sentences are re-directed towards preventative, community based initiatives which tackle the underlying causes of crime. This local reinvestment offers communities the opportunity to play an active role in developing and delivering solutions and in re-shaping their criminal justice system.

Prison is costly and inefficient. Today prison numbers exceed 83,000 and there is little evidence that prison works to rehabilitate offenders; 47% of adults are reconvicted within one year of being released - for those serving sentences of less than 12 months this increases to 60%. For those who have served more than 10 previous custodial sentences the rate of reoffending rises to 76% (Ministry of Justice, 2009).

Central government currently bears the cost of prison placements. This means that imprisonment offers local agencies cost free, temporary relief from the duties of dealing with sometimes problematic and often vulnerable offenders. Sentencers may also perceive prison as a legitimate place of safety for some offenders. Providing intensive, long term support to keep offenders with complex needs in their communities is an additional cost to local authorities and their partners.

However, there *are* highly effective and inexpensive community based alternatives to custody such as WomenCentre, a Yorkshire and Lancashire based charity, and the national young people's charity Catch 22. Organisations such as these have achieved significant reductions in reoffending rates and in doing so, have ensured that local agencies are appropriately engaged with some of the most at risk individuals and families in our communities.

Nacro's Prison and Resettlement Research Unit carried out an evaluation of WomenCentre's service for women offenders and, studying a case load of 125 women, found that the reoffending rate of women engaged with the Evolve Project is 3.2%, compared to the national average of 47% reconvicted within one year of being released; for those serving sentences of less than 12 months, which is the case for the vast majority of women offenders, this increases to 60% (Nacro, 2009).

Local authorities and local agencies have almost no say on how the £4.5 billion of public money spent on prison and probation is used. There has been very limited local say about the desirability of changes in national sentencing policy which have brought a near doubling of the prison population since 1992 although this doubling has many implications for local authority services. Given the negligible impact on crime reduction, particularly from short prison sentences, and the substantial economic and social costs involved, a fuller debate might have been expected about the value and utility of such increases. It is true that sentencing takes place at a local level but sentencers have had scant opportunities to see their sentencing in its social context. Thus criminal justice policies have been relatively unconstrained by questions of affordability, social costs or long term impact. Because prison, by far the costliest sentence, is paid for nationally, there is limited local interest in reducing the numbers locked up as any savings that accrue cannot be spent on other measures at a local level.

(Allen and Stern, 2007)

Local authorities and their crime reduction partnerships are well aware that offending rates differ between communities. People living in the poorest 10% of electoral wards are almost 6 times more likely to be murdered than those living in the least poor 10% (Dorling, 2005).

Speaking in March 2010 following the publication of research identifying, for the first time, the locations of Britain's 15,000 'prolific and priority offenders', Shadow Home Secretary Chris Grayling said:

The most persistent offenders often come from the most challenging and deprived areas of our biggest cities and are frequently driven by drug addiction. It underlines how those areas are disproportionately affected by crime.

(Grayling, 2010)

Furthermore, geographical analyses carried out as part of the USA's Justice Reinvestment project which is taking part across 14 states, consistently identifies that a handful of communities in each state receive the majority of people released from prison.

For example, the state of Vermont which has a population of only 620,000 found that:

- Nearly 50 percent of male inmates came from the state's three largest cities — Bridgeport, Hartford and New Haven.
- The number of people incarcerated in a single neighborhood in New Haven amounted to \$20 million in corrections costs. Of that total, \$6 million was spent for probation violators.
- A comparative analysis of criminal justice, Department of Labor and Department of Social Services data for New Haven revealed that the neighborhoods that received the largest share of people returning from prison were also home to a disproportionate share of recipients of unemployment insurance, Temporary Assistance for Needy Families, and food stamps (Council of State Governments Justice Centre, 2008).

The implications of these differences are obvious for local authorities and for individuals and communities, as there is also a correlation between living in a 'disadvantaged' area and other inequalities across a range of social exclusion indicators such as: poverty, mental and physical ill health, low educational achievement and worklessness.

A further imperative for radically reducing the current over use of custody is the fact that British jails are full of adults and children who meet the definition of vulnerable on many levels. People who have experienced abuse and neglect, people with mental health problems and learning disabilities, and people from some BME backgrounds are all over-represented in British jails. In a thematic review of the care and support of prisoners with mental health needs, HM Chief Inspector of Prisons said that:

...prison has become, to far too large an extent, the default setting for those with a wide range of mental and emotional disorders which may themselves only be part of a spectrum of disadvantage.

(HM Inspectorate of Prisons, 2007)

Social and criminal justice reformers are grappling with the paradox of punishing those damaged and vulnerable people who *do* break the law and the fundamental principles of social justice and human rights - recognising the fine line that exists between being a victim and becoming a perpetrator.

2. Total Place Commissioning

The notion of Total Place thinking has become of increasing interest to policy-makers and local leaders. It means shifting the strategic focus away from simply delivering some fixed set of public services. Instead local areas are encouraged to think about their own unique set of assets and problems and to shape solutions that make the best sense in that context.

This idea was further developed by Duffy into the notion of Total Place Commissioning which gives us an opportunity to find ways of doing things that really work with the grain of local communities to meet locally defined needs (Duffy, 2010).

Duffy proposed that the six key elements of a Total Place approach are:

1. **Locally Agreed Outcomes** - The identification of an overarching local vision, which identifies desired outcomes and the needs that must be met to achieve those outcomes
2. **Co-production** - The strategy must recognise that the positive outcomes cannot be achieved without the leadership and involvement of citizens and communities. Professionals and public services can only co-produce improved outcomes.
3. **Community Assets** - Strategies to achieve these outcomes must be based on the identification and support of all community assets, this includes public services, but goes much further to include citizens, families and the full range of community resources.

4. **Smart Investments** - Local commissioning and investment decisions must be based upon real evidence of effectiveness and the use of all forms of investment, this includes prevention and enablement, the use of individual budgets, and support for community infrastructure.
5. **Real Partnership** - Local partners making investment decisions together in the light of the different obligations and constraints placed upon them by central government.
6. **Innovation & Evaluation** - The whole process of place-based commissioning must be underpinned by competence in encouraging innovation and examining what practices are genuinely working.

This framework helps us to see that, if our primary responsibility is to help people have good lives, then we need to learn how to establish the conditions for success. The model is described in Figure 2.

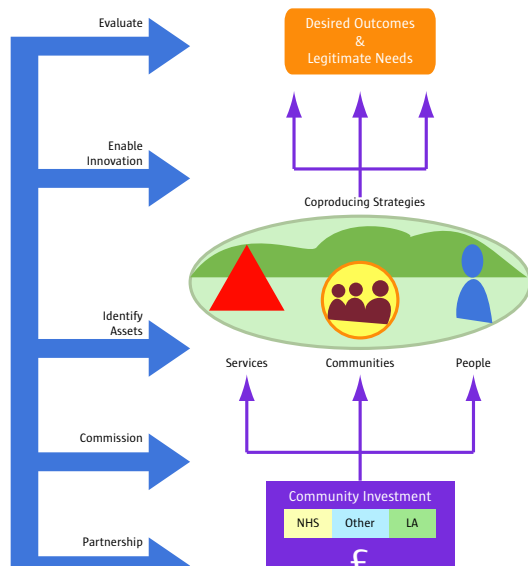


Figure 2. Total Place Commissioning

It is important to see that this is a whole-system model: a change in one part of the model will require changes at other points.

In particular it is important to note that:

- Increasing money in public services can reduce the money that people manage privately.
- Shifting resources towards more productive and empowering strategies inevitably mean moving resources away from less effective strategies.
- Existing structures and silos may be poorly focused on real problems or socially valued outcomes.
- Current legislation and systems of central control often conflict with each other and with local priorities.

In the context of changing reoffending rates and improving local services for women and families it is clear that Total Place Commissioning will require several key organisations to come together and begin very challenging conversations about how the local community can change:

- NHS - Healthcare services have significant resources (10% of GDP) and a powerful impact on the local economy at every level and often have the most direct contact.
- Police and other emergency services - The police are at the fore-front of responding to crises, violence and crime.
- Social work - Local government oversees social work services for children and adults and is often left with the challenging work of unpicking problems with families.
- Judicial system - Local magistrates and the courts control how sentencing decisions are made and their decisions reflect the options that are made available to them.
- Community organisation - There are often key organisations, developed within local communities, that have a deeper understanding of how communities function and how to develop smarter responses.

It is impossible to underestimate the difficulty of creating the kind of new conversations that make change possible. Habits are ingrained and there are many vested-interests which people will seek to protect if change is mooted. Moreover, while central government has often promoted Total Place approaches it is actually the restrictions placed upon funding by central government that present the greatest challenge. Nevertheless, as we shall see, progress is possible.

A Multi-Agency Approach

Calderdale in West Yorkshire was the first area in England to develop the Multi-Agency Risk Assessment Conference arrangement. Four years ago the model was used by WomenCentre as the starting point to test a new way of working with the ‘top twenty’ most at risk families in the district.

The multi-agency partners used their collective intelligence about families they were working with to identify those who were experiencing the most chronic and severe domestic violence. WomenCentre secured national pilot status through the Adults Facing Chronic Social Exclusion initiative for the development and called their pilot the Maze Project, reflecting the labyrinth of services and systems which women and families have to try and navigate to get the help they need.

Figure 3 below describes the process developed by WomenCentre and their partners using the Multi-Agency Risk Assessment Conference framework and illustrates how this process could be applied to any single or multiple risk factors - it is Total Place Safeguarding.

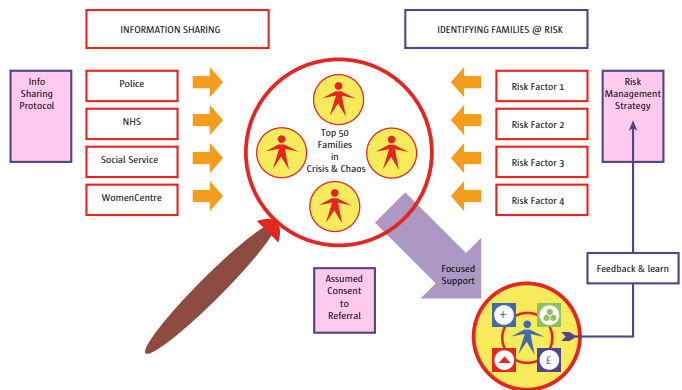


Figure 3. Total Place Safeguarding

In delivering the Maze Project, WomenCentre staff took the Lead Professional role and began, for the first time in their history, to work with the whole family including the male perpetrators of domestic violence. WomenCentre use personalised approaches which they have developed over many years.

Personalisation in a domestic violence context is subtle and complex. If someone has experienced long term abuse and control by another then their decision making capability is ‘set at survival’, and in some circumstances attempting to take back some control and stop the abuse, is a highly dangerous thing to do. Understanding and acknowledging that is essential in establishing a relationship with the family.

The same principles and methodology could very easily be applied to identify those families at significant risk of offending and families who are already offending. Agencies can share intelligence, information and nominate a lead organisation and lead professional. The lead professional will need to work like the WomenCentre’s workers, rather than as an old style probation officer or statutory social worker.

Other examples exist of approaches which effectively target ‘at risk’ families. Catch 22’s Rapid Action Project (RAP) in Essex is an award winning example of a community based early intervention scheme targeting 5-13 year olds at risk of offending who are not supported by social or statutory agencies.

This is a partnership between Essex Police and Catch 22 dealing with referrals of young people as soon as they come into contact with the criminal justice system; working with and providing intensive support to the young person and their families.

- Referrals are made when a young person receives a police reprimand; is under 10 and engaged in offending behaviour; lives in a family where there is a reported incident of domestic violence; or is at risk of exclusion from school.
- In addition, workers are placed in police stations to receive referrals as soon as a young person comes into contact with the police. This rapid response is crucial.

- Following a referral a project worker visits the young person and their family in their home to discuss the wide range of support available. Immediate contact with the whole family allows strong relationships to be formed and makes it easier to give young people the emotional and physical support they need.

One of the main strengths of the RAP is the flexibility of the support provided. Workers are geared up to adapt to a whole variety of complex issues. Project workers refer young people and families to other professional agencies such as drug support and mental health teams when needed, and make sure they get to appointments. The relationship between the worker and the young person is confidential and often takes place away from the home. This allows the young person to 'open up' and makes them feel someone is taking a real interest in them as an individual. They then feel free to discuss problems at home, school and with peers.

Workers develop realistic and measurable action plans with young people. These can cover issues such as anti-social behaviour, anger management, bullying and peer pressure, communication skills, family relationships and community participation through activities and local clubs. They also support young people in the classroom, facilitate meetings with their teachers and help with homework.

And the RAP seems to be very effective. The RAP received 422 referrals in its first year. In evaluation:

- 70% of parents/carers noted significant improvements in behaviour and anger management
- 90% noted improvements at school
- 80% noted significant improvements in self-esteem, self-confidence and self-presentation
- 100% noted increased levels of happiness

Police officers have spoken of their relief at being able to key young people into immediate intensive support; domestic violence agencies said proactive support and intervention is now getting to very vulnerable children.

Learning from the successful approach of organisations like Catch 22 and WomenCentre, which work across organisational boundaries and cultures and develop lasting relationships with people who do not necessarily share society's views or values about citizenship, offers the greatest hope for families at risk. Identification and assessment of the families would be based on what we know to be risk factors from examining serious case reviews and from the case histories of thousands of offenders.

These are:

- Known to more than one agency
- Domestic violence
- Offending or pre-offending behaviour of one or more family members (e.g. anti-social activity)
- Mental ill health
- Alcohol and drug use
- Poor educational achievement
- Worklessness and poverty

The Cost of Failure

The resources that are spent - often with very little success - on those in the greatest need are very high. These resources could be used much more effectively and flexibly if they were not locked into current systems.

Evidence emerging from initiatives like Participle's LIFE project which works with families experiencing an ongoing pattern of crisis: domestic violence, debt, poor living conditions, feuds with their neighbours, alcohol misuse, truancy, the threat of homelessness, criminal proceedings is showing that the costs these families incur, across multiple agencies, services and departments, are estimated at over £250,000 per family per year.

Antisocial behaviour is common but these families have often been victims themselves, are isolated from support networks, live in fear, have numerous and serious mental, physical and emotional health issues and, importantly, have never known a different life. It's often a generational issue, as their parents and grandparents before them, their siblings, children and grandchildren grow into the same patterns.

(Participle, 2010)

Imagine if a conversation had taken place with the South Yorkshire mother prior to the attack and she had been told that her boys were statistically very likely to end up in prison and that her future grandchildren would suffer as her own sons had. Imagine if she had been told how much her family was costing local services. Imagine, with seven children, that cost was a minimum of £250,000 per year. Imagine if she had been given the opportunity to say how that money was spent.

What service or support system might she have designed for herself and family? Somewhere safe for her and the children to live apart from her husband, a stay in a private addiction clinic, focused individual psychological support for the children and herself, a housekeeper, personal assistants; all possible with £250,000 per year.

And yet this £250,000 a year is difficult to pin down coming as it does from several agencies' budgets and being spent, in the main on crisis level interventions, staff and infrastructure. Justice Reinvestment offers us the opportunity to unravel and unlock these local assets to ensure that they are used in an integrated and effective way and to give people and families control of these assets.

Most adult offenders are not eligible for support from adult social care. Young offenders are, as discussed, quite often already identified as 'at risk' and may well be in the care of the local authority. It would be possible, in the case of these children, to quantify their care, to attach a cost to it and to start to think very differently about how that money could be spent.

It is not just criminal justice thinking and policy which offers the opportunity to radically reinvest significant public funds to meet the needs of the most at risk and disadvantaged people in society. The Treasury's Total Place initiative has set a new direction for local public services and local authorities, with a range of freedoms that define a new relationship with government. It has shown how, through local leadership and better collaborative working, it is possible to deliver services which meet people's needs, improve outcomes and deliver better value for money.

The Total Place approach - putting the citizen at the heart of service design - has helped open the door for local partnerships to discover what can be done to improve the system and to push forward innovative ideas and solutions to change the way services are delivered. It has meant looking for new ways of co-operation, at local level and between local level and Whitehall.

It is also an approach which has survived the change in government. In October 2010 Secretary of State for Communities and Local Government, Eric Pickles said:

Until now councils have never had the freedom to do things their own way. Whitehall funding has been funneled through hundreds of disparate funding programmes wrapped up in tight financial conditions that effectively strangled local choice. As a result the incentive to be innovative, efficient and responsive to

voters instead of Whitehall was dramatically dulled. By uprooting the silos, unlocking and relinquishing the spending controls administered by Whitehall we can give towns and places the freedom to direct spending to best meet the needs of the citizens within their boundaries.

We have already freed up billions of pounds of council funding but we're determined to do more to put councils in the spending driving seat. As part of the spending review, we've torn down those artificial barriers so that the funding for families with complex needs reaches areas as a single pot of money - a Community Budget - that will help better protect frontline services and help the most vulnerable.

(www.communities.gov.uk/news/newsroom/1748116)

Think back too, to the vision articulated in Putting People First in 2007 that:

Ultimately, every locality should seek to have a single community based support system focussed on the health and wellbeing of the local population. Binding together local government, primary care, community based health provision, public health, social care and the wider issues of housing, employment, benefits advice.

(DH, 2009)

Total Place and Putting People First may signal a journey towards a single, locality based 'Public Service Commissioning Authority' with powers to commission in radically different ways across health, social care, criminal justice and other public services with people. We are a long way from any such system today - but combining Total Place and Justice Reinvestment is a powerful place to start to unlock centralised resources and tackle fundamental inequalities.

There would be hope that the scenario where multiple agencies miss 31 opportunities to intervene with one family should never happen again because, once identified as a family at risk, a single

agency could take responsibility and commission for (and with) the family – personalising their health, education, social care and other support needs.

Calculating a cost for holistic and personalised family interventions may initially have to be based on what we already know about the costs of failure: incarcerating a woman or a young person, the costs of domestic violence and the wealth of evidence about substance misuse and acute mental health costs.

Learning lessons from the use of resource allocation systems in education, health and social care which have successfully brought together different funding streams will be the key to allocating a resource to families. For families who currently cost local agencies many thousands of pounds this could then serve as a Family Service Fund (Cowen, 2010).

3. Personalisation

The solutions that will promote safer families and safer communities will have to be designed with and around individuals. It is only when people begin to gain some control over their own lives, and have hope for the future, that they can move on and make good decisions.

Justice Reinvestment gives us the chance to redirect resources towards effective, low cost preventative supports, and interventions that help to improve the awareness and responsiveness of the whole community to those individuals and families who are at risk of offending.

But identifying families at risk will be a more sensitive and challenging task than identifying those families already affected by offending, and raises issues about stigma on the one hand and the perception that the system is rewarding poor parenting on the other. These wider ‘perception’ factors: the media, public opinion and political rhetoric contribute to the reluctance of government to pursue a strategy which tackles the root causes of offending.

Yet, as shown by a Smart Justice survey, when the public are presented with the facts about the vulnerabilities of people in prison and the poor record of prison in reducing reoffending, they are quite capable of seeing that the current system needs a radical rethink (Hanks, 2007). A radical rethink and radical reinvestment would inevitably lead to discussions about the design and delivery of local services. At the core of these discussions must be the idea of personalisation.

The potential of personalisation to provide one of the foundations for a radical transformation of the criminal justice system is great. Person centred approaches are at the heart of existing successful work with offenders and those at risk of offending (Nacro, 2009) but we could go even further with reinvested custodial budgets and start to think about resources, integration and entitlement.

The definition of personalisation I am using in the context of this paper is:

...a radically different approach to thinking about people and their relationship to public services. The new approach focuses on the person's capabilities, their real wealth; all that the person can use to ensure that their life goes well.

(Duffy, 2010)

Real wealth is made up of all the assets that an individual has and can use to improve their own lives and is described in Figure 4 (Murray, 2010).

If personalisation is established as a core element of a redesigned system then we have an opportunity to provide highly personalised early identification, intervention and support to families and individuals at risk. The involvement of people and families in co-designing the system is a critical success factor. We cannot make assumptions about 'what good looks like' on behalf of others, especially when individual and collective systems have contributed directly to the exclusion and disadvantage experienced by some of the most vulnerable people in our communities.



Figure 4. Real Wealth

A Gendered Approach

One important aspect of personalisation in practice is the ability to recognise that differences can be important. One of the most important differences between equal human beings is the difference of gender. WomenCentre has been working for 20 years with a radically gendered and personalised model of support.

WomenCentre also works with women where the ‘presenting issue’ may be offending; but the vast majority (over 90%) of women offenders that are referred to the centre by police, probation and the courts are also victims of domestic violence. Over 80% have mental health problems.

Many of the women we work with have much in common: childhood abuse, domestic violence, poverty and a paralysing sense of failure and despair. They feel they have no control over their own lives or the lives of their children. Some have lost their children into care, others have children who are going through the youth justice system. But despite that, they all still want things to be better for their kids.

(WomenCentre, 2010)

WomenCentre has complex funding arrangements which have evolved over time to enable them to respond to women with complex needs. Effectively what WomenCentre has created is an ‘integrated service fund’ which is drawn from many different funding streams. This enables the staff to work across health, social care and criminal justice boundaries with one woman.

Their approach has created an environment in which the Total Place aspiration to ‘break down the organisational and service silos which cause confusion to citizens, create wasteful burdens of data collection and management on the frontline and which contribute to poor alignment of services’ has been brought to life.

A woman needs to know that we will not pass her on to another agency or refuse to work with her because she doesn't fit into our service. We are with her for the long term and work holistically – we don't recognise barriers and silos.

(WomenCentre, 2010)

The work of WomenCentre and organisations which work in similar ways is highly effective. The reoffending rate of women with whom the centre works is under 3.2% in contrast to the national average of between 47% and 60%. This 'headline' reduction in reoffending rates also means that prison sentences are reduced, children are not being taken into care, mental health and substance mis-use services are properly engaged and families are stable and functioning. The socio-economic benefits to the local area of these outcomes are significant. And yet over two thirds of WomenCentre's income does not come from local commissioning but from charitable trusts and national government pilots and initiatives. The aggregate impact of WomenCentre's work is lost in the complexity of its funding arrangements.

WomenCentre's success makes sense when we consider the work of Mary Eaton who interviewed thirty-four female ex-prisoners who had managed to transform their lives. Eaton surmised that female offenders can only change their lives when they have access to the structural pre-conditions of social justice: housing, employment and access to health care. However, Eaton's work surmised that structural factors alone are insufficient. Instead, she argued, women offenders need to feel that they are people of worth who have something to contribute, and the key to recognition is reciprocal relationships, or mutuality (Eaton, 1993).

Reducing reoffending is a by product of our approach. It is not our primary aim. Giving women hope, treating them with respect, and oddly enough, expecting something back from them - all of this helps women redefine themselves. The power of giving women back control over their lives is immeasurable.

(WomenCentre, 2010)

The WomenCentre builds a consistent, trusted relationship with women and families who would otherwise be isolated and very unlikely to access local services appropriately. In this relationship, the WomenCentre's workers are multi-skilled and multi-tasking, inventive and innovative, flexible and forgiving.

This is mirrored by the organisation as a whole. The WomenCentre supports its workers by:

- integrating funding from multiple sources
- focusing energy and attention on those in greatest need
- organising and supporting a multi-skilled workforce
- providing robust and personalised support
- creating partnerships with professional groups

WomenCentre is also:

- an efficient service, with very positive outcomes
- a universal service for women and the family
- a community organisation, run by, employing and supporting local women
- an holistic and preventative service

and importantly

- it creates a safe, mutually supportive, positive community for local women to grow and get their lives back on track.

In 2010 WomenCentre, working with The Centre for Welfare Reform, interviewed 44 local women who were using WomenCentre services and analysed this data to determine the extent of the complexity of their needs (Duffy and Hyde, Forthcoming).

Table 1 sets out the percentage of women within this sample who had a significant level of each need.

Managing a serious health condition	67%
Finding a different place to live	29%
Living with childhood abuse	51%
Didn't finish their education	76%
Recent experience of domestic violence	76%
Fractured family (for those with young families)	66%
Children have experienced abuse	54%
Living with a severe level of mental illness	55%
Living with a severe or moderate level of mental illness	91%
History of drug or alcohol misuse	52%

Table 1. Share of Complex Need for Women working with WomenCentre

Figure 5 provides a diagrammatic representation of that complexity. Each woman is represented by one column and each kind of need by a particular colour.

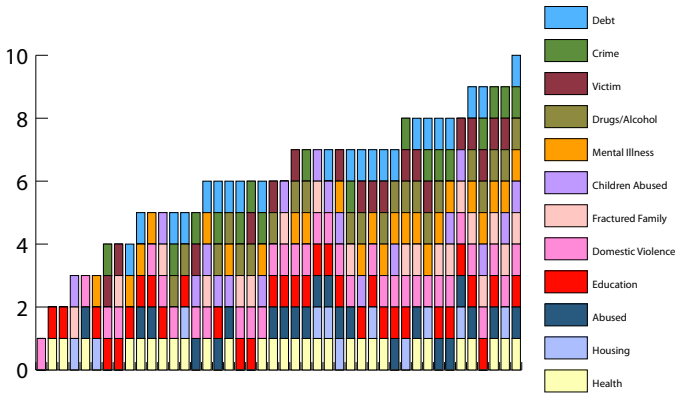


Figure 5. Pattern of Complex Need for Women working with WomenCentre

This figure shows dramatically that the women who WomenCentre work with can have many different, interlocking

needs and the pattern of this complexity is not consistent from woman to woman - each is different.

It is clear from this data that WomenCentre's work also plays a vital systemic role in the safeguarding of children and adults at an individual level, within the family, within the community and within wider society. If a woman's functioning is compromised by domestic violence, by mental illness or by her own psychological mal-adaption to childhood abuse then her ability to protect and nurture her children or others she has caring responsibilities for, may also be compromised. This compromised capacity to care for and protect has a negative impact upon generation after generation of the same family and upon the community in which these families live.

Study in Success

In this case study we can see the very different outcome of an intervention which was joined-up, personalised and flexible. This kind of approach could underpin a radically different approach to promoting social justice and keeping families away from crime.

Sarah was referred to WomenCentre by the women's refuge. Sarah and her older brother and sister lived with domestic violence as children. Their mother self-medicated and was regularly drunk when the children were very young. Sarah left home when she was 15 and lived in squats shoplifting to survive. Sarah was caught three times and eventually prosecuted. Her relationship with Matt her former partner began when she was 16. Sarah says:



“One of the hardest things for me was thinking that I had turned out just like my mum. She drank a lot after my dad left. I was four. My sister was eight and she remembers my dad better than me. He died three years ago. I saw him about six times since I was four. He only saw my kids once.

My sister says that my dad used to hit my mum but I don't remember that. When she was drinking she was either really quiet and just crying all the time or shouting and really mad.

I never knew what state she would be in when I got in from school.

We had social services round; my little brother was never in school. They talked to me and my sister but I don't know what happened afterwards. My brother is in Wakefield (prison) doing 2 years. He was always a handful and even though my dad had left when he was born, my mum says he's just like he was.

I left home when I was 15 and went to live with some mates in town but it was a hole. It was a squat really but we had to pay this bloke a fiver each to stay there. I didn't have any money. I'd stopped going to school and no one bothered. I went to see me mum a bit but she was in a state half the time.

I had to nick stuff to eat and I got good at nicking other stuff so that I could sell it and get some money. I was caught three times and ended up being charged.

I was with Matt by then and got pregnant straight away. I didn't think I would get sent down.

Matt wasn't happy that I was pregnant. I had to pretend that I wasn't if you know what I mean. I didn't talk to him about it and I still managed to get into my jeans so that I didn't look it, even when I was 7 months.

When Ellie was born he turned really nasty and he left us a couple of times. He did hit me and kick me. I didn't know what I'd done. I thought it was because Ellie cried a lot. I went round to see my mum and she said to get out of there. But I didn't want to. I thought Ellie should have a dad and I would make it work.

I got pregnant with Sam when Ellie was only six months. I didn't even tell Matt till I was six months gone.

I was scared to death. He went ballistic and threw me out. I went to my Mum's but she wasn't happy about it.

I asked him if I could come back and he let me after about two weeks.

Things got really bad after Sam was born. My mates told me to get out but I couldn't. Matt was mad. I didn't know what to expect. He told me that he would kill me and the kids if I left but he didn't want us there half the time.

I was still nicking stuff but not as often. I used to go into town with the buggy just for somewhere to go. It was easy to get the kids bits of clothes. I never really thought about what would happen if I was caught. I felt really trapped and he treated me like a piece of dirt. He didn't want me or the kids but he said he would kill me if I left.”



Eventually Matt left the family and didn't return for 4 months and this was a turning point for Sarah.



“It was the first time I had been on my own ever. I thought about just going and hiding somewhere but where do you go with 2 kids and no money? In the end my mum phoned the refuge and they found me a place. They took me over to the women’s centre the next day. I had never heard of it. I got a worker called Rachel who was only a bit older than me. I thought she was a social worker at first. I hadn’t got a clue what I could do about getting me and the kids some money and somewhere to live. I hadn’t told anyone about what Matt was like with the kids but I told Rachel.

Just saying it to someone else did something to me. I knew that I had let my kids down. Matt had bit Sam and burned Ellie once with a cigarette. I was too scared of what he would do to me if I said anything so I didn’t say a word. I just tried not to let them get on his nerves.

Rachel didn’t seem shocked. She listened to me and we made a list of what needed to happen first and she did lots of phoning people while I was with her and she got me a house to go and see that day. I was gob-smacked. I would have lived anywhere.

It has taken me 2 years to feel safe and relaxed even though after the first few months Matt just gave up. He said he would go for custody but he must have got some advice and he never went for it. He sent loads of texts and the police recorded them.

Rachel was with me every week –every few days in the beginning. She has done what I wished my mum would have done. She knew when I needed her to do things with me but she was a cow sometimes too. She made me think about me. She has made me believe in myself. I made loads of friends at the Centre and we do things together with the kids. I don’t go that much now. Just now and then when I’m passing. I took in a load of stuff for the crèche not that long ago. It feels like a lifetime ago. I’m a different person. I want to go to college and eventually work with teenagers who have got problems. Like a youth worker. I want the kids to be proud of me.”



Conclusion

We tend to keep social justice and criminal justice separate, as if there were a group of people who deserve pity and so get charity and another group who deserve anger and so get punishment. We ignore, at our peril, the social injustices that drive crime, illness and community breakdown.

In his recent book *Injustice: Why Social Inequality Persists* Danny Dorling states:

The five tenets of injustice are that: elitism is efficient, exclusion is necessary, prejudice is natural, greed is good and despair is inevitable.

(Dorling, 2010)

We see these tenets of injustice brought to reality in the lives of the 44 women who are working with WomenCentre and who generously shared their stories with us. We see these tenets as a reality in the life of the South Yorkshire family, and in the lives of the countless children and young people who go from local authority care straight into other state institutions.

Our criminal justice system is the ultimate manifestation of an unjust and unequal society. It processes and punishes the poor and the powerless in their hundreds of thousands but does so in ways which, on the surface, appear 'tough on crime' and appeal to those who feel increasingly unsafe.

However prison provides expensive and inefficient respite and containment but fails to rehabilitate offenders or to tackle the underlying causes of crime.

- The communities which are most affected by crime are the communities which will see high numbers of their residents going into and returning from prison and yet

they have little or no involvement in how offenders and those at risk are dealt with by the criminal justice system. The significant resources tied up in custodial sentences should be reinvested in locally accountable systems which target those individuals, families and communities most at risk.

- Tackling inequality at an individual, family and community level through the processes of: Justice Reinvestment, Total Place Commissioning and Personalisation offers us the opportunity to advance evidence-based, cost saving, life saving, criminal and social justice reform.
- An initial focus on women and children will begin to break the cycle of recidivism and disadvantage, drastically reduce and divert prison expenditure and make communities safer, stronger and healthier.
- Focusing in the future on adult male offenders and those at risk of offending will undoubtedly be more challenging but the majority of men who end up serving custodial sentences have typically experienced the same personal, social and economic problems as many women offenders; from the trauma of childhood abuse and domestic violence and on through their own distinct pathways into offending.

Social justice and criminal justice are not the same thing. But achieving social justice may well be furthered by reforming the criminal justice system and focusing policy and resources upon addressing inequality, poverty and vulnerability rather than upon crime and punishment.

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The Foundation for Families



In July 2010 Clare Hyde established The Foundation for Families, a Community Interest Company which aims to create a stronger and more just society by working directly with and amplifying the voices of underrepresented families and communities.

The Foundation for Families is a membership organisation and will build a diverse, non partisan membership which will include families and communities, health and social care organisations and professionals, criminal justice reformers, offenders, former offenders, the legal profession, mental health organisations and advocates, victims of crime and their advocates, child welfare professionals, various faith communities, business owners, and interested individuals who share the Foundation for Families values and aims.

Focusing on those families and communities with the highest levels of unmet and complex need, The Foundation for Families work programmes include:

- Local Justice: Justice Reinvestment, Personalisation and Total Place Commissioning.
- Work with women and women's organisations recognising that women are at the heart of families and communities (the Big Society!) and principal agents for change and action.
- New and integrated approaches to safeguarding which build on existing multi-agency partnerships and arrangements.
- Mental health and wellbeing: exploring innovative and highly personalised approaches which recognise that for many people, mental illness does not have a clinical cause.
- Redefining professionalism: learning from and sharing successful approaches which build trusted relationships with individuals and families.

Contributors

Author

Clare Hyde MBE

Clare was the CEO of WomenCentre from 1994 until 2009 and, along with her colleagues, has developed and delivered exciting and innovative responses which tackle some of society's most challenging and entrenched issues including; domestic violence, poverty, mental illness and social injustice.

The work of WomenCentre has received national and international recognition and acclaim and WomenCentre's work with women who offend or who are at risk of offending has achieved spectacular results. Clare was awarded the MBE in 2005 in recognition of her 'contribution to women and children's health and social care'.

From her strongly independent position as the CEO of WomenCentre, Clare has been able to contribute to the development of gendered health, social care and criminal justice policy and practice. As a result, Clare has developed a narrative which underpins much of her work and which she describes as a 'grown up feminism'. This is based on the belief that although women and men are inherently of equal worth, society privileges men as a group. Women may be powerful and influential within their families, as primary or sole carers and at the heart of their communities as informal supports, volunteers and activists but outside of those roles, they do not have political, social and economic equality with men.

During 2006 and 2007 Clare was a member of Baroness Jean Corston's review team which was commissioned to report to Government following the deaths of 12 women in Styal Prison and she helped to develop the blueprint for community based provision for women offenders.

Clare has spent the last five years working across the region of Yorkshire and the Humber on major social care and mental health transformation programmes. Of particular note is the Personalisation in Mental Health Programme which aims to integrate health and social care funding and develop one resource allocation system.

Editors

Dr Simon Duffy

Simon is the Director and Founder of The Centre for Welfare Reform. He has been a leading social innovator and developed many of the key innovations of personalisation including: individual budgets, self-directed support, resource allocation systems etc. He won the RSA's 2008 Albert Medal for his work on personalisation.

Professor Jon Glasby

Jon is Director of the University of Birmingham's Health Services Management Centre. Specialising in joint work between health and social care, Jon is involved in regular policy analysis and advice. He is the author of a series of leading textbooks on health and social services, and also sits on the editorial boards of the International Journal of Integrated Care and the Journal of Integrated Care.

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Catherine is a Senior Lecturer in the School of Politics and International Relations at Queen Mary, University of London and was a recent visiting fellow at the Health Services Management Centre at the University of Birmingham. She is the author of *The Reform of Public Services under New Labour: Narratives of Consumerism* (Palgrave, 2007) and *Citizen-Consumers: New Labour's Marketplace Democracy* (Catalyst, 2003). She is currently writing *Personalising Public Services: Understanding the Personalisation Narrative*, which will be published by the Policy Press in 2011. Catherine is an associate of the Centre for Public Service Partnerships.

Publishing information

The Centre for Welfare Reform

The Centre for Welfare Reform was established in 2009 to develop and help redesign the welfare state in order to promote citizenship, support families, strengthen communities and increase social justice. The Centre's fellowship includes a wide-range of social innovators and local leaders.

www.centreforwelfarereform.org

Health Service Management Centre, Birmingham University

The Health Services Management Centre (HSMC) at the University of Birmingham is the leading UK centre providing a combination of research, teaching, professional development and consultancy to health and social care agencies. Over nearly forty years, it has established a unique reputation as a 'critical friend' of the healthcare community.

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