

Commission on Sex in Prison

Healthy sexual development of children in prison

Briefing paper 4



Key points

- The majority of children in custody are adolescent boys aged 15 to 17. They are likely to have reached physical sexual maturity and may be sexually active. They have not yet reached cognitive, emotional and social maturity
- Children in custody are vulnerable and most will have experienced disadvantage. Some will have been sexually abused prior to custody
- Prison severely restricts children's opportunities to form normal healthy relationships and can damage or delay the maturation process
- LGBT children are more isolated in prison and more vulnerable to bullying or abuse by other children or by staff
- Sexual abuse by other children or by staff does happen in prison
- Children in prison should have access to sexual health services
- The high levels of violence in prison might be a risk factor for the development of sexual aggression among boys
- The needs of vulnerable children with complex needs cannot be met in large prisons with low staff to child ratios.

1. Introduction

The Howard League for Penal Reform has established an independent Commission on Sex in Prison. The Commission comprises eminent academics, former prison governors and health experts and is focusing on three broad themes:

- consensual sex in prisons
- coercive sex in prisons
- healthy sexual development among young people in prison.

This is the first ever review of sex inside prisons in England and Wales. There is currently little reliable evidence available on both consensual and coercive sexual activity in prisons. The Commission aims to understand the nature and the scale of the issues and problems surrounding sex in prison. It will make a series of recommendations with a view to making prisons safer. It will also examine how the situation in England and Wales differs from other countries, looking for best practice.

This is the fourth in a series of briefing papers for the Commission. It looks at healthy sexual development among young people in prison.

The Commission has received written and oral evidence from voluntary and statutory agencies, prison governors, prisoners and former prisoners. It has held a series of seminars and heard evidence from Her Majesty's Inspector of Prisons (HMIP), the Prisons and Probation Ombudsman (PPO), prison governors, child psychologists and academics. This briefing paper is based on the written and oral evidence submitted to the Commission. Research findings based on interviews with former prisoners will be published in 2015.

2. Children in prison

There are over 1,000 children in custody in England and Wales (Youth Justice Board (YJB), 2014a). The majority (83 per cent) are aged 16 or 17 and 95 per cent are boys. Three quarters of the children in custody are held in prisons. More than 2,600 children were received into prison during 2013 (Ministry of Justice (MoJ), 2014).

A fifth of the children in custody are on remand and over half have been sentenced to Detention and Training Orders (DTOs). A fifth are serving long term sentences (YJB, 2014a). The average time spent in custody in 2011–2012 was 85 days (YJB and MoJ, 2014).

The majority of children in custody have experienced multiple disadvantages

- A third have been in local authority care
- One in five have emotional or mental health problems
- One in three girls and one in twenty boys have suffered sexual abuse (Lader et al. 2000)
- Over a third have experienced abuse or neglect or been on the child protection register (Jacobson et al., 2010)
- 28 per cent have witnessed domestic violence (ibid.)
- 12 per cent have experienced a bereavement of a parent or sibling (ibid.)

Children in custody are more likely to suffer from poor physical and mental health. Over a quarter of the boys and a third of girls in custody have a long-standing physical complaint including blood-borne viruses, sexually transmitted infections, respiratory problems, skin complaints and dental health problems (Ryan and Tunnard, 2012).

Many of the children in prison have experienced trauma and multiple adverse events including bereavement, abuse or neglect. These can impact on their healthy sexual development and healthy relationships in adulthood. The Adverse Childhood Experiences (ACE) study (Felitti et al., 1998) found that adults who had experienced multiple adverse childhood experiences were more likely to have had 50 or more sexual partners in their lifetime and to have contracted a sexually transmitted infection. Multiple adverse childhood experiences are also a risk factor for violence including sexual violence (Duke et al., 2010).

3. Children's healthy sexual development

In their teenage years, children are in a process of transition from childhood to adulthood. The Department of Health (DoH) (2013) stated:

Most people become sexually active and start forming relationships between the ages of 16 and 24. Young people in these age groups have significantly higher rates of poor sexual health, including STIs and abortions, than older people.

The national survey of sexual attitudes and lifestyle (NATSAL3) found that the median age of first heterosexual intercourse for boys and girls

was 16 years old (Mercer et al., 2013). Children reach physical sexual maturity in their teenage years with the majority of girls reaching physical maturity by the age of 15–17 and boys at 16–17 years. However, emotional and social maturity may not be reached until some years later.

As children approach adulthood, they are exploring their relationships with others, developing intimate relationships and learning about issues such as equality, respect, sexuality, gender identity and sexual consent.

Children in prison will be going through this process of transition while in custody, with little or no contact with their families and no physical contact with teenagers of the same or opposite sex. Their opportunities to form relationships and model the behaviour of adults in normal healthy relationships are severely restricted.

4. The prison environment

Prisons are large institutions often holding around 200 boys. The largest, Wetherby in Yorkshire, holds 288 boys. The proposed new prison for children in Glen Parva plans to hold 320 boys. Prisons are run by staff in uniform to a strict regime where security is the paramount concern. They are not small familial homes or communities. The staff to child ratio in prisons is low and children spend a lot of time locked in their cell during the day (the Howard League, 2012).

There has been little research on the impact of prison on children's healthy sexual development. The British Medical Association (2014) published a report on the health and human rights of children in custody and found

It is manifestly clear ... that children and young people seldom thrive in the secure estate.

Prison can delay or damage the normal maturation process. Research by Steinberg et al. (2004) found that custody was likely to hinder processes of normative psychosocial development by disrupting children's relationships with parents, teachers, and other sources of adult support and guidance. While away from home, detained children had virtually no opportunity to build prosocial peer or romantic relationships because social interactions were under close scrutiny, and the only peers in

residence were other young people who had offended. Patterson, Capaldi and Bank (1991) found that with limited opportunity for positive peer socialisation or romance, incarcerated adolescents were effectively precluded from one of the most important contributors to social development during the adolescent period. This had long-term implications in adulthood. Prisons in England and Wales are single sex environments and boys have no opportunities to socialise with girls, or form intimate relationships with girls or boys whilst in custody.

Lambie and Randall (2013) looked at the effects of incarceration on adolescents and found

In structured confined settings, few opportunities exist for youth to learn new ways of forming and maintaining appropriate social and sexual relations.

A report by the Review Panel on Prison Rape (2010) published by the US Department of Justice noted

Young people in custody are usually in the midst of significant psycho-sexual development while they are in an environment that does not permit any form of sexual expression.

Research published by the National PREA Resource Center (2014) recognised that

Custody places limits on adolescent development such as inhibiting opportunities to assert independence and take risks, and limits questioning and experimentation.

The review panel on prison rape called for more research to address the issue of how a young person in custody dealt with their sexuality in a healthy way.

There has been little research on how the prison environment might increase a child's risk of becoming a perpetrator of sexual violence in adulthood. A study by Curran et al. (1995) looked at the reconviction rates of children in Northern Ireland and found there was a high level of adult reconviction among those who had been in conflict with the law as children. The most striking difference between those who had been held in secure custody compared to open conditions

was the increase in the proportion convicted of violent and sexual offences as adults. This was significantly greater than the proportion in the sample who had engaged in violent or sexual offences as children.

Hunter (2004) found exposure to violence and male modelled anti-social behaviour was a risk factor for the development of sexual and non-sexual aggression for boys in prison. Prisons are violent places. HMIP and YJB (2013) found that a third of the boys in prison felt unsafe at some point and a fifth had been victimised while in prison. The most common form of victimisation was being hit, kicked or assaulted. At Feltham prison, HMIP (2014a) found there were on average two fights or assaults each day, including pre-meditated group attacks on individual boys. An HMIP (2014b) inspection of Cookham Wood prison found high levels of violence and fights, attacks on individuals and a high use of force by prison staff, including the infliction of pain to gain compliance.

Evidence given to the Review Panel on Prison Rape (2010) by the Director of Missouri division of Youth Services stated there was a correlation between the way young people were treated in custody and sexual victimisation.

It should be no surprise that if the way we control the kids is through coercion that we will... have a growth of other coercive behavior such as sexual victimization.

Other concerns have been raised about the use of physical restraint on children in prison. An inquiry conducted by Lord Carlile QC (the Howard League, 2006) found

Many children in custody have experienced past sexual abuse, often by adults ostensibly in positions of authority. All sexual contact in penal institutions was prohibited, yet they are adolescents who are developing sexually. It was suggested that the young people would seek physical restraint by staff to gratify their sexual needs and that the restraint compounded their abusive experience. It was suggested to the inquiry that some children were so damaged that abuse was something they could not do without. It is possible that the only way they had ever experienced physical contact was by force from an adult, and then this experience was

then replicated in the institution... Certainly the relationship between the use of restraint and sexual development needs serious research.

The desire to engage in physical contact may not be confined to children. The inquiry received one submission alleging that some staff would "bait" children into situations that would result in restraint for their own gratification... Taking into consideration the revelations concerning some care homes and child abuse over the past few years it would be surprising if some staff were not working in the closed environment of custodial centres holding children for dubious reasons.

Smallridge and Williamson (2008) conducted an independent review of restraint in custody and found

staff were able to describe worrying instances of children who actively sought restraint for sexual or other gratification and found these situations very difficult to deal with.

Further research is needed to determine the long-term effects of locking adolescent boys up in institutions where violence is commonplace, sex is forbidden and where staff respond to violence with the use of force.

Prison staff receive limited National Offender Management Service (NOMS) training on working with young people in custody. However, the power imbalance in the relationship between prison staff and children and the focus on security might make it difficult for a child to feel comfortable confiding to prison staff about sexual matters. Young people in prison are going through the critical stages of adolescent development yet often have little or no family contact and no-one close to talk to about personal problems. A child psychologist told the Commission

It is unlikely that a boy concerned about a lump on his testicle will want to talk to his personal [prison] officer about this.

The Commission heard it was difficult for children in custody to develop a healthy sexual identity. Children could be confused about their sexual identity in a single sex environment. Normal adolescent sexual experimentation was frowned upon in prison. The Commission

heard boys had been disciplined for masturbating by prison staff, when they thought they were masturbating in the privacy of their own cell. The Commission heard that boys learnt to keep their sexual behaviour secret in prison. Punishment for normal sexual behaviours could evoke feelings of guilt or shame for boys in prison and could increase the risk of sexual offending.

The Commission heard evidence that homophobia was common in male prisons and very few boys identified as non-heterosexual. The Terrence Higgins Trust said that it was very difficult for a boy to be openly gay in a prison environment. In a survey conducted by HMIP and YJB (2013), 1 per cent of boys reported being victimised by other prisoners because of their sexual orientation. Of boys surveyed at Feltham and Hindley, 1 per cent reported having been victimised by staff. The Commission heard transgender identities were rarely explored in Young Offender Institutions.

An HMIP (2013a) report on the Keppel Unit in Wetherby prison, which holds around 40 boys with complex needs, states:

Members of the equality team told us that the only young people on the [Wetherby prison] site to declare themselves gay or bisexual were on the unit. The culture on the unit was generally tolerant of all sexual orientations.

Data from the Bureau of Justice Statistics (BJS) (2013) in the US has shown that children who identify as non-heterosexual are more likely to be sexually victimised in prison and seven times more likely than a heterosexual prisoner to be victimised by another child. HMIP (2013b) found that 4 out of 38 of the boys surveyed at the Keppel Unit in Wetherby prison had been victimised by other children because of their sexual orientation.

Prisons must consider how they identify, support and respond to the needs of vulnerable children in custody, including those at greater risk of abuse as a result of their sexual orientation.

5. In the best interests of children?

People learn about relationships from their parents and carers or from their own experiences (Relate, 2014). Many of the children in prison will have experienced overly harsh or inconsistent parenting or neglect. A child psychologist told the

Commission that some young people in custody had had no positive care-giver experiences or role models during childhood. Some boys in prison will have been involved in gangs (HMIP, 2010) and some may have sexually exploited girls (Beckett et al., 2013).

Many of the children in prison will have experienced physical or sexual abuse in childhood. Lader et al. (2000) found that one in four boys in custody reported suffering physical violence at home and one in twenty boys had suffered sexual abuse. The figures for girls were two in five and one in three respectively.

The Commission heard evidence that prisons were generally not therapeutic institutions and some prison officers were unsure how to meet the complex needs of children who had been abused. The criminal justice system tended to focus on children as offenders rather than victims.

Since April 2014 NHS England has been responsible for commissioning healthcare provision in prisons, secure training centres and secure children's homes. The Royal College of Paediatrics and Child Health (2013) published intercollegiate healthcare standards for children and young people in secure settings. The standards state:

Young people in secure settings have access to primary care provision which is equivalent to the services available to young people in the community.

Healthcare staff can address the physical sexual health needs of children in prison, for example by offering screening and treatment for sexually transmitted infections. Standards from the Department of Health (2012) state that all people in prison should have access to a social and life skills module on sex and relationship education (SRE). The Commission heard that sexual health workers from the Terrence Higgins Trust and Brook had worked with prison staff to deliver SRE to boys in Feltham and Hindley prisons.

However, it is hard to support and encourage healthy sexual development within the confines of a prison environment. Prisons cannot deliver the familial environment that many of the children have missed out on because they

are large institutions with low staff to child ratios. Children's opportunities to practice prosocial behaviour and interpersonal skills are severely restricted and children can be punished for normal sexual behaviour or for developing relationships with other prisoners. Boys spend time in the hyper-masculine prison environment learning about sex from their peers who may not be the best role models for developing healthy relationships in adulthood.

Around 5 per cent of children in custody have been convicted of sexual offences (YJB, 2014c). Many of these children will also have been victims of sexual abuse. NHS England has commissioned services for children convicted of sexual offences and these will be extended to children who have exhibited harmful sexual behaviour (HSB). At Cookham Wood prison, 'an innovative enhanced sexual behaviour service had recently been established which was working closely with case workers to identify and support victims and perpetrators of sexually harmful behaviour' (HMIP, 2014b). However the Deputy Children's Commissioner for England was critical of the lack of sexual offending education for boys in custody (Hansard, 2014).

The Commission heard that children undergoing programmes in prison for sexual offences were encouraged to develop intimacy and relationship skills as part of their treatment. Yet when these children returned to the prison wing, intimacy and relationship skills were not supported by the prison regime.

Prison staff sometimes over interpreted the risk or misinterpreted offence paralleling behaviour for children convicted of sexual offences. Children found in possession of magazines such as *Zoo* or *Nuts* were seen as a risk when they were exploring normal sexual behaviour. There was a tendency for staff to see the child's behaviour as part of the problem rather than as a symptom of the prison environment. For example boys might masturbate more frequently in prison in order to cope with boredom or depression but this was often regarded as a risk.

Hackett (2014) stated that children and young people with harmful sexual behaviours should be supported wherever possible in their

families and local communities or in specialist foster care. There are other secure settings, such as secure children's homes, which can deliver therapeutic programmes for children who have been abused or have exhibited sexually harmful behaviours and pose a risk of harm to others.

Further research is needed to ascertain the effects of the prison environment on the development of healthy sexual relationships.

6. Coercive sex in prison

There has been little research on sexual violence in prisons in England and Wales (Commission on Sex in Prison, 2014). Neither NOMS nor the YJB were able to supply information on the number of official complaints of sexual abuse in custody or the number of investigations, criminal charges or convictions following a complaint (*Children and Young People Now*, 2014). The issue of sexual assaults in prisons, including institutions for children, has received much more attention in the US and annual data is published on the scale of sexual abuse. The BJS found that 9.5 per cent of children in US custody reported one or more incidents of sexual victimisation in prison during the past year. Of these, 2.5 per cent reported being victimised by another child and 7.7 per cent reported being victimised by a member of staff.

Evidence from the BJS in the US found children held in facilities holding at least 101 prisoners were nearly five times as likely to report victimisation as those in facilities holding fewer than 10 children. All prisons for boys in England hold at least 130 children. The proposed secure college will hold over 300 children. HMIP and YJB (2013) found 3 per cent of boys in Hindley and 3 per cent in Wetherby reported being sexually abused by other young people in prison. Hindley and Wetherby are the two largest prisons for children in England, holding 248 and 288 boys respectively.

Children may be unlikely to tell staff if they are being sexually abused. The HMIP and YJB (2013) annual survey of young people in prison found only a third would tell staff if they were being victimised by other children or by staff.

The *Guardian* (2014) and the BBC (2014) reported on historical abuse of over 900 boys by prison staff at Medomsley detention centre in the 1970s and 1980s. In 2010 a prison officer was jailed for sexually abusing a vulnerable 17-year-old boy in Warren Hill prison (East Anglian Daily Times, 2010). The Commission received evidence of alleged abuse by prison staff in the 1960s and the 1990s. The victims had never reported the abuse to anyone.

At the time of writing more than 900 adult men have come forward to report to the police that they were sexually abused or victims of systematic violence by staff inside Medomsley. The pattern appears to be that evidence of sexual abuse of children in custody does not emerge until many years later as children do not report it at the time.

It would be complacent to assume that sexual abuse of children by prison staff no longer happens in England and Wales. The report published by the Review Panel on Prison Rape (2010) looked at common themes in terms of sexual victimisation in US prisons for children and found institutional culture played an important part in creating a safe environment. Sexual victimisation was more common in prisons which emphasised punishment rather than therapy and rehabilitation. It found there was a need to train all staff on the perils of crossing professional boundaries. The panel emphasised the importance of acknowledging and preventing abuse.

Sexual victimization in institutions cannot be effectively dealt with in isolation or as a singular issue. At the core, all forms of institutional abuse create a lack of safety for young people, staff, and eventually for the public because young people get released without having the root causes addressed.

The safety of children must be the primary consideration. Placing children in large prisons, closed institutions with low staff to child ratios and high levels of violence, increases the risk of sexual exploitation and abuse. Placing children in double cells is likely to further increase the risk of assault.

7. Resettlement

The vast majority of children in prison are serving short sentences and will be released into the community. Whilst inside they may have

undergone physical and emotional changes associated with adolescence or missed out on some of the first experiences which are a normal part of the maturation process.

Lambie (2013) found

The transition from incarceration back to the community is particularly complex and difficult for youth as this transition often happens concurrently with the transition from adolescence to adulthood, putting such youth at increased risk for a number of negative outcomes including recidivism.

The Howard League project U R Boss worked with children in the criminal justice system and supported them on release (Howard League, 2011). Boys in custody talked about wanting to catch up with their peers on release, which might include drinking alcohol and having sex, adolescent experiences which they felt they had missed out on while in prison. Other boys felt that having a relationship and a home after release would demonstrate to others they had matured and put their life on the right track.

There is evidence that some boys in prison had high or unrealistic expectations about relationships following custody. The survey by HMIP and YJB (2013) found that 30 per cent of boys thought having a partner would stop them offending and 18 per cent of boys thought having children would stop them offending. Lanctôt et al. (2007) found that the imprisonment of adolescents was associated with a number of negative outcomes including premature transitions into cohabitation and parenthood.

The Commission heard that children in prison were often fearful about sex and relationships after release, particularly if they had been abused. Some young people, who had entered custody at a young age and were serving a long term sentence, had had no sexual experiences. This caused anxieties for young people approaching release. One young man who had spent his entire adolescence in custody worried about how future partners would respond to his complete lack of romantic and sexual experience at the age of 22.

Children convicted of a sexual offence were subject to risk management procedures after release, including supervision under multi-agency public protection arrangements (MAPPA). They were anxious about the implications of being placed on the sex offenders register. A child psychologist told the Commission that some children were told early on that if they ever wanted to have children, social services would be involved. Children who had not yet had a relationship were fearful about the disclosure of their offence to any future partners. The Commission heard that if too many restrictions were placed on a child following release it could make it more difficult for them to reintegrate, and increase their risk of committing sexual offences.

Resettlement plans must include sex and relationship education and cover issues such as relationships after prison, contraception, safe sex, domestic violence and parenting skills. Special care must be taken to ensure that children who have spent the majority of their adolescent years in prison are fully supported on their return to the community.

Conclusions

Adolescence is an important time when children learn about healthy sexual relationships and forge patterns of behaviour for adulthood. Incarcerating children at this formative time of their lives is counter-productive and may be compounding problematic behaviour and increasing their risk of sexual offending. Prison limits normal adolescent development and experimentation and can delay or damage the normal maturation process. Punishing boys for normal sexual behaviours encourages them to keep sex secret, or feel ashamed or guilty

about it. The single sex prison environment, with its high levels of male violence and high use of force by adults to control children, might be a risk factor for the development of sexual aggression in adulthood.

The needs of vulnerable children with complex needs cannot be met in large prisons with low staff to child ratios. Prisons may compound abusive patterns as evidence from the BJS in the US has shown that placing children in prisons holding 100 or more children puts them at risk of sexual abuse from other children and from staff. It is complacent to assume that staff cannot sexually abuse children in prisons in England and Wales.

On the rare occasions when a child needs to be incarcerated they should only be held in small units with highly trained and well managed staff, where education, therapeutic and behavioural provision can be tailored to the individual needs of each child.

A full list of references is available on the Howard League website at <http://www.howardleague.org/publications-prisons/>.

Cover image: Prisonimage.org

About the Howard League for Penal Reform

The Howard League is a national charity working for less crime, safer communities and fewer people in prison.

We campaign, research and take legal action on a wide range of issues. We work with parliament, the media, criminal justice professionals, students and members of the public, influencing debate and forcing through meaningful change.

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