

Alone and Waiting: The experiences of pregnant women in prison during the Covid crisis

As part of our work looking at Covid-19 responses with respect to parent infant contact and pre-birth assessment, we have heard directly from practitioners supporting pregnant women in prison. In sharing the details of their work during lockdown, a number of particular issues have been raised:

Women left waiting: delays in pre-birth assessment

Concerns regarding the variation in practices and timing of pre-birth assessments for women in prison pre-date the Covid pandemic. Whilst some local authorities travel, considerable distance to undertake pre-birth assessment work face to face, for other authorities this is a rarity. Instead, women are left waiting until very close to their due date before any pre-birth work commences. Understandably, this leaves many women anxiously waiting sometimes for many weeks to find out if they will be able to retain care of their baby after birth - in a prison-based Mother and Baby Unit or in the community - or if they will be separated from their baby soon after birth. In some instances, this decision may not be made until after the baby is born.

It appears that these issues and variations in practice have been exacerbated by the Covid crisis. Following lockdown, all visits to prisons were suspended leaving many pregnant incarcerated women facing uncertainty as to when and how any assessments might take place.

In one example, a practitioner explained:

“the woman had applied for her mother and baby unit place in (x) prison when she was eight or nine weeks pregnant and thirty weeks later she still didn’t know where she stood. She was being induced for medical reasons and she gave birth and still didn’t know if she was going to be separated from [her baby]”

In some cases, where women had had previous children removed from their care, it appears that little or no assessment had been undertaken and rapid decisions were being made based on historical information. In one example, a mother who had had two previous babies removed re-entered prison in the early stages of her next quick succession pregnancy. The mother only had one phone call from children’s social care during this pregnancy, and yet based on previous assessments relating to the mother’s older child, the local authority plan was for separation at birth. Despite her obvious vulnerability, no support was made available for this mother when she received the news regarding the plans for this baby.

‘Bombardment’: Assessment in a hurry

Very few pregnant women have left prison under Covid-related early release schemes but many have been released ‘business as usual’ during the pandemic. Those released close to their estimated due date have then faced a period of intense assessment in difficult circumstances and in a very short timescale, leaving very little time to show demonstrable change.

“Lockdown happened and no one has been allowed to visit the prison since then. So none of those face to face visits (from the social worker) could take place...She was released when she was 31 weeks pregnant and she then had all this catching up to do. Coming out of prison is difficult under normal circumstances let alone coming out heavily pregnant and suddenly being just bombarded with appointments.”

Separation and release

The particular vulnerability of women who face separation from a baby during or shortly after a prison sentence was also discussed. Practitioners shared several examples of pregnant women and those who have recently been separated from their children being released from custody shortly before or after this traumatic experience. Issues regarding continuity of care and support services, homelessness, financial hardship, return to abusive relationships or other situations of risk are all of heightened concern in this ‘through the gate’ transition period, with the pandemic situation adding even greater complexity.

Intimate work at a distance: virtual assessments

Where pregnant women remained in prison under lockdown, they faced intense isolation, spending more than 23 hours a day in their cells and unable to access their key support network. In most prisons, video calls were not supported and conference calls not facilitated. This made meaningful involvement in multi-professional meetings such as child protection conferences very challenging for women. In one example, a practitioner reported having to wait to receive postal mail from the women she supported in prison, as they could not afford to make phone calls. This clearly raised issues regarding delays in pregnant women accessing information and support. In some examples, this meant women receiving complex communications regarding the local authority’s decision either by post or by phone with no support immediately available.

For those undergoing assessment there was little option other than social work assessment by phone. Under time and resource pressures it appears, in some cases, that relationship-based practice became an ill-afforded luxury.

“She was completing all these parenting assessments over the phone....and because of her history the social worker was having to ask her some understandably difficult questions about her childhood, her trauma, everything she has lived through, over the phone in a room without anyone there to offer her support. In quite an artificial setting and with the time pressures her social worker was under she just asked her the questions about historic abuse and how she would protect her baby from similar abuse.”

The practitioner expressed her concern about the woman’s obvious isolation and vulnerability.

For others the virtual assessment worked well and allowed them to feel more confident to express themselves. In one case, a woman who completed her assessment after release from prison found the experience more comfortable:

“She actually liked the format, she liked the fact that people couldn’t see her, that they weren’t judging her based on her appearance and it was just what she had to say. And she was able to speak from the heart with her mum next to her. Her Mum would not have been able to be there had that taken place in prison.”

Fractured motherhood: contact stopped

There are longstanding difficulties surrounding contact arrangements for women returning to prison custody following separation from their baby at birth. However, during the Covid crisis all contact between women in prison and their infants has ceased, regardless of the care arrangements. For some women this has meant separation from their baby within hours of birth and then no contact for several months. Faced with the prospect of more than 23 hours a day in their cells without access to the usual support provided by mental health services, charities and peers, this places already vulnerable women at heightened risk. In one example, a mother who had been in a mother and baby unit with her baby for 18 months was forced to place her child with a family member shortly before lockdown as she was unwell and unable to care for him. Whilst the mother quickly returned to health, the baby was not returned to the unit because of Covid restrictions. The mother and her infant were then unable to have any face-to-face contact throughout lockdown. Given the child's age and particular circumstances, this meant an abrupt and traumatic disruption to the attachment at a crucial developmental stage and was hugely distressing to both mother and infant.

While many of the issues raised in these interviews, including assessment delays and face-to-face contact for example, resonate with experiences shared with us regarding families in the community, these conversations also highlight the particular complexities and vulnerabilities faced by women in prison, and those leaving prison during the pandemic.