

**DRUG USE, CRIME AND SOCIAL EXCLUSION
AMONG PRISONERS IN ENGLAND, ITALY & SPAIN
– BEFORE, DURING AND AFTER IMPRISONMENT**

RETURN PROJECT

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EXECUTIVE SUMMARY

DRUG USE, CRIME AND SOCIAL EXCLUSION AMONG PRISONERS IN ENGLAND, ITALY AND SPAIN – BEFORE, DURING AND AFTER IMPRISONMENT

The RETURN study assessed trends in the behaviour and experience of prisoners before, during and after imprisonment, in 2001/02 in three areas of Europe: North-West England, Milan (Italy) and Barcelona (Spain). The focus of the study was the relationship between drug use, criminal behaviour and social exclusion among people sent to prison, based on structured and unstructured responses about their recent experiences in custody, as well as before and after custody. Interviews were conducted in 2001 with 68 inmates soon to be released from prison, 34 (50%) of whom were followed up in the initial months after release, and 28 (41%) of whom were followed up in the later months after release (into 2002). Sample attrition was greatest in Italy (29% - from 14 to 4), followed by England (37% - from 30 to 11) and Spain (54% - from 24 to 13).

The **typical respondent** was a single White male in his 20s or 30s – though a substantial minority were married or cohabiting, and around half were parents (averaging two children each). Most respondents described themselves as working-class, and their typical occupation/trade was manual unskilled or manual semi-skilled work. Mental disorders were reported by about one in seven, and the vast majority of respondents in Italy and Spain also reported long-term physical illnesses or disabilities.

Criminal careers typically began about 13 years earlier around the age of 18-22 years, with burglary being the most commonly reported crime – overall, for first crime, and for most recent conviction. The next most common crimes, overall and for most recent conviction, were violent and motoring offences in England, and drug offences in Italy. Other offences were typically acquisitive in each country (e.g. theft).

Over nine in ten respondents had used illicit drugs in each country. **Drug careers** typically began in the mid-teens with use of cannabis (15-17 years) and amphetamines (around 16 –18 years). More than half of respondents then progressed to more problematic drugs within two or three years, notably heroin (18-21 years) and cocaine/crack (20-23 years). Nearly all respondents had tried illicit drugs, notably cannabis (nine in ten), with most also having used cocaine powder, ecstasy, amphetamines, LSD, heroin, tranquillisers, and crack. Nine in ten Italians and Spaniards had also injected drugs, compared with four in ten in England.

There were several notable trends in **social experience and exclusion** over the four study stages. Italian respondents reported significantly reduced access to three types of technology as a result of imprisonment – cars, computers and telephones – while Spanish respondents reported reduced access to computers and English respondents reported reduced access to cars. Most respondents reported living in a flat or house, though Spanish and Italian respondents were more likely to report living in an institution, particularly after release. Homelessness was generally lower than 5%, though up to half of respondents reported accommodation problems after release from prison. The average number of co-residents both before and after imprisonment was around three or four in Italy and Spain, and about two in England. English respondents were more likely to switch from living with a partner before imprisonment to living with parents after release; while Spanish respondents were more likely to switch the other way; and Italian respondents were more likely to switch from living

with either parents or partner to living in an institution. Both Italian and English respondents were also less likely to live with children after release.

Compared with the three months before imprisonment, the post-release employment rate halved to two in ten in England, while plunging from over half to zero in Italy. By contrast, the employment rate in Spain doubled to six in ten after release. Correspondingly, unemployment rose slightly in England and substantially in Italy (to around 75% in each case), whilst halving to less than 25% in Spain. Over half of English and Spanish respondents reported getting help to obtain employment either before and/or after release, though few Italian reported getting such help. Up to a third of respondents applied for an average of one or two jobs after release, with consequent interviews being the norm in Spain and Italy but more exceptional in England. Average weekly income dropped substantially between the period prior to imprisonment and the period after release, in all three countries. The main legal sources of income were state benefits in England, wages in Spain, and wages (before prison) and 'other sources' (after release) in Italy. The proportion of respondents reporting crime and drug dealing as significant income sources remained fairly level in Spain and Italy (about four in ten), while dropping among English respondents after release (from around half to two in ten). Up to half of respondents also reported significant debts.

Over nine in ten respondents generally reported **drug use** at each stage – the exception being Italian respondents whose overall drug use dropped to just over half in prison (Stage 1) and in the initial months after release (Stage 2). Around three-quarters of respondents reported daily drug use before imprisonment, dropping to zero in prison, then rising just after release to about three or four in ten. By the final stage, the rate of daily drug use had risen to over half among English respondents, while dropping to around a quarter among Italian and Spanish respondents. Cannabis was the most popular drug overall, being used daily by about a third of English respondents and a quarter of Italian respondents. Ecstasy use was highest among English respondents, while LSD (Stage 1) and amphetamine use (Stages 2 and 3) was highest among Spanish respondents. Heroin use was reported by four in ten English and Spanish respondents and by over two-thirds of Italian respondents before imprisonment. However, for Italian and Spanish respondents heroin use dropped to zero in prison, and remained at zero after release – while English respondents' heroin use rose to about half in prison, dropping back to pre-prison levels after release. But daily heroin use, which involved about three in ten English respondents before and after imprisonment, dropped to zero in prison. Rates of cocaine and crack use exhibited more erratic patterns, though were highest in Spain (up to nine in ten), and dropped to their lowest levels in prison in each country. Methadone use was reported mainly before and after prison by about one in five English respondents, while Spanish respondents mainly reported using methadone in prison (two-thirds). Italian respondents exhibited more level rates of methadone use – about three in ten. Tranquilliser use, reported by a third to two-thirds of respondents, was mainly exhibited by Italian respondents before prison, Spanish respondents in prison, and English respondents at both these stages.

Prison generally reduced the rate of injecting drug users (IDUs). **Injecting** was highest among Spanish respondents - eight in ten before prison and in prison, dropping to four in ten after release - and lowest among English respondents – a quarter before prison, zero in prison, and about one in ten after release (with Italian respondents occupying an intermediate position). Average duration of injecting ranged from two years for Spanish IDUs, through 5 years for English IDUs, to 14 years for Italian IDUs. Sharing of needles/syringes was reported by only one English IDU (after release) and one Italian IDU (in prison). By contrast, all Spanish IDUs reported sharing needles/syringes in prison, though just one did so after release. Furthermore, sharing of injecting paraphernalia was reported by over half of IDUs overall.

The vast majority of respondents drank **alcohol** outside of prison, with daily use being reported by more Italian drinkers (up to half) compared with English drinkers (a quarter) and Spanish drinkers (near zero). However, alcohol use was reported by fewer than one in seven Italian and Spanish respondents in prison, while two-thirds of English respondents reported alcohol use in prison – almost invariably occasional use of ‘hooch’. Regarding average amounts consumed, the general trend was for drinking to exceed the recommended limits for safer drinking before prison, but to drop to within these limits after release. Self-reported drinking type was similar in each country, with one in five respondents classifying themselves as heavy drinkers. The majority of respondents believed that their alcohol consumption after release was either the same or lighter than it was before imprisonment.

Around two-thirds of respondents reported **drug problems** prior to imprisonment, though this dropped to one in five in prison and remained low after release. Up to eight in ten Italian and Spanish respondents reported receiving help for drug problems both before prison and in prison, though the level of help dropped to around half after release. By contrast, only a third of English respondents reported getting help for drug problems before prison, rising to over half in prison, and dropping to less than one in ten after release. Oral methadone was being prescribed to around half of Spanish and Italian respondents and a quarter of English respondents before prison. After release, while up to half of Italian respondents continued to be prescribed methadone, fewer than one in ten English respondents were. No respondents reported being prescribed methadone in prison. Mean daily doses prescribed were about 45 mg in England and 55 mg in Italy. About half of Spanish respondents and three in ten other respondents reported both health problems and receiving help for health problems – though the proportions receiving help for health problems generally declined after release.

The vast majority of English and Spanish prisoners were willing to discuss their infectious **disease status**, though only two Italian prisoners agreed. Just over half of English respondents had been tested, and all were negative for each virus. By contrast, six in ten Spanish respondents were HIV-positive, eight in ten were HBV-positive, and all were HCV-positive. The only two **drug-related services** consistently offered to respondents in prison were tests for HIV and hepatitis (around two-thirds), and advice on drug overdose (from a fifth of English respondents to two-thirds of Spanish respondents). Overall, fewer than one in ten reported offers of drug service appointments or naloxone. Though a minority of English prisoners also reported being offered the latter two services on release, no other drug services were reported as being offered on release by any respondents.

Drug-related experiences inside prison included withdrawals on admission, going on a drug-free wing, and being apprehended for drugs offences - all of which were reported by half or more of English prisoners and up to four in ten Spanish prisoners, but by few Italian prisoners. The frequency of prison drug tests in Spain and England was typically weekly to monthly. Differences in the relative availability of drugs in the prison systems of the three countries were broadly consistent with the reported patterns of drug use in each country. For instance, drugs were generally more available in English and Spanish prisons than in Italian prisons. Furthermore, though cannabis was generally the most available drug overall, heroin was significantly more available in English prisons, crack in Italian prisons, and cocaine powder and amphetamines in Spanish prisons. The main source of drugs inside prison was other prisoners, followed by visitors.

Expectations about release included the belief that a significant other would be meeting the respondent at the prison gates – ranging from a third in Italy to two-thirds in Spain. Spanish and English prisoners were most likely to be expecting to be met on release by parents, while Italian prisoners were more likely to indicate a partner or friends. About nine in ten respondents also knew where they would be living after release, and responses were

consistent with expectations about who would meet them on release. That is, Spanish and English respondents were most likely to indicate parents' home, while Italian respondents were more likely to indicate an institution. Arrangements for work or training after release had been made by about three-quarters of English prisoners, compared with around a third of other prisoners. However, on release, fewer than one in ten believed that they were likely to get a decent job over the next six months. Fewer than one in ten prisoners stated that they were planning to do crime after release (typically drug trafficking), though plans to use drugs after release were indicated by over six in ten English prisoners and up to a quarter of Spanish and Italian prisoners. These plans typically involved smoking cannabis on the day of release (and afterwards).

Experiences after release were assessed by various questions, including whether things were generally how they had expected them to be – about half each agreed and disagreed. Over half of respondents reported strong drug cravings on release, typically on the first day (in England and Spain) or the second day (Italy). The drugs most craved were cocaine powder (in Spain and Italy), crack (in Spain and England), and heroin and cannabis (in England and Italy). The mean time between release and first drug use was around two or three days, with a range of one day (Italy) to four days (Spain). The drugs most commonly used straight after release were (respectively) cannabis, heroin and cocaine powder, with four in ten Spanish respondents also reporting injecting drugs. The main method of obtaining post-release drugs was buying them from drug dealers for Italian and Spanish respondents, and being given them by friends in the case of English respondents. In addition, the first episode of drug use after release typically involved being alone in a public place or at home in Italy and Spain, compared with using with friends and/or relatives in their homes in England. Around half of all respondents reported spending money on drugs by the final stage after release. After release, self-reported crime (excluding drug possession) was indicated by at least a third of English and Spanish respondents, and up to one in seven Italian respondents. The typical post-release crimes were drug offences and acquisitive offences, notably burglary and shoplifting. Subsequent arrests and charges were almost all reported by Spanish respondents (around a quarter). All respondents reported sexual activity by the final stage – up to two-thirds with regular partners, and up to three-quarters with casual partners. Unprotected sex was reported by over two-thirds of English and Spanish respondents (half for casual partners), but by no Italian respondents. Only a few respondents reported sex with prostitutes.

Though all possible efforts were made to maximise the validity and reliability of the findings, constraints on time and resources inevitably led to **methodological problems**. For instance, sample size was relatively small, and reduced to even smaller numbers at stages 2 and 3 by the unexpectedly high rate of drop outs after release. However, the shortfall in sample numbers is partly compensated for by the RETURN study's thorough approach, based on in-depth interviews at four stages of respondents' prison-related experiences.

In conclusion, the RETURN study has confirmed previous findings of a high level of drug use among prisoners - before, during and after imprisonment. It also found high levels of social exclusion – unemployment, accommodation problems etc. - which undoubtedly underlie the return of so many to crime and drug use after release. It is also clear that imprisonment and social exclusion result in a disruption to the treatment and service involvements of drug dependent offenders, both in prison and after release. The report concludes that prison drug policy needs to ensure continuity of treatment and help for drug users in prison and after release – particularly in England - including methadone prescribing and harm reduction services. It further concludes that prison drug testing programmes should be discontinued or relaxed – at least for cannabis – so that their costs do not outweigh their benefits. However, the main challenge involves ending the social exclusion faced by prisoners on their release back into the community.

1. Introduction

Research has consistently found high levels of drug involvements among offenders sentenced to imprisonment in Europe (eg. Council of Europe 2000; EMCDDA 2002, Shewan et al. 2000). Few studies, though, have examined the nature and extent of social exclusion among drug-taking prisoners, either before or after imprisonment (Newcombe 2002). In order to rectify this shortcoming, a study was conducted of the links between social exclusion, crime and drug use among offenders released in from prisons in each of three European countries: England, Italy and Spain.

2. Methods of investigation

The RETURN project was designed to investigate the relationship between crime, drug use and social exclusion among offenders released from in 2000/01 from prisons in particular regions of three European countries: England (North West), Italy (Milan area) and Spain (Barcelona area). The project, which was coordinated by Lifeline International in Manchester, was guided by a steering group comprised of two representatives of the research teams from each country, which met three times over the course of the research.

2.1 Design & sample. The study set out to interview up to 30 prisoners in each country – initially inside prison, and subsequently at two points after release. The analysis focused on trends across three consecutive periods of their lives: before, during and after imprisonment – with the third stage having two sub-stages (initial and later months). The initial research plan was to recruit 90 respondents – 30 inmates from two or more prisons in each country (where at least one prison housed men and one housed women). Inmates were randomly selected from lists of 20-50 year olds due for release from participating prisons within four months. Predicting a maximum drop-out level of 33% by the third stage of interviews, this was expected to provide at least 20 respondents in each sub-sample by the third stage – that is, a total sample size of about 90 (60 men and 30 women) in the first stage, and at least 60 (40 men and 20 women) by the final stage. However, as expected, practical difficulties combined with constraints on resources, resulted in fewer respondents being recruited than planned (particularly in two countries) - 68 at stage 1 (two-thirds of the planned number) and 28 at stage 3 (about half of the planned number). The final sample sizes and their characteristics are detailed in Tables 2 & 3.

2.2 Procedure. After being selected, inmates were approached by a same-sex interviewer, and informed about the nature of the study – including that participation was voluntary and confidential. All prisoners asked for an interview agreed to participate in England. Follow-up was facilitated by asking respondents how they could be contacted after release. In England, all respondents at stage 1 and stage 2 agreed to another interview, and they were paid £25 for each interview completed. All interviews were conducted in private with no others present, and took an average of 40-60 minutes to complete (responses were hand-written). The main settings for interviews were offices inside prison and drug agency offices outside prison.

Because of practical considerations, the timescale for the three stages of interviews varied between countries – though Table 1 shows there were broad similarities between England and Italy. The second stage of interviews were mainly conducted in the first three months after release in England; in the first and second month after release in Italy, and in the initial six months after release in Spain. The final stage of interviews were mainly conducted in the fourth to sixth month after release in England; in the third and fourth month after release in Italy; and around the seventh and eighth month after release in Spain.

Table 1: Timescale of three stages of interviews

	<u>1st interview</u>	<u>2nd interview</u>	<u>3rd interview</u>
England	June-July 01	Aug-Oct 01	Nov 01 – Jan 02
Italy	Sept-Oct 01	Oct-Dec 01	Jan-Feb 02
Spain	n.a.	n.a.	n.a.

In the initial interview in prison, the respondents were asked mainly about their lives prior to their prison sentence, while in the second interview (after release) they were asked both about their time in prison, and the period of up to three months since their release. The decision to ask questions about drug use and other experiences inside prison retrospectively (after release) was designed to increase honest responding, which may have been curtailed by the prison environment. In the third interview they were asked about the period of around two or three months since the second interview (see Table 1). In short, the three interviews collected information about four periods of their lives (stages):

Stage 0: the three months prior to imprisonment

Stage 1: the most recent period of imprisonment

Stage 2: initial period after release (up to 3 months)

Stage 3: later period after release (about 4 to 6 months from release).

In this report, ‘sample’ refers to all respondents who participated in a particular stage; whereas ‘cohort’ refers to the respondents who participated in all three stages. If a significant trend across the study stages was identified in the sample, a check was made to establish whether this trend was also exhibited by the cohort – if so (as was usually the case), it was regarded as a valid finding.

2.3 Research instruments. A semi-structured questionnaire was designed and piloted, leading to the production of three versions, one for each stage of interviews (Italian and Spanish translations were made from the English original). The questions focused on four key areas: demographic and social/personal characteristics; criminal involvements; drug use and problems; and health/illness. Though the questions focused on respondents’ past and current behaviour and experiences before, during and after imprisonment, some questions were future-oriented – that is, they asked about expectations (eg. regarding release), plans (eg. regarding crime), etc.. Response formats were largely a mixture of open-ended and multiple-choice options, with a small number of rating scales (eg. event likelihood).

2.4 Validity and reliability. As noted above, various efforts were made to maximise the validity (accuracy and honesty) and reliability (consistency) of responses – for instance, asking questions about prison drug use after release, guaranteeing confidentiality, etc.. Though no external measures of validity and reliability were taken, internal assessments were made by checking the overall coherence and consistency of individual responses. It was concluded that respondents were generally honest and consistent in their responding. Some respondents in the second and third interviews may also have given inaccurate or vague information about their behaviour due to intoxication by drugs (notably a 21 year old English man who was ‘on’ temazepam).

3. Findings

Quantitative data was entered into a computer file, and analysed using SPSSX. Qualitative data for key questions was content analysed, and particular ‘quotes’ were selected to represent common responses to other open-ended questions. Although sample numbers were below 100, findings are generally presented as percentages, in order to facilitate comparisons between stages (and countries), and to make comparisons with the findings of previous studies (in Tables of findings, figures other than percentages – notably means and raw numbers – are presented in italics). Because of the small sample sizes, all but the clearest findings and trends should be interpreted cautiously, and regarded as suggestive rather than more conclusive. This is particularly relevant to interpreting findings for Italy at stages 2 and 3, where cohort sizes are the smallest – for instance, only four Italian respondents were interviewed at Stage 3 – meaning that 50% represents two out of four (see Table 2). Whenever relevant, we assess trends in self-reported experiences and behaviour across three or all four stages (or, in the case of some variables, changes between the two stages after release). In general, salient trends identified in the English and Spanish samples were not presented as such unless they were also indicated by the cohort analysis (the small number of Italian respondents in Stages 2/3 made this check unfeasible for this sample).

The findings are presented in six sections. The first section describes respondents’ demographic, social and personal characteristics, including their criminal and drug careers; the second section examines trends in social exclusion and social experiences across the four study stages; the third section assesses trends in the nature and prevalence of drug use; the fourth section examines trends in the nature and extent of drug and health problems, and service utilisation; the fifth section examines their relevant experiences in prison; and the final section examines their experiences after release.

3.1 Characteristics of sample

3.1.1 Numbers. The total sample at stage 1 numbered 68, though this declined to 34 (50%) at stage 2, and 28 (41%) at stage 3 (Table 2). Sample attrition was greatest in Italy (29%), followed by England (37%) and Spain (54%). The English sample was the largest (30) at the outset, though by Stage 3 the Spanish sample was slightly larger (13). The Italian sample was clearly the smallest at each stage – it comprised only 21% of the starting sample, and just 14% (four respondents) of the final-stage sample. For this reason, generalisations and inferences based on findings from the Italian sample should be treated with even more caution than those derived from the English and Spanish samples.

Table 2: Sample sizes (number of respondents) at each stage in each country

	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	<i>30</i>	<i>14</i>	<i>11</i>
Italy	<i>14</i>	<i>7</i>	<i>4</i>
Spain	<i>24</i>	<i>13</i>	<i>13</i>
<i>OVERALL</i>	<i>68</i>	<i>34</i>	<i>28</i>

3.1.2 Demographic & personal characteristics. Information collected at the first stage indicated that about nine in ten respondents overall were **male** – all of those in England, nine in ten in Spain, and over seven in ten in Italy (Table 3). The overall mean **age** was about 33 years, and all respondents were in age range of 21 to 50 years. At a mean 29 years, English

respondents were 5-7 years younger on average than the other two groups, who were typically in their mid-30s. The vast majority of respondents whose **race** was reported were White, and the main **religion** was Roman Catholic in both Italy (86%) and England (37% - followed by 30% C of E, and 27% non-believers). Race and religion were not reported in Spain. Self-perceived **social class** was similar in England and Spain. Glossing over the specific differences shown in Table 4, around two-thirds saw themselves as working class, around one in seven as middle class, and around one in nine as classless (Table 4). By contrast, Italian respondents clearly viewed themselves as far more middle class (eight in ten), with only one in seven indicating working class (and none indicating classless).

Table 3: Key demographic and social characteristics of respondents

%	<u>Males</u>	<u>Mean age *</u> (age range)	<u>White</u>	<u>Roman Catholic</u>	<u>Single Parent</u>	<u>LT illness/ disability</u>	<u>Mental disorder</u>	
England	100	29 (21-50)	93	37	63	60	27	14
Italy	71	34 (25-40)	100	86	71	50	79	14
Spain	92	36 (29-46)	..	..	46	46	92	15

* rounded to nearest whole year LT: long-term

Table 4: Self-reported social class

	<u>Working</u>	<u>Middle</u>	<u>Classless</u>	<u>Other/Don't know</u>
England	67	13	10	10
Italy	14	79	0	7
Spain	63	17	13	8

Respondents were asked about their **usual occupation** before imprisonment, and their responses were categorised into five standard classifications, along with military and 'none'. The profiles obtained were remarkably similar in each country (Table 5), with two occupational statuses each being indicated by around three in ten respondents: manual semi-skilled and manual unskilled – with manual skilled and 'none' being the next most common.

Table 5: Usual occupational status

	<u>Professional & Technical</u>	<u>Clerical & Admin</u>	<u>Manual skilled</u>	<u>Manual semi-skilled</u>	<u>Manual unskilled</u>	<u>Military</u>	<u>None</u>
England	0	0	17	27	30	3	23
Italy	7	7	14	29	36	0	7
Spain	0	0	17	33	29	4	17

Of those employed prior to imprisonment (see below), the mean **duration of employment** was almost eight years in Spain, seven years in Italy, and three years in England.

The typical age of leaving the parental/childhood **home** was 17 years in England and 19 years in Italy. In England, one in six respondents reported having been in local authority **care** as a child – for a mean four years (range 1-7 years - compared with zero in Italy (Spanish data not available)).

The typical **relationship** status was single – i.e. not currently living with a sexual partner, including divorced and separated people. Singles ranged from almost half in Spain to around two-thirds in England and Italy (Table 3). Conversely, the proportion of respondents who were married or cohabiting (i.e. currently living with a sexual partner) ranged from about a quarter of Italians and over a third of the English, to almost half of those in Spain. In Italy and England, about a quarter of respondents reported being separated or divorced (about half each in either country) – compared with none in Spain. All respondents in steady relationships (married, cohabiting or living apart) were asked how long they had been with their current partner – the average duration in each country was around four years, ranging from less than one year to about 16 years. About five or six in ten respondents in each country had **children** – the mean number (among parents) being 2.2 in Spain, 1.9 in England, and 1.6 in Italy (overall range: 1-5).

Though the proportion reporting **mental disorders** was about one in seven in each country, the vast majority of respondents in Italy and Spain also reported long-term **physical illnesses** and/or disabilities – though only about a quarter of English respondents did so (Table 3).

3.1.3 Criminal career. Average **age of first conviction** was about 20 years, ranging from 18 in England to 22 in Italy (Table 6). This makes the typical criminal career of respondents about 13 years long. The mean **number of convictions** was 14 in England and 5 in Spain (Italian data not reported) – including an average of one **drug conviction** per prisoner in each country. The mean **number of prison sentences** served was about eight, ranging from six in England to ten in Italy. The mean total **amount of time imprisoned** was about six years – ranging from just over five years in England to about seven years in Italy and Spain. The mean duration of respondents’ **most recent prison sentence** was also notably higher in Spain (over four years) compared with England and Italy (either side of two years). However, the longest ‘most recent sentences’ were in England (up to 20 years), followed by Spain (up to 9.5 years) and Italy (up to 4.5 years)

Table 6: Criminal careers, including prison sentences

	<u>Duration of recent sentence</u>	<u>Number of all (drug) convictions</u>	<u>Mean number of sentences</u>	<u>Total time in prison</u>	<u>Age of 1st conviction</u>
England	<i>30 months</i>	<i>14 (1)</i>	<i>6</i>	<i>63 months</i>	<i>18 years</i>
Italy	<i>21 months</i>	<i>..</i>	<i>10</i>	<i>88 months</i>	<i>22 years</i>
Spain	<i>53 months</i>	<i>5 (1)</i>	<i>8</i>	<i>82 months</i>	<i>20 years</i>

All figures are means, rounded to nearest whole number

When asked about previous **criminal convictions**, the crime most often reported as having been committed at least once was **burglary** offences, indicated by over six in ten English and Italian respondents (Spanish data not available). The next most common convictions, reported by about half or more of respondents, were motoring offences and violent offences in England, and drug possession and drug trafficking in Italy. Around four in ten of each country’s respondents also reported theft from shops, theft from vehicles and theft of vehicles. Sexual offences were reported by less than one in ten in each country.

Asked about the **first crime** they had conducted, the most common responses were burglary (36%) and drug trafficking (29%) in Italy; and burglary (13%), theft from shops (17%) and theft of vehicles (13%) in England. Asked about their **most recent conviction** (i.e. pre-prison, leading to their most recent sentence), the most common responses in Italy were again burglary (36%) and drug trafficking (36%); while in England, the most common responses were burglary (33%) and violence (27%). In short, the typical first crime, recent crime and overall crime was burglary. The main reason given for doing crime was to get money – most respondents mentioned to buy drugs - but many unemployed respondents also mentioned doing crime to pay for everything that they would pay for with wages if they had a job (eg. rent, transport, food, etc.).

3.1.4 Drug career. The typical progression of use of the five main illicit drugs was to start with cannabis (16 years) and then amphetamines (17 years), followed by use of ‘harder drugs’ about two or three years later – heroin at about 19 years, and cocaine/crack at about 20 years. Spanish respondents’ drug use tended to start earlier than those of other respondents (by one to three years), particularly compared with Italian respondents. **Mean ages** of first regular use of drugs were not significantly different than those for first trial – suggesting that most regular users progress from initial experimental use fairly quickly.

Table 7: Drug careers

	<u>Ever tried drugs</u>	<u>Mean age of first use of drugs (to nearest whole year)</u>				
		<u>Cannabis</u>	<u>Amphet’s</u>	<u>Heroin</u>	<u>Cocaine</u>	<u>Crack</u>
England	90%	15	16	21	20	23
Italy	100%	17	18	19	21	..
Spain	100%	17	15	18	20	18

By the time of the first interview, all respondents in Italy and Spain had used illicit drugs, as had 90% of English respondents (Table 7). Overall, **lifetime prevalence** of use was highest for cannabis (at least nine in ten in each country). Eight or nine in ten respondents each reported lifetime use of three other drugs: ecstasy, amphetamines and LSD in England; cocaine powder, heroin and tranquillisers in Italy; and cocaine powder, crack-cocaine and LSD in Spain. Other drugs tried by half to three-quarters of respondents included cocaine, crack, heroin and tranquillisers in England; amphetamines in Italy; and amphetamines, heroin, methadone and ecstasy in Spain. Lastly, around nine in ten respondents in Italy and Spain reported having injected drugs, compared with four in ten in England.

The main **reasons** given for starting to use drugs were curiosity, pleasure (relaxation, stimulation, etc.), social background, and because one’s friends/partner used drugs; while the main reasons given for continued drug use were typically a mixture of pleasure, reducing anxiety/depression, group membership, involvements in crime, and/or dependence (particularly craving and avoidance of withdrawals). For instance, a 25 year old poly-drug using Italian woman stated that

I was attracted to the drug scene ... and my parents were not caring enough.

Another 25 year old Italian woman, into injecting cocaine and other drugs, stated that she started using drugs

Out of love, because my husband was using drugs when I met him.

3.2 Trends in social exclusion and experiences

3.2.1 Access to technology. Although around half of respondents had **access to a car/vehicle** before imprisonment, this rate dropped notably after release in two countries – to just over a quarter in England, and to zero in Italy (Table 8). Second, though a quarter or more of Spanish and English respondents had **access to a computer** before prison, along with one in seven Italians, this rate dropped to zero after release from prison in both Italy and Spain (though remained fairly constant in England). Third, around three-quarters of respondents had **access to a telephone** before imprisonment – after release, this indicator remained fairly constant in Spain, increased slightly in England, and dropped to about half in Italy. In short, in terms of access to technology, imprisonment may have had the worst effect on Italian respondents, for whom all three indicators dropped notably after release. By contrast, Spanish respondents reported loss of access to computers only after release, while English respondents reported reduced access to cars.

Table 8: Access to technology

	Access to car			Access to computer			Access to telephone		
	<u>Stage 0</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	50	29	27	30	36	36	80	100	91
Italy	43	0	0	14	0	0	71	43	50
Spain	54	39	62	25	0	8	83	77	77

3.2.2 Accommodation & co-residents. The main **type of accommodation** before imprisonment was a house/flat in all three countries (Table 9). Nine in ten English respondents reported a house/flat as their accommodation type at each stage, and fewer than one in ten indicated an institution. By contrast, over half of other respondents reported living in an institution (Spanish respondents before release, and Italian respondents after release).

Table 9: Accommodation status

	House/flat			Institution		
	<u>Stage 0</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	90	93	91	7	7	0
Italy	79	29	0	0	57	100
Spain	42	..	..	54	..	..

Levels of **homelessness** were generally low at each stage – the only rates higher than 5% were reported for the Stage 1 Italian sample and the Stage 3 English sample (Table 10). However, about four in ten respondents reported some type of **accommodation problem** after release, with slightly lower rates of problems in Spain (Table 10). These accommodation problems included being excluded from applying for council or housing authority accommodation because of rent arrears and/or other infringements of tenancy regulations (notably drugs offences and property damage). This can also lead to ‘knock-on’ problems, the seriousness of which depends on whether the ex-prisoner has no address or a temporary address– for instance, not being able to open a bank account, problems receiving mail, etc. – all of which make it far more difficult to apply for and obtain employment.

Indeed, along with lack of employment opportunities, lack of adequate accommodation was reported by many respondents to be the main problem causing them distress after release.

Table 10: Homelessness and accommodation problems

	Homelessness			<i>Accommodation problems after release</i>	
	Stage 0	Stage 2	Stage 3	Stage 2	Stage 3
England	3	0	9	43	46
Italy	14	0	0	43	..
Spain	4	..	..	31	23

For instance, a 24 year old English man with a combined alcohol and heroin habit commented that he had a lot of problems, such as lack of money, which were ‘depressing’ him, but that

of the lot, its having nowhere to live that’s the worst. Its not just me, but the missus who wants somewhere to live as well ... for the first few days I couldn’t handle it and wanted to go back to jail ... I’ll be alright once a job and flat’s sorted.

The average respondent lived with about three other **co-residents** both before and after imprisonment, though Table 11 shows that the mean number of co-residents was generally higher in Spain and Italy (about 3 or 4) compared with England (about two). Trends in the type of co-residents varied between countries (Table 11). First, before imprisonment, more than half of English respondents lived with a partner (spouse/cohabitee), though this dropped to around a quarter/third after release. By contrast, only one in seven Italian respondents reported living with a partner prior to prison, dropping to zero after release; while the proportion of Spanish respondents living with a partner rose to over half by Stage 3. Second, the proportion of English respondents living with one or both parents rose from a fifth before prison to a half after release. By contrast, the proportion of Italian and Spanish respondents reporting co-resident parents dropped from about four in ten before custody to close to zero by Stage 3. This may be partly explained by the younger age and higher unemployment rate of English respondents.

But whereas virtually no Italian or Spanish respondents lived alone, up to one in seven English respondents did, both before and after imprisonment. After release, the vast majority of Italian respondents also reported living with ‘others/strangers’ (i.e. in an institution). Lastly, the proportion of respondents living with children declined in each country after imprisonment. For instance, four in ten Italian respondents lived with children before prison, but zero at both stages afterwards. Similarly, the proportion of English respondents who lived with children declined from a pre-prison rate of four in ten to a post-prison rate of two in ten.

Table 11: Co-residents

	Mean number			% living with parents			% living with partner		
	Stage 0	Stage 2	Stage 3	Stage 0	Stage 2	Stage 3	Stage 0	Stage 2	Stage 3
England	1.9	2.1	2.0	20	50	46	60	21	36
Italy	3.0	4.9	3.0	36	14	0	14	0	0
Spain	3.7	2.9	3.5	..	39	8	..	39	54

3.2.4 Occupational status and work. Imprisonment appeared to reduce **employment** prospects in England and (particularly) Italy, though this effect appeared to be reversed in the Spanish sample (Table 12). That is, between Stages 0 and 3, the proportion of employed respondents dropped from 37% to 18% in England, and from 57% to zero in Italy – though proportions in Spain rose from 33% to 62%. About nine in ten employed respondents at each stage in each country had jobs classified as manual unskilled or manual semi-skilled. Similarly, the **unemployment** rate climbed from 63% pre-prison to 73% post-prison in England, and from 14% to 75% in Italy – compared with a drop from 50% to 23% in Spain. Around one in seven Italian and Spanish respondents reported their occupational status as **sick/disabled**, though none did so in England - though up to one in ten indicated ‘student’ in England, while none did so in Italy or Spain.

Table 12: Employment

	<i>Employed</i>			<i>Unemployed</i>		
	<u>Stage 0</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	37	0	18	63	93	73
Italy	57	0	0	14	43	75
Spain	33	39	62	50	46	23

Over half of English respondents reported getting help in prison to get a job after release, though no Italian respondents reported such help (Table 13). After release, up to half of respondents in England and Spain reported getting help to obtain employment, compared with a quarter in Italy. Around a quarter to a third of respondents applied for jobs after release, typically applying for one or two jobs and getting one or two interviews at each stage. The exception to this were the English respondents – only around half of those applying for jobs got interviews.

Table 13: Applications and interviews for jobs after release

	<u>APPLICATIONS</u>				<u>INTERVIEWS</u>			
	<u>Stage 2</u>		<u>Stage3</u>		<u>Stage 2</u>		<u>Stage3</u>	
	<u>%age</u>	<u>Mean</u>	<u>%age</u>	<u>Mean</u>	<u>%age</u>	<u>Mean</u>	<u>%age</u>	<u>Mean</u>
England	36	8	36	9	21	3	18	2
Italy	0	-	25	1	0	-	25	1
Spain	23	2	31	2	15	2	31	2

%age = percentage of respondents who had job applications/interviews in that stage (period)
 Mean = mean number of job applications/interviews (rounded to nearest whole number)

Many respondents expressed disillusionment with various ‘schemes’ and ‘projects’ set up to help and support them to obtain employment. For example, a 25 year old man with alcohol problems who had served time for violent offences commented that

Headstart and all that was a load of bollocks. I went to the dole and ... told them I'd been promised a course – they said ‘Oh no, not another one’ ... no one's rung me or nothing to see how I'm getting on.

Similarly, a 22 year old recreational user of cannabis and amphetamines, who had spent four of his six years of adulthood inside prison, commented that

I applied for New Deal last time I got out but they fobbed me off, at the Job Centre they didn't want to know. So I decided to help myself and went back to crime. This time I've lost my girlfriend and family – I've done too much time.

Many respondents also felt that realistic help and support to find employment after release was one of the main changes needed to break the cycle of drugs, crime and prison. For example, a 27 year old mixed-race man, who used various drugs recreationally, and who had spent a total of six years in prison, stated that ex-prisoners

need to be helped back into work. As a criminal, its hard to get a job. There should be an agency ... [which] should deal strictly with people who've got just got out, and give them a chance to prove themselves.

3.2.4 Income. Average weekly income from all sources dropped substantially following imprisonment in each of the samples (Table 14). For example, English respondents reported a typical income of just over £900 before imprisonment, compared with £64 in the initial months after release, and £172 in the later months. Asked about their main **sources** of income, the proportion reporting wages and state benefits as their main sources generally reflected the above employment and unemployment rates. In short, just after release, state benefits were the only source of income for most English respondents, which explains the drop in mean weekly income to just £64. Many respondents also reported long delays in being awarded benefits – at a time when they had little or no money for such basic needs as food. This was clearly regarded as a major reason for returning to crime after release. For example, a 28 year old man with alcohol and crack problems commented that

The thing I didn't expect was having to wait six weeks to get my money off the dole, and having to live on nothing. It just took so long to do everything and then wait for back pay. After I'd spent the £40 you get on release I had nothing – I lost two stone [in body weight] in a month.

About three or four in ten Italian and Spanish respondents indicated crime and/or drug dealing as income sources either before or after imprisonment. The proportion of English respondents indicating crime as an income source declined from six in ten prior to prison to two in ten after release; while the proportion indicating drug dealing as an income source dropped from four in ten prior to prison to one in ten after release. After release, a substantial minority of both Italian and English respondents also reported such vague income sources as 'other persons' and 'other sources'. Also, up to half of respondents reported having significant debts on release – particularly in England and Italy (Table 14).

Table 14: Weekly income

	<u>Stage 0</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>% with debts on release</u>	
				<u>S2</u>	<u>S3</u>
England	£911	£64	£172	43	55
Italy	E677	E175	E9	43	50
Spain	5627	40	78	23	31

3.3 Trends in nature and prevalence of drug use

3.3.1 Illicit drug use – overall levels. Respondents were asked about their frequency of use of each of nine illicit drugs (or other drugs) in all four stages – overall use, weekly use and daily use. In each country, about nine in ten respondents stated that they had used drugs in the three months prior to imprisonment (Table 15a). The **overall prevalence** of drug use peaked at 100% in prison and after release for the Spanish sample, and for the English sample while in prison (dropping to about nine in ten after release). By contrast, just over half of the Italian sample reported having used drugs in prison and in the initial months following release (rising to three-quarters in the final stage). Unlike daily drug use (see below), these trends in overall prevalence of recent use largely reflect changes in the sample over the four stages (i.e. a ‘shrinking’ cohort) – rather than significant changes in their drug use.

Trends in the prevalence of **daily drug use** were very similar in each country, at least until the final stage (Table 15a). About three-quarters of respondents reported daily drug use prior to prison (about eight in 10 of those who used drugs), dropping to zero inside prison. However, it rose again to around three of four in ten in the initial months after release – later rising further to about half in England, while dropping to about a quarter in Spain and Italy (the latter trend could again be partly explained by a degree of celebratory drug use after release from prison). In short, prison appears to virtually eradicate daily drug use, though levels of daily use rise again after release – though not to pre-prison levels, at least in the first six months after release.

Trends in the prevalence of **weekly drug use** were more similar to those for daily drug use than those for overall drug use – confirming the general observation that weekly and daily users are typically dependent drug users, while less frequent users of drugs are typically more experimental or recreational. Apart from the somewhat higher rates of weekly use for various drugs, the main consistent difference was the higher rate of weekly use of some drugs inside prison (Stage 2) - notably cannabis and heroin – compared with the zero rates of daily use.

3.3.2 Recreational drugs. Trends in the use of individual drugs varied considerably between countries (Table 15b-15k). **Cannabis** was clearly the most popular drug overall in Italy and England, but not in Spain - where amphetamine and cocaine use were generally more prevalent than cannabis use. Cannabis was also used on a daily basis by around a third of English respondents and a quarter of Spanish respondents – the other two drugs most likely to be used on a daily basis being heroin and cocaine (see below). **Ecstasy** use was much higher among English respondents (around half), though daily use of ecstasy (virtually non-existent in England and Spain) was reported at rates up to three in ten by the Italian sample – an unexpected finding. Another unexpected finding was that almost no-one reported using **LSD** in England or Italy, though about half of the Spanish sample reported LSD use in the three months prior to imprisonment (including 17% daily users, which is highly unusual) while none reported LSD use in prison or after release. Around eight in ten Spanish respondents reported use of **amphetamines** (in prison and after release), compared with up to a third of English respondents – though no Italian respondents did so, at any stage. However, daily use was far less prevalent, being indicated by fewer than one in ten Spanish or English respondents.

3.3.3 Heroin. Pre-prison **heroin** use was reported by almost four in ten Spanish and English respondents, and over two-thirds of Italian respondents. However, for Italian and Spanish respondents, this dropped to zero in prison, and remained zero at both stages after release. By stark contrast, the proportion of English respondents reporting heroin use *rose* to about half in prison, returning to pre-prison levels after release.

Table 15: Prevalence of illicit drug use**(a) Any drug use**

	<u>Overall prevalence</u>				<u>Prevalence of daily use</u>			
	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	90	100	93	91	73	0	36	55
Italy	93	57	57	75	79	0	43	25
Spain	92	100	100	100	80	0	31	23

(b) Cannabis

	<u>Overall prevalence</u>				<u>Prevalence of daily use</u>			
	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	70	100	86	91	37	0	36	27
Italy	50	43	29	75	21	0	14	0
Spain	92	31	31	77	50	0	23	23

(c) Ecstasy

	<u>Overall prevalence</u>				<u>Prevalence of daily use</u>			
	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	63	43	29	46	0	0	0	0
Italy	7	29	14	25	0	29	14	25
Spain	13	0	23	0	8	0	0	0

(d) LSD

	<u>Overall prevalence</u>				<u>Prevalence of daily use</u>			
	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	3	0	0	0	0	0	0	0
Italy	..	0	0	0	..	0	0	0
Spain	50	0	0	0	17	0	0	0

(e) Tranquillisers

	<u>Overall prevalence</u>				<u>Prevalence of daily use</u>			
	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	27	36	21	9	0	0	0	0
Italy	29	0	14	0	14	0	14	0
Spain	0	69	0	0	0	0	0	0

(f) Methadone

	<u>Overall prevalence</u>				<u>Prevalence of daily use</u>			
	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	23	0	7	18	10	0	0	9
Italy	..	29	43	25	..	29	29	25
Spain	8	85	0	23	0	0	0	0

Prevalence = overall prevalence, unless otherwise stated (eg. daily)

Drug use = use of one or more of nine listed drugs, or other illicit drugs

(g) Amphetamines

	Overall prevalence				Prevalence of daily use			
	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	20	0	21	36	7	0	0	0
Italy	0	0	0	0	0	0	0	0
Spain	33	85	31	85	8	0	8	0

(h) Heroin

	Overall prevalence				Prevalence of daily use			
	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	37	50	36	45	33	0	7	27
Italy	71	0	0	0	36	0	0	0
Spain	38	0	0	0	0	0	0	0

(i) Cocaine powder use

	Overall prevalence				Prevalence of daily use			
	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	30	21	29	9	7	0	0	0
Italy	64	14	29	0	29	0	0	0
Spain	88	62	0	46	46	0	0	8

(j) Crack use

	Overall prevalence				Prevalence of daily use			
	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	40	36	21	27	33	0	0	0
Italy	..	29	14	0	..	0	0	0
Spain	75	0	77	0	58	0	23	0

(k) Other drugs

	Overall prevalence				Prevalence of daily use			
	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	0	21	0	0	0	0	0	0
Italy	0	21	..	0	0	0	..	..
Spain	0	..	..	..	0	..	..	..

(l) Injecting

	Overall prevalence				Prevalence of daily use			
	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	27	0	7	9	23	0	7	9
Italy	57	14	43	0	..	..	..	..
Spain	80	77	46	39	..	..	..	..

(m) Alcohol use

	Overall prevalence				Prevalence of daily use			
	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	90	64	100	91	27	0	21	9
Italy	79	14	29	50	43	14	29	50
Spain	73	..	85	69	8	0	0	0

In short, prison appears to have eliminated (self-reported) heroin use in the Spanish and Italian samples, whilst having the opposite effect on the overall prevalence of heroin use in the English sample (Chart 1). However, as the figures for daily drug use indicate, daily heroin use among English respondents dropped from a pre-prison level of 33% to zero in prison, rising again after release (to 7% and 27%). Thus, the main change in the heroin use of English respondents was a temporary switch from daily use prior to prison to more occasional use in prison – with many returning to daily use again after release.

The heroin use of the 11 individuals comprising the English cohort was examined in more detail. Eight (73%) of these had tried heroin, of whom three (27%) had used heroin prior to imprisonment, five (45%) in prison, three (27%) just after release, and five (45%) in the later period after release. Of the five respondents who used heroin in prison, two had used it prior to imprisonment and three had not; and three of the five continued using it just after release, climbing to four in the later period after release (the fifth respondent who used heroin at stage 3 had used it prior to imprisonment, but not in prison or immediately after release).

In short, the same core group of about six individuals were involved in heroin use at two or more stages, though some did not use either in prison or prior to imprisonment, and two respondents managed to abstain in prison and continued abstaining after release. Of the three respondents who started using heroin in prison, one – a 24 year old man who had been using crack and alcohol prior to prison – made the following comments about his drug taking before and after release:

I never took heroin before, I started using in prison ... now I'm out, the drinking is the same but heroin has replaced crack ... I only took brown now and then in jail ... but when I came out I had a taste for it, and like a fool I thought I could have it recreational and not get a habit. Now I take it because I have to, not cause I want to.

Another respondent (22 year old man) who renewed his crack and heroin habits within days of leaving prison in England described how and why he now only uses these two drugs together rather than on separate occasions as previously:

I won't do heroin on its own now ... [because] when I was arrested I was too drugged up and didn't know what I was doing [and] if I have crack and heroin together my girlfriend can't tell I'm doing it – one makes your pupils big, the other small, but together...

3.3.4 Cocaine. The prevalence of use of **cocaine powder** was notably higher in Spain: nine in ten before prison, six in ten in prison, and almost half in the later months after release – though none used in the initial months after release. Cocaine use in England and Italy was reported by almost a third and two-thirds respectively before prison, dropping to a fifth and one in seven respectively in prison, then rising again to almost a third just after release – though by the final stage, cocaine use had dropped to less than one in ten in England and zero in Italy. Daily use of cocaine powder was generally reported prior to prison only, by about half of Spanish respondents, almost a third of Italian respondents, and just one in 15 English respondents – the exception being Spanish respondents, almost a quarter of whom reported daily cocaine use in the initial months after release from prison. In short, prison generally had the effect of reducing cocaine use, particularly daily use – though this may have had more enduring effects in Italy and England than in Spain (though the post-release surge of regular cocaine use in Spain may be explained by temporary celebratory behaviour).

Trends in crack use are more difficult to interpret. Use of **crack** (cocaine freebase/rocks) was also greatest among Spanish respondents – about three-quarters used crack before prison and in the early months after release, though none reported crack use in prison nor in the later

months after release. Daily crack use in the Spanish sample also reflected this trend, though at lower rates (about six in 10 before prison, and about a quarter in the first stage after release). By contrast, around three or four in ten of the other two samples used crack before and inside prison, dropping after release to around two or three in ten in England and one or two in ten in Italy (but plunging to zero for the latter by the final stage). In short, the observed trends are broadly consistent with the conclusion that prison reduces the extent of crack habits among drug users, assuming that the Stage 2 levels (particularly in Spain) indicate episodes of ‘celebratory’ drug use following release from prison..

3.3.5 Other drugs. Most of the listed drugs typically come from illicit sources, with very few people receiving them on prescription (eg. heroin, amphetamines). The two main exceptions are methadone and tranquillisers. **Methadone** use was reported before and after prison by English respondents (about one in five, rarely daily), while Spanish respondents reported using methadone mainly in prison (two-thirds, none daily). Italian respondents reported a more consistent rate of methadone use across stages (up to three in ten, mostly daily). Examination of findings about drug treatment experiences indicated that the vast majority of methadone users received (at least some of) their methadone supplies from doctors or drug clinics (see below). **Tranquillisers**, typically benzodiazepines (eg. Valium), were used by around a third of English respondents before and inside prison (none daily), though their use declined after release (to one in five, then one in ten). Similarly, Italian use of tranquillisers was mostly on a daily basis, though dropped from three in ten prior to prison to zero in prison and in the final stage (though rose slightly to about one in seven just after release). By contrast, Spanish respondents reported no use of tranquillisers except in prison, where two-thirds reported their use (though none daily). Use of **other drugs** was reported by English and Italian respondents only – but only while inside prison (about one in five each). For instance, a 21-year old heroin-using English respondent commented that

steroids are also rife inside – tablet form, but some still use needles ... they all go down the gym, they all wanna get pumped up.

Interestingly, in each country, though almost all listed drugs were reported to have been used in the three months prior to imprisonment (four or five at a daily rate), the **number of drugs** used by the final stage in two countries was much lower (especially daily use). That is, by the final stage - excluding methadone, which was mainly prescribed - Spanish respondents reported overall use of only three illicit drugs (amphetamines, cannabis and cocaine), and daily use of just two (the latter two); while Italian respondents reported final-stage use of only two drugs (cannabis and ecstasy), and daily use of just one drug (ecstasy). By contrast, English respondents reported continued use of seven of the listed illicit drugs (all except LSD) at the final stage – though daily use was also restricted to only two drugs: cannabis (as in Spain) and heroin (compared with cocaine in Spain). The drug-taking profile of English respondents is broadly consistent with the findings of other recent surveys of prisoners before and during imprisonment (Table A, Appendix).

3.3.6 Injecting drug use. Respondents were also asked about one of the riskiest methods of drug use, namely injecting. Injecting was highest among Spanish respondents and lowest among English respondents (Table 151). About eight in ten of the Spanish sample injected drugs before prison (88%) and in prison (77%), dropping to around four in ten at both stages after release. By contrast, only about a quarter of the English sample were injecting drug users (IDUs) in the three months prior to prison, dropping to none in prison, and rising slightly to just less than one in ten after release. The Italian sample occupied an intermediate position – one in seven injected inside prison, though none were injecting by the final stage. In short, prison generally had the effect of substantially reducing levels of injecting, though this was not achieved until after release in the Spanish sample.

Duration of injecting, as reported at first interview, varied widely across the three samples. The mean approximate number of years of injecting was about two among the 21 Spanish IDUs, about five years among the 10 English IDUs, and about 14 years among the 8 Italian IDUs. The main **drugs injected** were amphetamines and heroin in England (by just over half of the users of each drug); heroin (100%) and crack-cocaine (50%) in Italy; and crack-cocaine and cocaine powder in Spain (by over eight in ten users of each drug). In short, injecting of amphetamines was rare in both Italy and Spain; injecting of heroin was rare in Spain; while injecting of either type of cocaine was rare in England.

IDUs were asked if they had **shared injecting equipment** in prison or after release, i.e. passed on syringes/needles used by them to other IDUs, or injected with syringes/needles already used by someone else (Table 16). In England, no-one reported injecting in prison, though after release, one respondent reported injecting at each stage – only the final-stage respondent shared injecting equipment (in both ways) with one other person. However, both of the post-release IDUs in England reported sharing injecting paraphernalia. In Italy, only one respondent reported sharing injecting equipment, in both ways – namely, the sole respondent who injected drugs while inside prison (he reported mainly getting his syringes/needles from visitors, while passing used ‘works’ on to two other inmates). In Spain, only one IDU reported sharing injecting equipment after release – though he indicated that he had passed on used equipment to around 20 people. Sharing of injecting paraphernalia was also reported by two Spanish IDUs at Stage 2 and three at Stage 3. However, the sharing rate in prison was much higher: all ten Spanish IDUs reported passing on used ‘works’ to others in prison (to a mean six people each), while 60% reported injecting with used ‘works’ (from a mean of 12 people each) – and all reported sharing injecting paraphernalia in prison too. In short, few IDU respondents reported sharing injecting equipment generally – the exception being Spanish respondents, whose ‘sharing’ rate increased dramatically in prison, with all IDUs passing on used ‘works’ and six in ten injecting with used ‘works’.

Table 16: Number of IDUs reporting sharing of injection equipment

	<u>Passing on used equipment</u>			<u>Injecting with used equipment</u>		
	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	0	0/1	1/1	0	0/1	1/1
Italy	1/1	0/3	0/3	1/1	0/3	0/3
Spain	10/10	1/6	0/5	6/10	0/6	0/5

3.3.7 Alcohol use. Respondents were also asked about their use of one legal social drug – alcohol. Drinking was indicated by the vast majority of respondents outside of prison – all or nearly all of the English sample, and around eight in ten of the other two samples (Table 15m). Italian respondents clearly had the highest rate of **daily drinking** outside prison: over four or five in ten before and after release, compared with about a quarter in England and typically zero in Spain. However, reported alcohol use was generally much lower in prison – even so, it remained at two-thirds in England, but most of these were occasional (less than weekly) consumers of ‘hooch’ – illicit alcoholic beverages brewed from fruit, etc. (daily drinking in prison was only reported by the Italian sample - one in seven). For instance, a 24 year old English man reported that he was involved in producing ‘hooch’ in prison:

I was brewing it – every Saturday night was party night ... no trouble from the screws ... six or seven of us having a drink and a chat.

The **amount of alcohol** - in standard units (SUAs) - consumed over the week prior to interview was also reported in England and Italy. The general trend was for weekly alcohol consumption to be heavier before prison (i.e. above the recommended weekly limits for men of 28 units) and lighter after release (i.e. within the limits for safer drinking). English respondents reported the heaviest mean weekly use before prison: 93 SUAs, compared with 44 SUAs in Italy. However, inside prison English respondents reported a mean weekly consumption of close to zero, rising to 35 SUAs and 16 SUAs in the two post-release stages - far lower than pre-prison levels (data for Italian sample are unreliable due to small sample numbers).

In the first interview, respondents were asked to indicate which of four types of drinker they thought they were, based on the amount of alcohol they used. Table 17 shows that the distribution of respondents for each drinking type was quite similar for each county, the main notable variation being the somewhat higher proportion of abstainers and lower proportion of light drinkers in Spain (particularly compared with England). This conflicts with the above findings of heavier drinking by English respondents, and greater daily drinking by Italian respondents. At both stages after release from prison, respondents were also asked to compare their past-week level of alcohol use to their 1 pre-prison drinking level (Table 18). In the initial months after release, Spanish respondents were about twice as likely as English respondents to indicate that they were drinking less than normal. However, in the later months after release, about eight in ten Spanish respondents reported drinking more than usual, compared with just one in ten English respondents.

Table 17: Self-reported drinking type

	<u>Abstainer</u>	<u>Light</u>	<u>Moderate</u>	<u>Heavy</u>
England	10	43	27	20
Italy	21	36	21	21
Spain	29	21	29	21

Table 18: Post-release drinking compared to pre-prison drinking

	<u>Stage 2</u>			<u>Stage 3</u>		
	<u>Less</u>	<u>Same</u>	<u>More</u>	<u>Less</u>	<u>Same</u>	<u>More</u>
England	29	36	36	40	50	10
Italy	40	40	20	..	..	..
Spain	58	17	25	0	18	82

3.4 Trends and findings on drug/health problems and service utilisation

Around two-thirds of English and Italian respondents reported that they were experiencing drug problems prior to imprisonment, though no more than one in five reported drug problems inside prison. (Table 19a). However, following release, the proportions reporting drug problems rose to over a third of the English sample while dropping to zero in the Italian sample. The figures in Table 19b suggest that the lower rates of reported drug problems in prison are related to the relatively high rates of receiving help for drug problems reported while in custody. That is, when respondents are receiving help for their drug problems, they appear less likely to define themselves as having the problem. The vast majority of those

stating that they received help for drug problems indicated drug clinics outside prison and doctors in prison. The English sample's highest level of help for drug problems was reported while inside prison - 57%, compared with 21% who reported having drug problems in prison. Over two-thirds of Italian and Spanish respondents also reported receiving help for drug problems inside prison and prior to prison, though after release this dropped to around half (and to zero for English respondents). This suggests that there may be a lack of throughcare for problem drug users after release from prison into the community. A prescription of oral methadone was reported by almost six in ten Spanish respondents and four in ten Italian respondents before imprisonment, compared with less than a quarter of English respondents (Table 19c). In England, this dropped to zero in prison and just after release, rising slightly to about one in ten by the final stage. Mean daily dose of methadone prescribed to treatment clients before imprisonment was 43 mg in England (range: 10-60 mg), compared with 55 mg in Italy (range: 10-100 mg). About half of Spanish respondents and almost three in ten Italian and English respondents reported other health problems, both prior to prison and inside prison (Table 19d). The figures in Table 19e reflect the fact that nearly all of these were receiving treatment for their health problems before imprisonment.

Table 19: Drug and health problems

(a) Experienced drug problems

	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	64	21	29	36
Italy	71	14	0	0
Spain	..	..	..	31

(b) Received help for drug problems

	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	33	57	0	9
Italy	79	71	57	50
Spain	79	67	85	46

(c) Prescribed oral methadone

	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	23	0	0	9
Italy	57	..	29	50
Spain	42	..	..	..

(d) Had health problems

	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	27	21	..	..
Italy	29	29	..	..
Spain	50	46	..	..

(e) Received help for health problems

	<u>Stage 0</u>	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>
England	23	..	7	9
Italy	29	..	57	75
Spain	50	..	23	..

After release, respondents were also asked if they were willing to discuss their status regarding the three main infectious diseases related to sharing of injection equipment: **HIV, HBC and HCV**. The proportions agreeing varied widely between samples – all agreed in England, about eight in ten in Spain, but only one in seven in Italy. In England, 45% indicated that they had not been tested, while 55% indicated that they had been - and all of these were negative for each virus. In Spain, of ten respondents willing to discuss their test results, 60% were HIV positive, 80% were HBV positive, and all were HCV positive (similar rates were also reported in the final stage). In Italy, of two respondents willing to discuss their test results, both were HCV positive, one was HIV positive, and neither were HBV positive. These figures generally reflect previous research findings on HIV and hepatitis infection levels among drug using prisoners in these three countries – particularly the higher rates of HIV in Spain, and the very low rates in England.

Respondents were asked if they had been **offered various drug-related services** both while in prison and on release. The main services offered while **in prison** were tests for HIV, HBC and HCV, generally indicated by about six or seven in ten respondents in each country – the exceptions being English respondents’ experiences of being offered HCV and HIV tests (around four in ten each). The only other service reported to be offered to significant numbers in prison in each country was overdose advice (from around two in ten in England and Italy to seven in ten in Spain). Unexpectedly, offers of drug service appointments during imprisonment were reported by just four in ten Italian respondents, less than one in ten English respondents, and no Spanish respondents – while offers of naloxone to inmates were reported only in Italy (one in seven). No Italian or Spanish respondents indicated that they were offered any of these services **on release** from prison, though English respondents leaving prison indicated that they were offered two services: a drug agency appointment (one in three) or naloxone (one in seven).

3.5 Other experiences in prison

3.5.1 Drug-related experiences. Cannabis was generally regarded as the drug with the greatest **availability** inside prison, though each sample also perceived one or two other drugs as equally available - namely heroin in England, crack in Italy, and cocaine powder and amphetamines in Spain (Table 20). By contrast with the Spanish sample (100%), fewer than one in three Italian and English prisoners reported that amphetamines or cocaine powder were easy to get in prison, though around half of all inmates thought crack was easily available inside prison. Lastly, by contrast with the English sample (100%), only four in ten Spanish prisoners and one in seven Italian prisoners perceived heroin to be easily available inside prison. Overall, drugs appear to be harder to obtain in the Italian prison system than in the prisons of Spain or England. These differences in relative availability of drugs are broadly consistent with the different patterns of drug use reported in the three countries’ prisons.

Table 20: Availability of drugs inside prison (very/quite easy to get)

	<u>Cannabis</u>	<u>Amphets</u>	<u>Heroin</u>	<u>Cocaine HC</u>	<u>Crack</u>
England	100	7	100	29	43
Italy	43	14	14	29	43
Spain	77	100	39	100	54

Drug-taking prisoners reported that their usual **sources of drugs** were other prisoners (mentioned by up to eight in ten in each country), followed by visitors – mentioned by over eight in ten Spanish inmates, four in ten English inmates, one just more than one in ten Italian

inmates. ‘Other sources’ were also indicated by one in seven in England, but none in the other two countries.

Around two-thirds of Italian and English prisoners stated that they informed the prison authorities about their drug problems on admission to prison – typically on the first day (Spanish data not available) (Table 21). **Withdrawals** on admission (typically from opiates) were reported by half of English prisoners and one in seven Italians. A 21 year old English man who had used heroin for three years prior to his recent sentence, commented that:

They asked me when I went in if I was withdrawing, and I said yes but I’d rather do it on the wing – hardcore – rather on the hospital wing – cause in Youth Prisons you’re in trouble if you’re a smackhead, but in con’s jail, if you want a bag you get a bag.

Table 21: Drug-related experiences in prison

	<u>Withdrawals</u>	<u>Drug-free wing</u>	<u>Caught with drugs</u>
England	50	64	50
Italy	14	..	0
Spain	..	39	39

Almost two-thirds of English prisoners reported having been on a **drug-free wing**, compared with four in ten Spanish prisoners (Italian prisons do not have drug-free wings) - though about half of these stated that this was just for a small part of their sentence. Inmates’ views on the effectiveness of the drug-free wing varied, though some clearly saw it as serving cosmetic functions only. For instance, a 25 year old English man whose main problem was with alcohol but who also used drugs commented that

I went on the drug-free wing because of the benefits. The prison likes to have non-drug users on the wing because it makes the numbers and tests look good so they can say ‘its working!’

Heroin and other drugs were typically regarded as no more difficult (and sometimes easier) to obtain on the drug-free wing than in other parts of the prison, as two English prisoners commented:

It’s the best place for it really, and you get special privileges” (28 year old man).

Drug-free wings are a joke, you pretty much know when you’re gonna get tested, and there’s more drugs on them wings than the others (24 year old man).

Half of the English prisoners also reported having been apprehended for **drugs offences** in prison (typically through urine tests, but also cell searches, etc.) - compared with four in ten Spanish prisoners and no Italian prisoners. The Italian situation may be partly explained by the facts that they had the lowest overall rates of drug use, and their prison system also has no routine drug testing procedures. The **frequency of urine testing** for drugs was reported to be typically either weekly (four in ten) or monthly (three in ten) in Spain – compared with monthly (over half), but rarely weekly (one in ten) in England. Positive tests involved cannabis in the vast majority of cases. One in five English prisoners (18%) had specific objections to MDT (mandatory drug testing). For instance, a 24 year old man who started using heroin while in prison stated that:

They should abolish MDT cause it encourages cons to use heroin rather than cannabis – it gives them habits and churns out junkies ... If there weren't any MDT I wouldn't be smoking heroin now.

In the English prison system, there was a broad range of views expressed on various services and agencies for drug users and ex-prisoners. Views on the probation service were either non-committal or negative – for instance, a 24 year old man stated “*they're proper useless and don't help nobody*”. Views on the CARAT service (Counselling, Assessment, Rehabilitation and Treatment) ranged from some finding the educational courses on drugs ‘useful’, while others found them ‘a waste of time’ (eg. ‘*I already know about the effects of drugs*’). Treatment and counselling services for problem drug users were regarded as far more relevant – as a 24 year old crack and heroin user put it:

Counselling was most useful because she showed me ways of controlling my drug use.

However, several respondents believed that one of the major failings of the English prison system was its lack of treatment services for drug-dependent inmates both inside prison and after release. For instance, one respondent (a 36 year old man) who had been using heroin since 18 years old, had returned to daily use of heroin shortly after release (as he always did). He commented that drug dependent people

should be given the chance to detox before they leave prison, instead of coming out and needing more gear. Then they need support, a day group, until they get a job. At the moment you're just thrown out, and its hard.

The sole English respondent to receive a methadone prescription after release - a 21 year old man who started using heroin at 18 – reported that he was ‘topping up’ his script with illicit heroin because the daily dose (50 ml) was too small for his needs. He was also unhappy with the new supervised methadone consumption regime:

I want to take it at night before bed or first thing in the morning, but I have to drink it in the chemist between 8am and 5pm – and its not enough ...

Indeed, we were surprised that so many respondents commented that participation in the RETURN research project was the best ‘drug service’ provided to them inside prison or after release. This was both because it had helped them to think about their drug use and other problems, and because the offer of three paid interviews was one of the few things offered to them which was actually delivered as promised. For instance, a 28 year old recreational user of cannabis and cocaine, who had been imprisoned for supplying drugs in England, stated in his last interview that

its been good having someone to confide in, talking through the experience. Its stuff you can't talk to family and friends about, and its confidential.

Similarly, a 24-year old English black man who was ‘into’ dance drugs and clubbing, and who had just been released from his first sentence (six months for assault), commented that the research project was useful because

it makes you think just by being asked questions. These sort of questions should be asked of everyone when they're getting out, and then again when they're out.

When asked about their general views on the **best and worst things** about prison, respondents gave a variety of responses. Top ‘hates’ including loss of freedom, separation from family/friends, bullying and ‘hassle’ from other prisoners, and reduced drug use (due to

lack of money rather than availability). For instance, a 31 year old Italian male recreational drug user stated that

prison gave me the opportunity to think things over and get to know myself better, to learn how to listen to other people ...and to become humble.

Conversely, the perceived ‘best things’ about prison included getting over a drug problem, learning new skills, and perhaps most commonly of all, having time to think and improve one’s personality and life. For instance, a 25 year old poly-drug using Italian woman commented that

If they hadn’t caught me and put me in prison I would have died for sure, because of the kind of life I was living, using many drugs ...

3.5.2 Expectations and plans about release. There were clear similarities and differences in prisoners’ expectations about release from prison in the three samples. The proportion of prisoners believing that they were **being met by someone on release from prison** varied from two-thirds in Spain, to about half in England and a third in Italy (though around a quarter of the latter two samples were ‘not sure’ if they were being met). The person meeting them from prison was typically reported to be one or both parents in Spain and England (about a quarter each). By contrast, Italian prisoners were more likely to be expecting to be met on release by their sexual partner (one in five) or friend/s (one in seven) – who were also the two next most likely people indicated to be meeting respondents from prison in Spain and England, after parents (by about one in six). Almost nine in ten prisoners indicated that they knew where they would be living immediately after release, and specific responses were consistent with the persons nominated as meeting them from prison. That is, ‘parents’ home’ was the main response in Spain (six in ten) and England (four in ten) – followed by own/partner’s home, and the homes of other relatives. By contrast, fewer than one in ten of the Italian sample indicated ‘parents’ home’ as their place of residence after leaving prison, with the main response (indicated by over half) being ‘other place’.

Arrangements for work or training after release had been made by almost three-quarters of English prisoners, though by only four in ten Spaniards and three in ten Italians (Table 22). However, on release, fewer than one in ten described their chances of getting a decent job over the next six months.

Table 22: Expectations about release

	<u>Plan to do crime</u>	<u>Plan to take drugs</u>	<u>Arranged work/training</u>	Chances of decent job (% likely)
England	9	63	73	9
Italy	7	14	43	0
Spain	8	25	29	8

The proportion of prisoners indicating that they **planned to do crime** after release was fewer than one in ten in each sample (Table 22). Only the English respondents indicated what type of crime was being planned (drug trafficking in all three cases). The proportion **planning to use drugs** after release was over six in ten in England, but just a quarter in Spain and one in seven in Italy – typically on the day of release. The drug most commonly mentioned as the one which would be used on release was cannabis – by over half of English prisoners and almost all Spanish and Italian prisoners - while English prisoners also reported planning to

use ecstasy (a quarter) and cocaine powder (one in ten). Only one respondent (English) reported that he planned to use heroin.

3.6 Other experiences after release

3.6.1 Outcome of expectations. At both stages after release, about half of the English and Spanish samples reported that ‘things have been how they expected them to be since leaving prison’ (Table 23). This contrasts with the changing response of Italian respondents – two-thirds reported generally confirmed **expectations** in the initial months after release, though this dropped to a quarter in the later months after release. The disparity between respondents hopes, expectations and experiences about work and life after release was illustrated by a 21 year old English man who had been using heroin for three years (injecting for two years), and whose friends and siblings were all heroin users. His recent 3-year prison sentence reduced his heroin habit to a ‘toot’ once a week, though within one week of release he had returned to daily injecting of heroin. Just after release he was asked what he would like to be doing in three months time, and he responded that he would like to move away from the drug scene, by getting

a new job, new friends, and starting a new life – and a father and son relationship with my son, and a new girlfriend.

However, asked what he was most likely to be doing in three months, he replied that he would probably be

a dole dosing bum, on the smack, selling me clothes – but that’s not inevitable, its just if everything catches up with me.

Respondents were also asked their views on what might improve life for prisoners on release into the community, and various suggestions were made, the most salient being immediate access to drug treatment, a proper job, and help finding suitable accommodation. For instance, an Italian male in his early 20s, who used cannabis only, echoed many other respondents when he stated that the best improvement would be to

help people get a job ... this is the only way to prevent them from becoming involved in crime again.

Regarding broader policy issues, several respondents in each country mentioned legalising or decriminalising drugs as a change which would greatly reduce problems for them. Some of these were aware of the heroin prescribing projects in Switzerland and the Netherlands, and some argued the case for smokable and injectable heroin maintenance in their countries.

3.6.2 Drug use. In the immediate period after release from prison, strong **drug cravings** were reported by over half of respondents (Table 23). The mean time between release from prison and the start of drug cravings was 8 hours in England, 11 hours in Spain and 32 hours in Italy, with most drug users experiencing craving within two days of release. The drug most craved by about four in ten respondents in Spain and Italy was cocaine powder, while in England none reported craving for cocaine powder. Instead, English respondents were most likely to report post-release craving for heroin (three in ten), which was also the second most craved drug in Italy (by three in ten too). However, heroin was not craved by any Spanish respondents – the only other drug they reported cravings for on release was crack-cocaine (a quarter) – also mentioned by one in five English respondents but no Italians. Lastly, up to one in five English and Italian respondents also reported craving for cannabis on release. In summary, most respondents reported strong cravings for drugs on release from prison, particularly cocaine powder, heroin and crack-cocaine.

The mean time between release and **first use of drugs** was about one or two days in Italy, two or three days in England, and four days in Spain. All post-release use of drugs – by all Spanish, nine in ten English, and six in ten Italian respondents – had been initiated within a few minutes of leaving prison to a maximum of two weeks afterwards.

Table 23: Drug-related and general experiences

	<u>Craved drugs</u>	<u>Mean time between release & 1st drug use</u>	<u>Things as expected</u>	
			<u>Stage 2</u>	<u>Stage 3</u>
England	50%	2.5 days	50	46
Italy	57%	1.5 days	67	25
Spain	62%	4.0 days	54	46

The most common **drugs of first use** on release from prison in England were cannabis (four in ten), heroin (one in five), and cocaine powder (one in seven). These three drugs were the ones used first by Italian respondents too - though by just one in seven each. Data on specific drugs were not available on Spanish respondents. One in seven English respondents also reported amphetamines as their drug of first use on release from prison. Four in ten Spanish respondents injected their first drug, compared with no English respondents (Italian data not available). The **source** of the first drugs used after release from prison was reported to be a drug dealer by over two-thirds of Italian and Spanish respondents, and a friend by over two-thirds of English respondents - although the distinction is ambiguous. Even so, the findings about how they **obtained** their first drugs after release were consistent with the evidence about sources – that is, over half of English respondents said they were given the drugs by friends, while nearly all of the other respondents stated that they paid for the drugs with their own money. Findings about the place in which the first drugs were used and who they were used with is also consistent with the above contrast between English and other respondents. That is, almost half of English respondents' indicated friends' home as the **place** of first drug use, whereas the other respondents were more likely to indicate public places (three-quarters of Spaniards and one in seven Italians) or own home (a quarter of Spaniards and one in seven Italians). Similarly, whereas over nine in ten English respondents mentioned friends or relatives as the people with whom they used their first drugs, these were indicated by less than half of Spanish respondents and three in ten Italian respondents. Instead, the latter were more likely to indicate that they used their first drug alone (half of Spanish respondents, and a third of Italian respondents) – while fewer than one in ten English respondents did so. The proportion who indicated that they had **spent money on drugs** since they were released from prison was just over half in Italy and England, and about four in ten in Spain. The main sources of money to buy drugs after release were state benefits, family/friends and crime in England, and loans and crime in Italy.

Although the prevalence of most kinds of drug use climbed again after release from prison, these levels were generally lower than those before imprisonment – though underlying trends often suggested that levels of use might return to pre-prison levels over the year following the study. Respondents reported various effects of imprisonment on the nature of their drug consumption in prison, with these effects often continuing after release – including using fewer drugs, less heavy use, less frequent use, reduced injecting, and different reasons for using. For instance, a young Italian drug user commented after release that:

before imprisonment my use of drugs depended on my vulnerability, but now I'm conscious of what I'm doing, it doesn't depend on outside problems.

3.6.3 Crime. Self-reported involvement in **crime** at both stages after release was highest among English respondents (rising from six to nine in ten), followed by Spanish respondents (rising from three to seven in ten) – which contrasts with rates of one in seven followed by zero among Italian respondents (Table 24). The types of crime committed after release were reported for English respondents only. Drug possession was the most common crime – when it is excluded from the analysis, post-release criminal activity drops to around a third of English respondents. The other common post-release crimes were drug dealing, burglary and shoplifting. Though one in three respondents returned to crime after release, some felt that they were now committing less serious (and sometimes less profitable) criminal offences than on previous releases. For example, a 28 year old man with alcohol and crack problems, who had served a total of three years over four sentences, stated that

last time I was straight back thieving but I didn't do any mugging. This time the only thing I've done is sell Es to make money, but that didn't work – I made my money back, just, but me and my nephew necked the rest.

Respondents generally agreed that poverty and lack of employment were the main **reasons** for their involvement in crime (particularly acquisitive crime) – while, following imprisonment, the label of 'ex-con' was seen by many as the 'final nail in the coffin'. However, among English drug-using respondents, 'getting back into' opiates or cocaine/crack was regarded as the critical factor underlying their return to crime. For instance, a 36 year old man who had used heroin and crack for the best part of 20 years, reported that he had spent over 10 years in prison for drug-related crimes. Despite intentions to 'stay clean', he began using on his first day of freedom on finding that his girlfriend had developed a 'habit' while he was in custody. Two months later he admitted to the almost inevitable consequences:

I'm using [heroin] every day, the amount varies, sometimes I have to budget it so I'm not ill. That's the thing: I can't stand being ill and that's when you start thinking of crime.

This respondents' 'thoughts of crime' soon turned to active supplying of heroin to support his own habit. Conversely, some of the basic processes involved in avoiding crime after release were indicated by the views of a 34-year old English man, who had been using heroin and crack since his mid-20s. He had served a total of eight years imprisonment for drug-related acquisitive crimes, and about three months after release from his most recent sentence he commented that:

Last time it was six months before I started shoplifting – basically that was the drugs. Now that I'm not using, and I'm working, I don't need to steal. I'm keeping away from drugs, it really is as simple as that. If I start using I'll eventually not get up for work, and then it's a vicious circle and one long spiral down.

Another respondent (a 24 year old English man) commented that, four months after release, he had reduced his involvement in acquisitive crime to zero by switching his habit from crack to heroin:

Previously I was mad for the crack and that's much more expensive so I was grafting all the time, and was in and out of prison. This is the longest I've ever been out without committing a crime.

However, the relationship between drug use and crime was not always clear-cut, as a 22 year old daily heroin and crack user indicated:

Crime led me to drugs – it was the environment in which I was brought up. If I had worked I wouldn't have met these people. I calmed down after my four year sentence

but then I got into drugs and needed money. The best way I knew to make money was stealing cars and from cars ... the drugs made me worse.

Subsequent **arrests and charges** were highest among Spanish respondents (typically involving a quarter), with only one English respondent and no Italian respondents reporting being arrested or charged. The English respondent who reported having been arrested and charged at stage 3 was a 22 year old man who had largely abstained from drugs in prison, but returned to his daily heroin and crack habits within two days of release from prison. His renewed drug habits were mainly funded by burglary or shops and stealing from cars, for which he had recently been apprehended – so he was now facing a further prison sentence when he attended court. His main worries about being ‘sent down’ again concerned his girlfriend:

She’s threatening to finish it if I go back to jail but I don’t think she’ll do it because she’s had this loads of times before – and I think she might be pregnant.

Table 24: Crime and arrests/charges after release

	<u>Committed crimes</u>		<u>Police actions</u>			
	<u>Stage 2</u>	<u>Stage 3</u>	<u>Arrested</u>		<u>Charged</u>	
	<u>S2</u>	<u>S3</u>	<u>S2</u>	<u>S3</u>	<u>S2</u>	<u>S3</u>
England	59 (29)	91 (36)	0	9	0	9
Italy	14 (14)	0 (0)	..	0	..	0
Spain	31	69	23	15	23	23

() = excluding drug possession offences

3.6.4 Sexual behaviour. Respondents were also asked about their **sexual behaviour** after release from prison. In the initial months after release, sexual activity was reported by almost nine in ten English respondents and seven in ten Spanish respondents, but only two in ten Italians (Table 25). However, by the later months after release, all respondents reported having experienced sexual activity. Over half and up to two-thirds of respondents reported having sex with regular partners. Sex with casual partners increased from a quarter to half at Stage 2 to about three-quarters at Stage 3. The typical number of casual sexual partners was about two at Stage 2 and three at Stage 3. The only reports of sex with prostitutes were by English respondents – two at Stage 2, and one at Stage 3.

Table 25: Sexual partners after release from prison

	<u>England</u>		<u>Italy</u>		<u>Spain</u>	
	<u>S2</u>	<u>S3</u>	<u>S2</u>	<u>S3</u>	<u>S2</u>	<u>S3</u>
Regular partner	43	64	..	67	62	54
Casual partners	50	73	..	33	23	77
Prostitutes	14	9	..	0	..	..
OVERALL	86	100	20	100	69	100

Unprotected sex with regular partners (or casual partners) was not reported by Italian respondents, though was the norm among around three-quarters of English respondents, whilst being reported by fewer than four in ten Spanish respondents (Table 26). Unprotected sex with casual partners was reported by fewer than a quarter English and Spanish

respondents at Stage 2, though by about half at Stage 3. Only one respondent reported unprotected sex with a prostitute: an English respondent at Stage 3. Overall, unprotected sex was reported by almost half of English and Spanish respondents at Stage 2, and over two-thirds at Stage 3 – with Italian respondents reporting no unprotected sex at either stage.

Table 26: Unprotected sex after release from prison (among those who had sex)

	<u>England</u>		<u>Italy</u>		<u>Spain</u>	
	<u>S2</u>	<u>S3</u>	<u>S2</u>	<u>S3</u>	<u>S2</u>	<u>S3</u>
Regular partner	83	71	..	0	23	38
Casual partners	14	50	..	0	23	46
OVERALL	42	73	0	0	46	69

4. Discussion and conclusions

The present findings and conclusions have numerous implications for criminal justice and treatment policy toward drug using offenders, particularly prisoners and ex-prisoners. It is appreciated that prison drug strategy is in a period of rapid development in England (Duke 2000) and elsewhere (Shewan & Davies 2000; EMCDDA 2002), and that some of the interventions discussed below are already underway in some countries (eg. increased treatment in English prisons). Four key recommendations are focused upon here: continuity of treatment and help, disease prevention measures, changes to drug testing regimes; and tackling social exclusion. These recommendations are based on the suggestions of various governmental, professional and/or expert-advisory bodies in recent reports. For instance, in England, they include the Advisory Council on the Misuse of Drugs’ report ‘Drug Misusers and the Criminal Justice System’ (1996); the UK Prison Service’s ‘Tackling Drugs in Prison: the Prison Service Drug Strategy’ (1998); and the Home Affairs Select Committee report (2002) on their inquiry into British drug policy and services. Some of this advice also reflects the guidelines of the European Drug Strategy (2000-2004), as well as national drug strategies in each country.

First, the present findings – including the high levels of drug use among prisoners combined with relatively low levels of help - strongly support improvements in the continuity of treatment and helping services before and after imprisonment, particularly in England - including:

- (a) substitute prescribing on entry to prison, coordinated with any community treatment services being attended prior to imprisonment. Methadone should be based at (research recommended) effective doses for realistic periods of time (i.e. maintenance on methadone or other opiates, as well as reduction and detoxification) - particularly to encourage more opiate addicts to identify themselves on reception, but also to reduce the numbers who turn to heroin inside prison;
- (b) routinely offering opiate users both naltrexone and perhaps naloxone on release – the former to prevent relapse, and the latter for emergency treatment of overdose (though the medical, legal and ethical aspects of this intervention require careful consideration);
- (c) setting up early appointments with outside drug agencies on release from prison - particularly fast-track entry at treatment agencies for methadone prescriptions. Drug clinics need to consider long-term prescribing for established criminal heroin addicts if their drugs-crime-prison spiral is to be effectively tackled. Indeed, the pilot heroin prescribing programme recommended in the Updated UK Drug Strategy in December 2002 is likely to

target repeat offenders - which will include ex-prisoners with a long history of crime and drug dependence.

Second, continued efforts to reduce the harmful effects of drug-taking by prisoners inside and outside prison are required, particularly preventing the spread of infectious diseases by IDUs - notably by providing (a) information about safer drug use and safer sex, (b) access to bleach/sterilising tablets for cleaning injecting equipment, and (c) hepatitis-B vaccinations. An experimental needle exchange programme is also worth considering (Hughes 2000).

Third, relaxation of prison drug testing (random testing of inmates' urine for illicit drugs) in England and Spain would arguably have more beneficial than detrimental effects. This suggestion has not been considered by many expert groups or official bodies, but is based on the reasoning that urine testing is an ineffective method of both detecting and dealing with drug use in prison – particularly use of heroin and cannabis, which accounts for much of prison drug consumption. That is, the human and financial costs of ordering inmates to provide urine samples and penalising those who test positive include: the strain on staff-inmate relationships, the drain on prison resources, extended sentences for a significant minority, and perhaps some cannabis users turning to heroin use (which offers them less risk of detection). In particular, extending the sentences of so many for such relatively minor offences in an overcrowded prison system is clearly counterproductive. A far less acceptable but equally relevant point is that it is widely recognised (though 'unproven') that cannabis use has an overall positive impact on the general mood and happiness of prison populations – and drug testing reduces this panacea. These costs of drug testing far outweigh the single 'positive' effect that the policy has – reducing the prevalence of cannabis use (the least problematic of all the drugs) while levels of heroin use are hardly affected (Edgar & O'Donnell 1998). Some countries are already moving away from prison urine testing for cannabis. In May 2002, the Correctional Service of Canada proposed to continue testing prisoners for cannabis, but to ignore positive test results except when the prisoner is considered to have drug problems. Their report "Proposed Modifications to Urinalysis Program," described cannabis as a soft drug that sedates prisoners, does not impair their cognitive function and reduces violence, adding that it has few side effects, is not a gateway drug and does not lead to dependence. The proposal would lead to fewer sanctions against prisoners who use cannabis, and fewer people being returned to prison as parole violators for cannabis violations. Cannabis users accounted for over half of all positive drug tests in prison, and about \$1.5 million (US) was spent on prison drug tests in 2000-2001.

Finally, experience of social exclusion among respondents, before imprisonment but particularly after it, was widespread on several key indicators, including employment, income, accommodation, and environment (e.g. access to technology). A high proportion were also disadvantaged by mental and physical health problems. There are signs that governments are beginning to deal with the problem of social exclusion – for example, a report by the UK Social Exclusion Unit (2002) proposed financial aid to released prisoners to cover initial accommodation, subsistence and other expenses. Although the solution will involve far more than providing jobs and homes, improving ex-prisoners lot on these two indicators alone would hugely reduce the problems they face on release. Unless we can offer ex-prisoners a lifestyle which fully includes rather than mostly excludes them from all of the main resources and rewards of society, we should not be surprised if many return to a lifestyle of drug-taking and crime - despite improvements in prison drug services and throughcare. This is because the drugs/crime scene is the only constant source of both 'work' and leisure opportunities for so many ex-prisoners, and is therefore a cornerstone of their social identity as well as a key source of income.

In conclusion, the present recommendations suggest that prison drug policy should flow from two principles: (1) offering drug-using offenders the same help inside prison as they receive outside prison, and (2) regarding drug use primarily as a health problem rather than a crime. This requires developing a strategy which both provides continuity of treatment and help for problem drug users - notably methadone prescribing and harm reduction – from reception to after release; and also which reflects a more relaxed attitude to the use of cannabis – particularly by ending testing for this drug.

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APPENDIX

Table A: Six studies of drug use and drug involvements among prisoners in England & Wales, 1995-2000 – before and during imprisonment

<u>Researchers</u>	<u>Type</u>	<u>Number of:</u>			<u>Sex</u>	<u>Yr</u>	<u>Before</u>			<u>During</u>		
		<u>Pri</u>	<u>Resp</u>	<u>FU</u>			<u>All</u>	<u>Her</u>	<u>Inj</u>	<u>All</u>	<u>Her</u>	<u>Inj</u>
Keene (1997)	Loc.	1	134	*119	M	95	74	12	28	75	10	14
Strang et al. (1998)	Nat.	13	1009	x	M	95	..	17	11	(62)	15	2
Singleton et al. (1999) ~	Nat.	131	3200	320	MF	97	..	..	13-28	25-48	..	<2
Edgar/O'Donnell (1998)	Nat.	5	148	x	MF	98	..	..	..	(50)	25	..
Burrows et al. (2000) #	Nat.	17	179	112	MF	98	..	66	..	75	53	..
Lewis/Mhlanga (2000)	Nat.	..	1900	*227+	M	00	..	32	..	54	29	<1

Type: Nat. = national Loc. = local Pri = number of prisons Resp = number of respondents
 FU = followed-up respondents – four studies interviewed after release, but only two reported figures for all drug use, heroin use and injecting: Keene (82%, 19%, 27%) and Burrows et al. (86%, 45%, na)

x = no interviews after release Yr = year study conducted

Before: typically the month before sentence (previous year in Lewis & Mhlanga)

During: typically the entire sentence up to interview (previous month in Edgar & O'Donnell; prior three months in Lewis & Mhlanga)

All = at least one drug () = bracketed figures indicate cannabis only rather than all drugs

Her = heroin (opiates in Strang et al.) Inj = injecting * different sample .. not available

~ ranges given for drug prevalence figures to incorporate four sets of statistics reported by this study for four groups generated by gender (male/female) and type of prisoner (sentenced/remand)

respondents had all received drug treatment in prison – hence the higher levels of drug use

+ = 302 of the original 1900 were interviewed 3 months later in prison, and some of this 302 were also interviewed after release (in addition to interviews with a separate released sample of 227)

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