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LOCKED IN AND LOCKED DOWN – PRISON LIFE IN A PANDEMIC

EVIDENCE FROM TEN COUNTRIES



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MAY 2021

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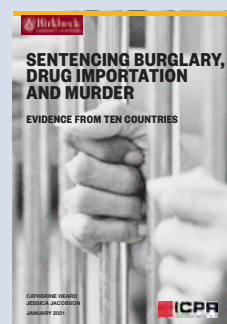
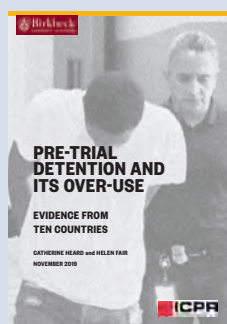
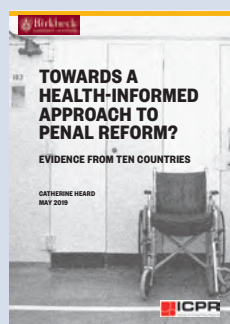
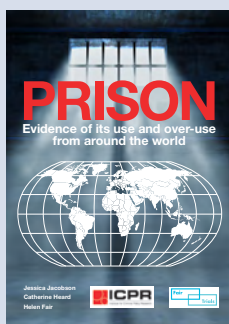
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Catherine Heard

Director, World Prison Research Programme, Institute for Crime & Justice Policy Research

SUMMARY

When COVID-19 was declared a pandemic on 11 March 2020 the need for rapid action in prisons to avert a public health disaster was clear. There were warnings of the risks to prisoners, prison staff and others coming into contact with them, if outbreaks occurred in prisons. The pandemic emerged at a time when most countries' prison systems were running above their official capacity, after decades of rising prisoner numbers in much of the world. Risks were especially high in countries with overcrowded prisons because of cramped accommodation, low staffing levels, and poor sanitation and healthcare standards.

In this report we present evidence of how life in custody changed as a result of the global health emergency, drawn from over 80 interviews with prisoners, ex-prisoners and their loved ones, which we and our research partners conducted before and during the pandemic.

From early March 2020, prisons across the world quickly locked down, closing their doors to visitors. Prisoners were abruptly deprived of family and social contact, legal advice, visits from volunteers and monitoring bodies and other sources of support. Rehabilitation, work, education and other routine activities largely ceased. Prisoners spent long periods locked up with little or no social contact. These highly restrictive prison regimes have now been in place for the best part of a year in many countries.

As the world outside struggled to come to terms with anxiety and social isolation in the midst of a major public health crisis, the deprivations experienced by prisoners and their families have been especially acute. Unable to observe social distancing or other basic safety measures in cramped, insanitary conditions, worrying about their own and their loved ones' health and wellbeing, and with little or nothing to do, prisoners have experienced prolonged distress and isolation. For many, the impact will extend beyond the duration of the sentence.

At the time of writing, infection rates remain high in much of the world and are at record levels in some of the countries discussed in this report. Restrictive regimes remain in place in many prisons, and have doubtless helped to contain infections and deaths. It is too early to judge how these gains weigh up against the associated social and psychological harms and lost rehabilitation outcomes.

What is already clear is that the health and social impacts of the pandemic and the measures taken to contain it will prove more severe in countries with overcrowded, under-resourced prisons. Limited physical space and infrastructure and inadequate staffing levels will have placed more constraints on (already stretched) provision of rehabilitation, education, work, visits and social interaction than would have been necessary otherwise.

There are indications that in many countries there has been some decline in prisoner numbers as a result of lockdowns, fewer arrests and court hearings, and measures to reduce the size of national prison populations. This positive outcome will need to be sustained in the longer term by means of deliberate decarceration policies. Reducing prison populations is the single most effective strategy to contain the public health risks presented by COVID-19 and other contagious diseases, without causing unnecessary collateral damage to the mental and physical health of prisoners, prison staff and their families.

1. INTRODUCTION

By the time the World Health Organisation had declared COVID-19 to be a pandemic on 11 March 2020, the potentially grave public health risks presented by prison settings were already clear. Experts warned of the prison's 'petri dish' qualities and its capacity to act as an 'epidemiological pump'.¹ Penal reformers and human rights organizations called for immediate steps to be taken to reduce prison overcrowding and to safeguard – or release – chronically ill or otherwise vulnerable prisoners.

There was widespread acceptance of the need for rapid action to limit the risk of infection inside prisons and between prisons and communities. By late March 2020, prisons throughout the world had taken a variety of measures to this end, which typically included suspending social and family visits to prisons and halting prisoners' temporary leave for home visits, external work placements or other previously permitted purposes. Activities that had been part of the daily prison routine were greatly reduced, or stopped altogether, in an attempt to limit the influx of people from outside the prison. Visits from lawyers, monitoring bodies and voluntary organizations were suspended. Time outside the cell for exercise and association was significantly curtailed. Even when restrictions on social interaction had been lifted in wider society they often remained in place, with even harsher consequences, in custodial settings.

In this report we present first-hand accounts of the impacts of what has in effect been a 'double lockdown' – a state of affairs that remains in place in many countries over a year later, with potentially devastating consequences for prisoners and their families.

1.1 Background

This is one of two final reports in a series produced under the international comparative research and policy project 'Understanding and reducing the use of imprisonment in ten countries'. The overall aim of the project is to help bring about a sustained reduction in the use of imprisonment, and thereby improve rehabilitation outcomes for (reduced) prison populations and enhance the health and wellbeing of prisoners and prison staff. The countries covered by the project span five continents; they are Kenya, South Africa, Brazil, the USA, India, Thailand, England and Wales, Hungary, the Netherlands and Australia.²

Most of the work on the project was conducted prior to the pandemic, but the latter stages of our research coincided with this unprecedented global health emergency. We have thus had the opportunity to examine the impact of the pandemic on prison systems and prison life in close detail.

One component of our 'ten country' research was a series of semi-structured interviews with prisoners and others with lived experience of imprisonment in these countries. Over 40 of these interviews were conducted prior to the pandemic: with people who were either in custody (the majority of them sentenced prisoners) or had recently been released from prison.³ These pre-pandemic interviews focused on individuals' experiences of imprisonment. Many interviewees spoke of the mental or physical health impacts of their prison experience: their descriptions of the hardships

1 See for example, the Prison Reform Trust's [submission](#) on Covid-19 to the Justice Committee (2 April 2020), and a [podcast](#) by the *Justice Gap* magazine, 'Prisons and Covid-19 "the perfect petri dish"'.

2 For more information on the project and to see all publications, visit: <https://www.prisonstudies.org/ten-country-prisons-project>.

3 Before the pandemic, we and our partners conducted prisoner and ex-prisoner interviews in five countries: Kenya, South Africa, Brazil, Thailand and the Netherlands. The global health emergency made primary research more difficult but, between August and November 2020, we conducted further lived experience interviews in India and Hungary, and supplementary interviews in the five countries where we had previously interviewed. For the jurisdictions where we conducted no primary lived experience research – England & Wales, Australia and the USA – this report draws on a selection of other reports on those countries published during the pandemic and containing lived experience accounts of the impacts of restrictive regimes.

they endured in often cramped and squalid living conditions were featured in our report, *Towards a health-informed approach to penal reform: evidence from ten countries* (Heard, 2019).

After the pandemic was declared we rapidly assessed the measures being taken by prisons around the world to contain the risk of COVID-19 spreading within and beyond their walls.⁴ With our research partner, the NGO [Prison Insider](#), we interviewed policy and practitioner informants in the ten countries and examined in detail the measures being taken by their respective prison systems. Our findings are summarised in the report, [Keeping COVID out of prisons: approaches in ten countries](#) (Fair & Jacobson, 2021).

We also conducted a further 43 interviews with people who had been in prison, or had a close family member in prison, at or after March 2020.⁵ These interviews sought to understand how prisoners' health and wellbeing were impacted by the additional and often heavy restrictions imposed on their daily lives, relating to: family and social visits and other forms of communication with people outside the prison; time outside the cell; and access to education, training, work, exercise and rehabilitation programmes. In three of the ten jurisdictions where no such primary research could be conducted (England and Wales, Australia and the USA), we instead reviewed selected reports containing descriptions of how prisoners were impacted by restricted regimes, including formal inspection reports and academic research.⁶

While the material presented over the course of this report is drawn from ten countries, all the issues addressed have wider international relevance. Prison systems around the world have faced the same challenges associated with the pandemic, and prisoners everywhere have suffered the effects of their 'double lockdown'.

1.2 Structure of this report

In Chapter 2 we present our research findings about family and social visits to prisoners in the ten countries, both before the pandemic and from March 2020 when they were in large part suspended. We discuss prisoners' reliance on in-person visits, not only to maintain contact with loved ones but also as a means of supplementing often meagre supplies of food, medicines and other essentials while in custody. We present accounts of how prisoners and their loved ones experienced substitute forms of communication, such as video calls.

In Chapter 3 we discuss the effects of the cessation of visits on prisoners' ability to communicate with their legal representatives. Chapter 4 describes how the severely restricted regimes in place from March 2020 impacted prisoners' daily routines and time outside the cell. In Chapter 5 we present accounts of the impacts of these prolonged restrictions, including violent protests and riots in some countries, and almost universally profound effects on individuals' mental and physical health and wellbeing.

Chapter 6 contains our reflections on whether prison administrations have struck the right balance in their responses to the severe public health threats posed by COVID-19 in custodial settings. Lessons are drawn from the research for mitigating the impacts of restrictions and responding adequately to the associated harms, in view of the pandemic's likely continuation in some form, for months or years to come.

4 We compiled international and regional guidance and monitored news coverage via our World Prison Brief site, on the dedicated [webpage: COVID-19 in prisons](#).

5 Of the 43 interviews conducted during the pandemic, 32 were interviews with serving or recently released prisoners and 11 were with partners or close relatives of people in prison. See further footnote 3 above.

6 See footnotes 3 and 5 above.

2. FAMILY AND SOCIAL VISITS

The right of prisoners and their families or other loved ones to maintain regular contact while the prisoner is in custody, whether by means of in-person visits, letters or other available forms of communication, are recognised under international law. (For the relevant standards and guidance on their implementation in practice, see Coyle & Fair, 2018.) This reflects the importance of maintaining contact, both for prisoners' health and wellbeing while in custody, and as an aid to effective reintegration into society.

2.1 Visiting before the pandemic

In our interviews with prisoners and ex-prisoners both before and during the pandemic, a recurring theme was the importance of regular contact with family members and other loved ones: visits were described as a source of hope and positivity, something that helped foster future planning focusing on a better life. Prisoners we interviewed before the pandemic frequently said that the worst thing about being in prison was being separated from their loved ones.

There was, though, much variation between the countries before the pandemic in how frequently prisoners had received visits from loved ones, and the types of visits that took place.

In South Africa, prisoners said they had typically received up to five visits per month before March 2020. In Brazil and India, the interviewees said they had received visits once or twice per month before the pandemic. The Dutch prisoners had received visits weekly, as well as unsupervised conjugal visits each month. In Thailand there is a communal visiting system whereby visitors assemble outside the perimeter fence to see and communicate with prisoners in the yard, several times a week for about twenty minutes a time. Private visits within the prison walls would also take place but were limited to one or two such visits a year for each prisoner. A small-scale Australia-wide study found that two thirds of respondents surveyed found the availability and quality of in-person visits to be good, with weekly visits common (Flynn et al, 2020).

Of the Kenyan interviewees, three had received visits every one to two months before the pandemic. The other six had only received between one and three visits annually due to the distance family members had to travel to reach the prison. For them, visits by voluntary organizations and opportunities to attend church services outside the prison had been especially important.

The time and travel costs families shoulder to visit their loved ones often have to be weighed up against the benefits of an in-person visit, along with the complex and stressful visiting procedures typically imposed on visitors (eg Scharff Smith & Jakobsen, 2014). In a monitoring visit in 2019 the Correctional Association of New York found visitors waiting up to two hours to clear security before being shown into visiting rooms containing concrete barriers and long steel tables separating them from their loved ones (Correctional Association of New York, 2020a).

2.2 Suspension of visits during the pandemic

Interviewees in most countries confirmed that family and social visits were completely suspended from mid- to late March 2020, in the wake of the pandemic being formally declared. When our interviews took place (between August and November 2020), many prisoners had not had a visit for several months.

In Thailand the communal visiting system remained in place in some prisons but was shortened from twenty to ten minutes per day. Private family visits were halted. In England and Wales all face-to-face

visits stopped in March 2020, resuming on a highly restricted basis in June (with shorter and less frequent visits and no physical contact). By November the full ban was back in place as the general population returned to lockdown. In the USA the picture was much the same.

Almost all the interviewees said they had been adversely affected by the restrictions on visits and in-person contact with others from outside the prison.⁷ This was often described as a real hardship, especially for prisoners and families who had been used to regular visits before the pandemic. A South African prisoner who had nine children said his family were not adapting well to monthly visits of 30 minutes with just one person allowed to attend. People experienced feelings of sadness, depression, frustration, loneliness, stress and anxiety, during what was already a worrying time. (We describe their accounts of these impacts in more detail in Chapter 5.) The sudden suspension of visits also meant going without essential items like medicines and extra food supplies in some countries, as described below.

2.3 Visits as a source of essential items

Before the pandemic, in-person visits were an opportunity for prisoners to receive essential goods lacking in custody, including food, medication, clothing, hygiene and sanitary supplies. Visitors would also bring money and top up prisoners' payment accounts. In the Netherlands, visitors would bring in clothing and shoes. South African prisoners said that they had relied on visits for medication, clothes for court visits, soap, deodorant, washing powder, books, and cash:

The lack of visits hurt us financially as the [prison] shop prices are extremely high. (South Africa)

Brazilian prisoners would rely on visits or parcels from family members for their medication, sanitary products and extra food supplies. One interviewee said:

Our governor used to say the food we got wasn't meant to stop our hunger, just to keep us standing. Visiting days were the one day the prisoners could be well-fed. (Brazil)

The Indian prisoners we spoke to said they had relied on visits including from local charities⁸ to bring in food, medicine and sanitary items. According to one:

During the last six months, no one has come for family visits so we have had no clothes, no sanitary towels. There is no cleanliness here. Water is scarce, hence, how to wash hands or take bath and how do we wash clothes? Conditions are very over-crowded, so how to maintain social distancing? Also, there's no medical facility here. Essential items are not available in the canteen. (India)

Similar accounts came from Kenya, where most of the interviewees reported going without essential items during the pandemic due to the lack of visits. One said:

My family are poor and cannot stand on their own. [Before the pandemic] I relied heavily on the donations from outside, and from what other prisoners' visitors brought in. Visitors brought us soap and toiletries. They brought even milk and snacks for the children. (Kenya)

7 The Thai prisoners alone said that they did not feel negatively impacted by restrictions on visiting. This may be because all of the post-pandemic interviewees were serving sentences of less than three years; and the yard visit system remained in place. In fact none of the 13 prisoners interviewed in Thai prisons in the course of the project offered any negative criticism of the regimes they were held in, although some were unhappy with their trials or sentences.

8 (many of whose operations were heavily restricted in 2020 due to the pandemic)

2.4 Non-contact visits and remote communications

Visits remained suspended in most countries' prisons for several months into the pandemic. However, at different points from July 2020 onwards, prisons in a few of the countries began introducing highly restricted forms of visits, including with limited numbers allowed, shorter visiting times, and with physical contact prohibited (with visits taking place behind glass screens, for example). In the Netherlands, interviewees confirmed that visits behind plexiglass were permitted from July, limited to one hour per week, with either two adults or one adult and one child allowed to attend.

These highly restrictive forms of visit introduced in some countries a few months into the pandemic were described as difficult or impossible by some interviewees.

I can't see my kids if it's one person per visit: what about my six year-old daughter, what if she cries at a visit? She will be on the other side of the window alone. (South Africa)

In some countries, alternative means of communication were made available to compensate for the lack of in-person visits, including internet-based voice or video calls (such as via Skype), or additional time or calling credit for phone conversations. In England and Wales, a bespoke video-calling system was introduced in some prisons (but encountered technical problems, see below). In-cell phones were also rolled out more widely; an intervention which prisoners welcomed as a vital means to keep in touch with the family (HMIP, 2021), although provision remains patchy across the prison estate.

In Hungary, all ten of the partners and close relatives of prisoners interviewed confirmed they could Skype once a week for 20 minutes with their loved ones in prison, as well as being able to talk by phone and exchange letters. In the Netherlands, the six interviewees confirmed that Skype calls were permitted, once per week of 30 minutes' duration, along with phone calls (with two of the prisoners having in-cell phones and the others having to take turns to use phones on their wings). One interviewee said that having the phone in his cell was helping to bring her partner out of the low moods he had experienced in the initial phase of the pandemic:

He is really withdrawn and not doing too well. He used to be really outgoing and chatty and he is not like that any more.... He has recently started working out in his cell and is looking better. And the fact that he now has a phone in his cell has improved his mood. (Netherlands)

The partner of another Dutch prisoner said that she and her partner found Skype calls easier than non-contact visits through glass:

He misses physical contact and hates seeing me and our daughter through glass, he wants to touch us. This is why he has said we had better meet through Skype and I agree. He is really emotional about it all. He says it is so difficult that we are so close, but he can't touch. The last time we went to see him, in September (with my daughter), he walked out of the meeting towards the end because he could not cope. (Netherlands)

Two other Dutch prisoners' partners also stated that they had opted for Skype calls rather than non-contact visits, for similar reasons.

Most respondents in the Australian survey reported having engaged in some form of non-contact visit (largely phone calls and video calls) (Flynn et al, 2020). Availability of video calling was patchy, but even where it was available many respondents said their children did not want to take part in calls or found the lack of physical contact upsetting. However, a minority pointed to advantages over

in-person visits, including the saving of travel time and costs, not having to take children into the frightening environment of a prison, and having more privacy. For some families, in-person visits being replaced by video calls was a mixed blessing:

[The children] obviously miss the physical contact, but at the same time they get to interact with him in ways they can't on a contact visit, they love being able to show him around the home. (Australia: in (Flynn et al, 2020))

Other Australian research suggests cultural disparities in the impacts of the shift to remote visits. A survey by Corrective Services in New South Wales indicated that 90% of the 5,000 respondents questioned were satisfied with their experience of family video visiting, and 85% wanted video visits to continue beyond the COVID-19 visiting restrictions.⁹ But another (smaller) survey of First Nations prisoners and their families in New South Wales found harmful consequences from the lack of personal contact (and prison activities) under COVID-19 restrictions.¹⁰

For some prisoners, video calls had real drawbacks when compared with in-person visits. As one mother of prisoners in Brazil said:

A virtual visit is not a real visit. The prisoner has no privacy. Next to the prisoner, there is some technician and behind him there are two prison officers. If the prisoner says anything that they don't agree with, the connection is cut. And people who don't have a good internet connection can't join video calls. They should have just let them use WhatsApp but instead they introduced a complicated video programme that many families can't download. (Brazil)

For prisoners in some countries, what was provided by way of alternatives to visits was too little, too late.

The phone came in August just as I was about to leave prison. I called home twice. (Kenya)

The phones are broken, or it gets cut off if there is any disruption. (South Africa)

In England and Wales, prisoners complained that just one 30-minute video call a month (all that was offered at some prisons) was too little. Technical problems such as the picture repeatedly freezing and set-up issues experienced by family members, were also cited (HMIP, 2021).

Interviewees in Kenya, South Africa, India and Thailand said that they had had no access to video calling facilities during the lockdown. Several said they could not make telephone calls either, often simply due to the lack of funds to pay for them, because they had relied on visits from loved ones for cash to pay for phone credit and other essentials.

Sending and receiving letters and parcels was also suspended or restricted in several countries. In Brazil, prisoners said parcels were no longer allowed, and that each letter was now limited to one or two sheets of paper. (Letters were completely suspended in another Brazilian prison.) Kenyan interviewees also said letters to and from prisoners had been suspended.

⁹ Department of Communities & Justice, New South Wales (2020), 'CSNSW officers enable 100,000 family video visits for inmates', [Media release](#) 10 September, NSW Government.

¹⁰ Cited by T Anthony in 'Indigenous prison rates can fall fast: here's the proof', *Sydney Morning Herald*. 7 August 2020.

3. VISITS FROM LAWYERS

The right to remain in contact with their lawyer, and to communicate in private about their case with the legal adviser, is of paramount importance for prisoners. It is particularly important for prisoners whose cases have not reached trial or final sentence. Legal representation is an important safeguard against the risk of excessive time on remand. Regular contact with a lawyer is also vital for prisoners who are applying for parole; without it, eligible prisoners who no longer present a risk could remain in prison simply because, without legal assistance, they cannot present a strong case to the parole board.

However, it is an unfortunate reality that many suspects, defendants and prisoners do not receive legal representation, publicly funded where the individual cannot afford it. As the United Nations Office on Drugs and Crime recognised in a 2016 [study](#) on access to legal aid (at page 166): ‘[A]lthough many countries recognise the right to legal aid for criminal defendants who cannot afford a lawyer, in practice, many poor and vulnerable accused persons are unable to exercise their right to effective legal representation.’ (UNODC, 2016)

Before the pandemic our prisoner interviews indicated that access to legal representation had been patchy or non-existent in a number of countries in our study. Where there had been access, this was impeded from March 2020, when the restrictions on visits to prisoners generally extended to visits by legal representatives, at least in the initial months of the pandemic. Provision of alternative means to communicate in confidence with lawyers was far from universal.

In South Africa, prisoners said there had been a complete cessation of lawyers’ visits from March to August 2020, whereas before the pandemic they had been free to arrange visits from lawyers without restriction. One prisoner said that two appeal hearings in his case had taken place during since March 2020, but he had not been permitted to discuss them in advance with his lawyer, or learn the outcome of the appeal. Another admitted having been in touch with his lawyer about a decision in his appeal, through use of an illegal mobile phone. From September, prisoners were entitled to (at most) one non-contact legal visit per month lasting up to one hour.

In Brazil, some interviewees said they had received visits from their lawyers whenever necessary before the pandemic, while others said legal visits had been infrequent. Following the suspension of visits in March 2020, some prisoners said they could communicate with their lawyers via video link but that they feared confidentiality would be at risk so this was an inadequate substitute for in-person visits.

Prisoners in India also reported varying levels of access to their lawyers before the pandemic, but most had had fairly regular contact. After March 2020, most communication appeared to cease, although one prisoner stated that contact had continued by phone.

In the Netherlands, we were informed that contact with lawyers had remained possible throughout the pandemic but generally took place by phone and letter, and occasionally in person behind glass. One prisoner’s partner said a lawyer had wished to visit the prisoner in custody but had only been permitted to communicate via video call, which had caused difficulties with preparing an appeal due to fears over confidentiality, as well as issues with call quality.

In England and Wales, one impact of widespread court closures during the pandemic has been an increase in the amount of time many remand prisoners are spending in custody awaiting trial. Prisoners have also complained that a complete bar on in-person legal visits meant having to call lawyers at their own expense, with the duration of calls capped, leaving insufficient time to give instructions or receive advice (HMIP, 2021).

Perhaps the most troubling reports came from the Kenyan interviewees. Of the nine prisoners and former prisoners we interviewed who had been in custody during the pandemic, six had never had any form of legal representation at any point in their case, whether before or after March 2020. One of these six had been in prison for seven years, and another for five years, making this total lack of legal representation all the more concerning. Of the three interviewees who had been legally represented, two said they had met their lawyers at least monthly before the pandemic, thereafter only communicating with them by phone. The third had only ever met her lawyer twice during five years in prison.

4. ACTIVITIES AND TIME OUT OF CELL

During our pre-pandemic research interviews, prisoners often described how important it was for them to be able to work or take part in training and education. They said that work and other activities made their prison sentence easier to bear, helping to keep boredom at bay and giving purpose to the day. For some, work had been an important source of income to buy essentials, or a means of providing something for the family.

4.1 Before the pandemic

Unsurprisingly, we found wide variation across the ten countries in how much time prisoners would generally spend locked up or engaged in activities before the pandemic. In South Africa, one prisoner reported having spent up to 19 hours a day locked up, whereas others reported having been allowed out of their cells or dormitories for between four and eight hours a day. In England and Wales the 2019 annual report of HM Inspector of Prisons said most prisons were locking people up for far too long ‘to the point of solitary confinement for a few’ and that there were very poor levels of purposeful activity available (HMIP, 2020).

By contrast, in Kenya, Brazil, India and Thailand, prisoners we interviewed said that before the pandemic it was only during night time hours that they were confined to their cells or rooms (which in these countries were, typically, overcrowded communal cells or dormitories). During the day, they would be out of their sleeping areas for several hours, engaging in activities, taking exercise, receiving training, and working in libraries, canteens, factories, workshops or farms within the prison, or as prison cleaners, or (far less frequently) working on day release outside the prison.

4.2 Restrictions during pandemic

The pandemic severely curtailed out-of-cell activities in the ten countries, including opportunities to associate with other prisoners, spend time in the open air, take part in education, training, religious services, work or sports, access health services, or attend health, dental or eyecare appointments outside the prison.

Staff from outside agencies, such as charities, who had previously come into prisons to train or supervise prisoners at work, largely suspended their operations in prisons. Prisoners eligible for temporary leave on licence (for work or family visits) said these periods of leave and visits were no longer allowed after March 2020. Prisoners described several adverse physical, mental and financial consequences from the resulting lack of activity.

I spend 23 hours a day in the cell. There are no programmes, no education. The pandemic has severely affected our livelihood ... The only work available is kitchen and bakery. (South Africa)

All my working activity stopped because the companies stopped coming into prison, so I could no longer provide for my basic needs like I could before. (Brazil)

Work did not entirely come to a halt as a result of the pandemic, at least in some countries. In Kenya prisoners were simply moved to different areas of work:

Before the pandemic I worked in the day-care centre for prisoners' children, then it was closed and women had to care for their own children. I was transferred to farm work. There was no education or training. Those who worked as cleaners or on the farm continued as before. (Kenya)

Work the male prisoners had done like log-splitting was done by women during pandemic. (Kenya)

Even where limited access to work remained available (for example, in England and Wales, the Netherlands and Kenya), social distancing requirements in work areas or the need to reduce prisoner circulation around buildings reduced the time prisoners could spend working or in recreation, and often meant more time locked in the cells.

Interviewees in several countries said they had hoped that prison would offer them opportunities to access skills training or education. This is perhaps an indictment of the disadvantaged backgrounds of most prisoners, who may previously have had minimal access to education, training or work. The COVID restrictions brought an abrupt halt to many prisoners' progress with studies or efforts to obtain vocational qualifications. The partner of a Dutch prisoner said he had arrived in prison wanting to take whatever was available but, instead, was spending only two hours a week in recreation activities and no time in education or training. South African and Indian prisoners made similar points:

I came to this prison [hoping to] acquire skills. But it is turning out to be a challenge. Here they open our cells at 8am and they provide their dirty unhealthy food at 12.00. Then at 1pm we are locked in the cells again. (South Africa)

Before the pandemic I learned computing and painting with help from [name of NGO]. We spent 12 hours outside our barracks each day. Now there is no education and no work and we are in complete 24 hour lockdown. (India)

The partners of Dutch prisoners presented a similar picture (although one said the situation was beginning to improve).

Everything was taken away – sport, work, contact with other inmates, lawyers, therapists and families. He is very frustrated. But cells are open now from 9 to 5 at least on weekdays. There's some access to training, and he gained a certificate as a dog trainer a few weeks ago. (Netherlands)

Before the pandemic he had sports, and courses in Spanish and bookkeeping, and was out of his cell from 7.30 am to 4.45 pm. Then everything was cancelled. He spends 18 hours a day in his cell. (Netherlands)

Prisons in several countries missed what was an obvious opportunity to provide learning materials to inmates with so much time on their hands.

In England & Wales, a study conducted by the Prison Reform Trust found patchy provision of education materials and alternative activities (Prison Reform Trust, 2020). One prisoner quoted in a briefing on this study said:

I feel that there was a national prison service knee-jerk reaction and no thought was given to alternatives. Some activities could have continued with smaller groups to maintain social distancing. As it is we have empty classrooms, workshops and association rooms. (England & Wales, in (Prison Reform Trust, 2020))

Likewise, Thai prisoners reported spending 15 hours a day in communal cells watching TV, with all work, recreational and cultural activities cancelled. In India:

Watching TV is the only means of engagement we have. Before the pandemic we had everything we needed for reading, writing, learning. (India)

Kenyan prisoners highlighted the importance of outside organisations which provide access to activities and training.

We used to have library study and book clubs to keep us busy, but all that stopped. We had less movement round the prison. (Kenya)

Visits from supporting organisations were stopped, even church visits were not allowed, there were no classes, we were locked in wards all the time except meal times. (Kenya)

I could not attend any trainings, go to church or talk with other prisoners. (Kenya)

For prisoners in some countries, there was another adverse consequence of being denied access to activities and programmes. It robbed them of the opportunity to demonstrate good behaviour or rehabilitation and made it harder to prepare for release. Unable to spend time in education, programmes, workshops, or a job on the wings, and no longer permitted temporary leave, prisoners had almost no way to demonstrate their progress in custody. In England and Wales, for example, they feared this would reduce their prospects of being re-categorised, transferred to an open prison, or released by the Parole Board, because there would be nothing to inform the relevant risk assessments or recommendations (HMIP, 2021).

5. IMPACT OF RESTRICTIONS

In the first months of the pandemic, levels of anxiety – across most sectors of society – were high and many people struggled to adjust to the new realities of a global health emergency. The abrupt imposition of highly restrictive regimes with significant reductions on prisoners' activities and interactions would, in any circumstances, have had major consequences. But in the febrile and uncertain weeks after early March 2020, these new restrictions led to protest, disorder and serious violence. As the weeks turned into months, what became a protracted 'double lockdown' took a heavy toll on the mental and physical health of those in custody.

5.1 Protest, violence and disorder

There were frequent media reports of protest, disorder and conflict in prisons around the world in the initial weeks after prisons closed their doors to visitors. Many of the individuals we interviewed described similar problems. Anger was focused on the abruptness and totality of the lockdowns, and on the failure of prison management to communicate effectively with prisoners about why the measures were needed, how long they would last, or when prisoners would get proper protection from the virus.

In South Africa one prisoner described 'awful gang warfare, riots and violent incidents daily', and another spoke of inmates scaling walls and climbing onto the roof, and ferocious attacks on guards and fellow inmates. There were hunger strikes and other forms of disorder. A nationwide ban which the South African government had imposed in late March on the sale of cigarettes caused frustration, which some interviewees believed had exacerbated tensions. One prisoner said that after a violent initial phase involving 'huge resistance' to the restrictions, talks were initiated with management. After this, information was provided more transparently, extra supplies of soap and sanitiser were handed out and people began to live with the situation, accepting that the rule changes were for their own protection.

In Brazil, angry protests marked the start of the restrictive regime, with criticism of the government for suspending home leave and visits whilst allowing annual carnival festivities to proceed. One ex-prisoner described feeling 'outrage against the state and the system' for not offering any alternative means to stay in contact with family members. A refusal by prisoners in one prison to go back to their cells led to more generalised disorder, which was subdued by a rapid intervention force using rubber bullets. Prisoners who had protested were beaten or placed in solitary confinement.

Riots also occurred at Australian prisons in the initial weeks after lockdown restrictions were imposed. One official described an incident at a New South Wales prison as 'one of the worst riots we've had in 20 years' and speculated that the cause was frustration at the supply of drugs being interrupted.¹¹

In England and Wales reports have suggested that with so little time out of cell, prisoners had less opportunity to fight: however, HM Inspector of Prisons was informed that violence, intimidation and bullying had not stopped, but had merely 'taken other forms' (HMIP, 2021). Women prisoners said they were seeing more tension, anger and behavioural problems emerge as restrictions became more prolonged. The level of boredom and the empty days had led to some women picking on others as a way of passing the time, and what might otherwise have been seen as trivial incidents were amplified.

¹¹ Riot at Wellington Correctional Centre over Easter weekend, 13 April 2020, Taylor Jurd, Wellington Times <https://www.wellingtontimes.com.au/story/6720458/riot-at-wellington-correctional-centre-over-easter-weekend/>

In the Netherlands some interviewees reported fights breaking out and aggressive behaviour towards staff in response to restrictions on visits. In some Dutch prisons, protest took the form of hunger strikes and formal complaints to management. Anger at the loss of personal contact with loved ones and a refusal to accept the measures as necessary were seen as the main cause of protest. Insufficient or broken telephones, problems with video calling, the cancellation of education and other activities, and the increased number of hours spent locked in cells, were further causes of unrest (and were the subject of formal complaints). One interviewee said illicit drug supplies had dried up, leading to increased trade in prescription drugs as well as use of 'home-made' drugs created from cleaning liquids and other chemicals.

A Dutch interviewee described a group of prisoners agreeing a strategy to list all their concerns in a letter to management, after which things improved:

As a result, the cells were opened during the day. The prison management were very reasonable. They did not punish the inmates for voicing their concerns and this had a good effect on the inmates: no more fights broke out. They stopped swearing and shouting at the guards. (Netherlands)

In India there were fewer accounts of resistance; and more of resigned cooperation. One Indian prisoner said that all the inmates had gone on hunger strike in protest at the cancellation of visits and activities: 'Then the prison said they'd arrange facilities for us all to make phone calls, so we promised to cooperate and follow the rules'. However, echoing the report on England and Wales (above), one inmate of an overcrowded women's prison in India said: 'There's only abuse and conflict, the women fight, even over minor things.'

The Kenyan prisoners said that there had been little resistance and much cooperation, largely due to fear of the virus.

5.2 Physical health

Several interviewees expressed concern that their physical health and wellbeing had been adversely affected by the lockdown and shortcomings in the basic support and services provided to prisoners.

In England and Wales (as in many other countries) healthcare services were reduced to emergency provision only. Important services like dentists and opticians remained unavailable for months. The sedentary nature of prisoners' lives during the pandemic caused their physical health to deteriorate. Significant weight gain was a common complaint. As one woman said:

[S]ince lockdown they've actually been giving us more stuff ... you get fruit ... but the rest of it is all starch and carbs and fatty stuff really, not a lot of healthy stuff ... it's not going to help with people being in a room 23 hours a day and not exercising ... (England and Wales, in (HMIP, 2021))

Prisoners missed the opportunity to keep fit and some reported neck and back pain due to long periods of inactivity locked in small cells and the poor quality of furniture and mattresses. Women prisoners associated the stress from so little time out of the cell with worsening health conditions such as asthma and epilepsy (HMIP, 2021).

Prisoners in some countries feared their health would be compromised by the prisons' failure to keep them safe by enforcing mask-wearing or social distancing. Many complained of insufficient supplies

of soap, hand sanitisers, and masks. The cessation of visits led to a shortage of soap and other basic sanitation products in some countries.

I asked one of the warders for soap and tissue and she became very harsh, saying 'you are not my sister'. (Kenya)

There's a spreading sense of fear. I have hypertension so I am worried about my health. (South Africa)

Three warders died of COVID19 ... but the prisoners don't wear masks and there is no social distancing. (South Africa)

The prison ordered the vents letting in fresh air to cells to be closed to stop the prisoners shouting out to their families outside the perimeter fence, meaning a heightened risk of infection. Prisoners are being transferred between cities, despite the risk of COVID spreading across prisons. (Brazil)

Interruptions to medical visits or treatments for existing conditions were also feared to be impacting on prisoners' health and wellbeing.

I used to attend [name of] hospital for physiotherapy. As of March the physio sessions were cancelled. (South Africa)

The lack of visits from loved ones was felt by some prisoners to have impacted on their physical health because of the sudden break in supply of foods, medicines and other products. A Brazilian prisoner had relied on her partner to provide medication because the only medication available in prison was pain relief. This prisoner was one of several in Brazil who mentioned the importance of family visits and parcels to supplement the meagre and poor prison diet:

I used to rely on my partner sending in a food parcel every two months. The prison food was very little, very poor – old bread, left-over rice, sausage, that's all we ate from one week to the next. (Brazil)

Another Brazilian interviewee said that visits also represented a basic safeguard against mistreatment:

Community members coming into prison minimises the amount of physical aggression that prisoners undergo from those who should be taking care of them, the prison officers. ... When families visit, they go back to their communities with a clear picture of everything bad that's happening inside a prison. (Brazil)

5.3 Mental health

A near universal impact described by interviewees was that of sadness and depression resulting from lack of contact with family and other loved ones. Many prisoners described feelings of loneliness and frustration making their time in custody harder to bear, and increasing their anxiety about their own wellbeing at this uncertain time.

I really felt so depressed since they are ones who gave me encouragements as I was serving my time. Just seeing them was a great thing for me. (Kenya)

I missed hugs from my family. It had a psychological effect on everyone. Many of the prisoners had depression and increased their use of controlled medication. Inside the prison we had an attempted suicide. (Brazil)

He misses the visits terribly. He felt that [the weekly visits pre-pandemic] had punctuated the weeks in prison. He looked forward to those interactions, to hear about how life was on the outside and it gave him something to look forward to. Without this, he has had mental health issues and has been depressed and anxious. (Australia: in (Flynn et al, 2020))

Some interviewees said that the restrictions had left them feeling oppressed and struggling to adjust (Brazil, South Africa, Kenya). One prisoner spoke of trying to focus on education, noting that at least his current prison he was less violent than others he had been in, which made life more ‘bearable’ (South Africa). Another prisoner said there was a sense of trying to cope once they had accepted the restrictions were for their own benefit (Kenya).

Many interviewees said that their depression associated with the lack of visits was exacerbated by the cessation of routines and activities, which for many led to increased anxiety. For example:

Basically from day to day, as soon as you wake up in the morning your anxiety is through the roof because you’ve got no support, you’re banged up like 23 hours a day (England & Wales, in (HMIP, 2021))

The loss of a daily routine involving work, education and interaction with other people had the effect of increasing a sense of helplessness and anxiety for some. Prisoners in England and Wales interviewed by HM Inspectorate of Prisons ‘expressed a clear desire to return to purposeful activity. [They] missed a full daily routine which included work and education, because this made them feel useful and gave them purpose. They missed having something to look forward to each day and the chance to socialise with prisoners from other wings while they worked.’ (HMIP, 2021)

To be honest the main problem for me over the last couple of months is having nothing of any meaning or consequence to do; i.e., the usual feelings experienced in prison but taken to the extreme. (England & Wales, in (Prison Reform Trust, 2020))

Even in countries where prisoners were able to receive non-contact visits or communicate remotely with their loved ones, the lack of physical contact with partners and children had negative psychological impacts.

He is really depressed. He can’t see the kids. I can’t touch him. It used to give him energy to see me and to exchange hugs but now there is no touching and it makes him sad. (Netherlands)

The lack of visits and regular communication led many prisoners to worry about their families and how they might be impacted by the pandemic. For example:

As I could not see my mother or afford the phone calls home, I was unable to know how my family was faring or how my children were. (Kenya)

To give respect where it's due, we was informed to the best of their ability in the start but as the weeks go by we all feel as if we are just being left to rot. The word rot sounds extreme, but it's exactly how we feel 23 hours in our cell blistering hot, not enough contact with family, wanting to know when you can see them again, worrying if today was the last day you will ever speak to them again. (England & Wales, in (Prison Reform Trust, 2020))

For prisoners who had not had regular visits from family members even before the pandemic, visits by voluntary organizations had been a lifeline, and one that they sorely missed. One such prisoner, who had only ever received one visit throughout her time in custody due to the distance her family lived from the prison, said:

Visitors were our happiness. When they could not come, the prison became dull and boring. I suffered. We all became sad. (Kenya)

Many prisoners said their depression was made worse not only by the lack of visits and activities to distract them, but also by pervasive anxiety about the risk of becoming infected in prison. For example:

The system makes you lose hope...We're like sitting ducks. (USA New York State, in (Correctional Association of New York (2020b))

It has damaged me so much because now I don't want to be with other people. I feel much safer alone. (South Africa)

Stress and anxiety over case progress was reported by Kenyan remand prisoners whose hearing dates were cancelled due to court closures, and by one prisoner close to her release date. One said:

I was so stressed most of the time, my [sentence was] coming to an end and yet I didn't know what to expect. I was really disturbed because I had my child with me. (Kenya)

Interviewees described a range of consequences due to these mental health impacts, including not sleeping, using more medication, use of illicit drugs, incidents of self-harm and attempted suicide. There were also descriptions of physical symptoms commensurate with severe anxiety.

He has become very depressed, suicidal at times, and is taking anti-depressants which make him kind of indifferent to things happening around him. He's had depression before but COVID has made it worse. The lack of visits, touch and interaction with people have had a disastrous effect on him. (Netherlands)

I was sad most of the time, thinking about my family, children, same with other prisoners as well. I became so stressed and developed high blood pressure since I didn't know how my family was doing on the outside. (Kenya)

The strikingly powerful language used by individuals from such a diverse cultural group reveals something of the universality of despair and dehumanisation felt by prisoners:

I have become an island. I am psychologically and systemically deeply affected. I have become aggressive and very negative. The virus is an unknown enemy. (South Africa)

Before this pandemic, we were in prison, but we were alive, but now we feel our life is a disease. We have no work, we just sleep or lie down uselessly the whole day. (India)

They frequently compared themselves to a caged animal. They felt that their treatment was inhumane. (HMIP, 2021)

5.4 Effects on families

Many interviewees spoke of the pain experienced by prisoners' partners, parents and children due to the lack of visits. For example:

The last time I saw my son was on the 20th of March, then lockdown happened. He has also not seen his fiancée and his two-year-old son since then. The distress and heartache this has caused us all is incalculable. (England & Wales, in (Prison Reform Trust, 2020))

Several partners of Hungarian prisoners also described the emotional suffering caused by long periods without in-person contact between prisoners and their young children. One said:

It is horribly difficult. Our son is one year old. He last saw his dad when he was six months old. (Hungary)

Other Hungarian interviewees spoke of the sadness they and their loved ones in prison felt that such a long time had passed with no contact between the prisoners and their very young children. Some spoke of the pain of separation from their partners; and one mother, of how she missed her son.

Australian research reported that the 'changed visiting conditions were seen to have had a largely negative impact on how children were functioning, both emotionally and behaviourally. Many [respondents] talked about the children's overall sadness; some gave specific examples of the impact on issues such as their eating and sleeping.' (Flynn et al, 2020)

An inspection visit at a New York State prison took evidence from prisoners on the impacts of restrictions for family members. One prisoner said:

It puts excess strain on families, it's like double sentencing. (USA, New York State, in (Correctional Association of New York, 2020b))

Prisoners' relatives and partners also described experiencing anxiety about how their loved ones were doing in prison during the pandemic. One mother of two prisoners in Brazil said the lack of any contact, whether through visits or letters, had left her and other mothers 'completely desperate with lack of news' especially when media stories came out about outbreaks of COVID in prisons because, she said, families are routinely not informed by the prison management when their loved ones get sick in custody. She said:

Relatives get desperate, afraid they will receive their loved one's body in a sealed coffin. (Brazil)

6. REFLECTIONS AND RECOMMENDATIONS

Over the course of the year since the COVID-19 pandemic was declared, prisoners have had to adjust to severe and prolonged social and material deprivations going well beyond the loss of their liberty: this has been, as expressed by one prisoner, cited above, ‘like double sentencing’. Prisoners have experienced protracted periods of isolation and inactivity. They have seen lengthy disruption of their engagement with education, work, training, and access to legal advice and other key services (which, in much of the world, were minimally provided even before the pandemic).

At a time when greater social isolation has been imposed on most communities, the social deprivations forced on prisoners have potentially even more harmful consequences. All too aware of the impossibility of social distancing in cramped, insanitary conditions, unable even to exercise outdoors or connect with people remotely when they wished (as people at liberty could usually do during lockdowns), many prisoners have described long periods of intense anxiety, despair and loneliness. The impacts will extend beyond the duration of the sentence and will be serious for many prisoners. As HM Chief Inspector of Prisons for England & Wales, Charlie Taylor, has said in a foreword to the report, *What happens to prisoners in a pandemic?*

In our fieldwork we saw a sense of hopelessness and helplessness becoming engrained. The cumulative effect of such prolonged and severe restrictions on prisoners’ mental health and well-being is profound. The lack of support to reduce reoffending and help prisoners address their risk of serious harm to the public does not fill me with hope for the longer term (HMIP, 2021: Foreword).

Did prison administrations get the balance right between curbing the spread of COVID-19 and safeguarding prisoners’ rights to maintain contact with loved ones, have social interaction, access key services and engage in purposeful activities? With infection rates still high in much of the world (and at record levels in some of our ten countries), very restrictive regimes remain in place in many prisons. It is too early to know whether the gains in terms of infections and deaths prevented will outweigh the adverse consequences documented in this report. We can, though, draw lessons from our research to inform policy and practice for the remainder of the current crisis and the longer term, as summarised below.

6.1 Family contact

Outcomes for people after leaving custody are better when connection with loved ones is maintained during the time spent in prison (Jacobson & Fair, 2016). The particular importance of in-person contact for families and prisoners is borne out by the evidence presented in this report. In deciding when and how to reinstate in-person visits, prisons throughout the world face a dilemma as they balance the imperative to safeguard physical health with the need to support prisoners’ social interactions.

Recommendation: As soon as it is safe to do so, prisons should prioritise a return to in-person visits, with as few restrictions as possible in line with public health guidance. Prisons should also assess whether they can do more to minimise the intimidating, time-consuming and unwelcoming features of visiting, particularly for children visiting parents in custody. Prisoners should be detained as close to their families as possible to make visits less expensive and time-consuming.

6.2 Remote contact

Although in-person visits are widely considered the ‘gold standard’ it is clear that some families and prisoners have also benefited from regular remote contact via video calls and in-cell phones, which have become more widely available in some countries during the pandemic. The fact that their wider use has been welcomed by many families and prisoners might, in part, reflect the inherent unpleasantness, complexity and cost of a prison visit.

Although video visits may have advantages compared to in-person and telephone contact, many prisoners and their families cannot access them, either due to digital poverty, or because the prison itself lacks the necessary infrastructure. For some, only telephone visits will be possible. For very young children phone calls may not offer the same quality of interaction as communicating on a device with a visual display. But many children will find a lack of physical contact with a parent unsettling and video calls might not suit all families.

Recommendation: In view of the advantages in providing a blend of contact types, prison administrations should aim to provide this. They should remove unnecessary restrictions on frequent, good quality remote contact between prisoners and their loved ones – both during the pandemic and beyond; and, where remote forms of contact are provided, this must not be at the expense of regular in-person visits when these can be safely managed.

6.3 Communication with lawyers

Our research suggests provision of alternative means to communicate in confidence with lawyers when visits were suspended was far from universal.

Recommendation: Alternative means of communicating in confidence with lawyers should be provided, where visits are not possible, to prevent the risk of prisoners being unlawfully detained pre-trial or after their sentence has been served; to ensure fair access to regime progression and parole; and to provide prisoners with representation when their fundamental rights are infringed.

6.4 Voluntary bodies’ visits and monitoring

In countries with no National Preventive Mechanism or similar oversight, visits by voluntary bodies can play a part in monitoring living standards and safeguarding against mistreatment.

Recommendation: Governments and prison administrations should recognise that monitoring systems are of vital importance in a pandemic and access for monitoring bodies should be provided to the fullest extent possible, in line with public health guidance.

6.5 Routine and activity

The importance of a daily routine with access to work, education and interaction with others, and a full day spent outside the cell, was clear before the pandemic. It is brought into sharper relief by prisoners’ accounts of the many adverse impacts of the sudden cessation of activity and of the increased time locked up. Prisoners described physical, mental and financial consequences; they also highlighted a risk they would not have a fair chance of progressing to parole or a lower category prison, or would be unprepared for release back into the community.

Prisoners clearly valued opportunities to study or learn skills in custody before the pandemic; but we heard almost no positive accounts of prisons adapting to ensure at least some access to training or education materials despite the restrictions. This missed opportunity no doubt reflects understaffing and lack of resources in prisons operating above their official capacity (as they were in all the countries in this study except the Netherlands, when this research was conducted).

Recommendation: Prisons should aim to restore routine and activity, including studying and training opportunities, to the fullest extent possible.

6.6 Health

Significant backlogs of physical health treatment needs will have built up during the pandemic, with prisoners having been unable to access services such as physical rehabilitation, dental treatment, optician appointments and similar. General physical health will have deteriorated due to inactivity and increased anxiety, with weight gain, hypertension, drug use and other problems needing to be addressed.

The mental health consequences of prolonged restrictions in prisons will also be serious, both for prisoners and the families and communities they will return to. Prisoners themselves have expressed concern about the prospect of being released without having had any support to tackle the problems underlying their offending or prepare for life outside.

Recommendation: As countries the world over assess changes needed in their health provision in response to the vast strain placed by the pandemic on health services, they should not overlook the heightened mental and physical health needs of prisoners and ex-prisoners.

6.7 Decarceration to mitigate further harms

The direct and indirect health impacts of the various restrictions we have described will undoubtedly prove more severe in countries with overcrowded, under-resourced prisons. Limited physical space and infrastructure and, above all, inadequate staffing levels will have placed more constraints on (already stretched) provision of rehabilitation, education, work, visits and social interaction than would have been necessary otherwise.

Most countries' prison systems now run above their official capacity.¹² This follows decades of growth in prison populations, with some countries and regions having seen particularly rapid and large increases. We have documented some of the health consequences of this trend, and have called for reduced reliance on imprisonment to ensure better public health and safer communities (Heard, 2019).

Signs are now emerging that several countries' prison populations declined during 2020 as a result of lockdowns, fewer arrests and court hearings, and (in some cases) prisoner release measures (Fair & Jacobson, 2021). This is a positive if largely accidental outcome. In order to mitigate the direct and indirect harms of COVID-19 to prisoners, prison staff, their families and communities, more deliberate decarceration strategies will be needed.

¹² National occupancy levels can be found on each country page on the ICPR [World Prison Brief website](#); in addition, the 'Highest to Lowest' function can be selected to rank countries globally or regionally, by occupancy level.

Recommendation: As countries emerge from lockdown, governments should bring a new focus to tackling the many complex, intertwined drivers of over-incarceration. At criminal justice system level, there will be scope in most jurisdictions to reform pre-trial and sentencing frameworks;¹³ but these reforms will be of limited value without a deeper commitment to eradicating structural inequality.

13 (which are separately examined in our reports on the law and practice of [pre-trial decision-making](#) and [sentencing](#) in the ten jurisdictions)

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ICPR's book, *Imprisonment Worldwide: The current situation and an alternative future* (Coyle, Fair, Jacobson and Walmsley) was published in June 2016 and is available from Policy Press.



World Prison Brief

The World Prison Brief was established by Roy Walmsley and launched in September 2000 by the International Centre for Prison Studies. Since November 2014 the Brief has been hosted and maintained by the Institute for Crime & Justice Policy Research. The data held on the Brief (which is updated on a monthly basis) are largely derived from governmental or other official sources. The data used in this report were accessed from the database in December 2020. The World Prison Brief can be accessed at <http://prisonstudies.org/>