Problem solving approaches: a review of learning from the Winston Churchill Memorial Trust Prison Reform Fellowships – Part III

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Key Points

- This report is the third in a series of five briefings which present learning from the Winston Churchill Memorial Trust (WCMT) Prison Reform Fellowships, and is focused on problem-solving approaches to criminal justice.

- Problem-solving approaches are those which target the environmental and psychosocial factors bound up with offending behaviour as well as the behaviour itself, and therefore entail integrated, multi-disciplinary criminal justice practices.

- In the field of youth justice, for example, a wide range of preventative, diversionary and welfare-oriented initiatives in many parts of the world seek to address the (often complex and entrenched) needs of children and young people who offend or are at risk of offending.

- Such initiatives range from educational and family support in the community to the development of constructive models of engagement with children for whom some form of secure accommodation is required because of the extreme challenges posed by their behaviour.

- A commitment to problem-solving is evident in efforts to integrate policing and mental health provision. These include the introduction of the Crisis Intervention Team model across much of the USA, whereby frontline police officers are provided with the skills and knowledge to deal effectively, in the course of their normal duties, with individuals in mental health crisis.

- An alternative model for integrated provision involves various forms of co-response to mental health crises, by teams made up of police officers working together with mental health practitioners.

- Problem-solving courts originated in the USA but have since been established in many other parts of the world. These courts place treatment, support and rehabilitation at the heart of the judicial process, with a focus on community sentences and the monitoring of offenders’ progress on sentences by judges.

- A vast array of problem-solving courts are currently in operation, including peer courts, and courts which deal specifically with defendants with mental health problems, substance misusing defendants, and those who are homeless.
Introduction

This report is the third in a series of five briefings which present learning from the Winston Churchill Memorial Trust (WCMT) Prison Reform Fellowships. The Fellowships, arranged in partnership with the Prison Reform Trust and conducted from 2010 to 2015, explored ways in which other countries respond to crime and whether similar approaches can be adapted in the UK. The backdrop to the Fellowships was a recognition of the limitations of conventional criminal justice responses to crime which, in England and Wales, have led to an imprisonment rate that is the highest in Western Europe,\(^1\) stubbornly high reoffending rates, and prisons described by the Chief Inspector as ‘unacceptably violent and dangerous places’.\(^2\)

The overarching theme of the briefings on the Churchill Fellowships is ‘connections’. This reflects the fact that many of the Fellows visited interventions seeking to forge strong, positive connections among and between individuals, groups and organisations as a means of tackling crime and its effects.

Within the overarching ‘connections’ theme, this report is concerned with problem-solving approaches – broadly understood as those which target the environmental and psychosocial factors bound up with offending behaviour as well as the behaviour itself. The basic premise of such approaches is that the root causes of offending are many, varied and interlinking – extending far beyond the predisposition and choices of the individual. Accordingly, responses to offending are most effective where they are not conceived and delivered as specific ‘criminal justice’ initiatives, but where they also encompass health, education, welfare and other agencies and services. As observed in the first report in this series, problem-solving therefore entails:

*integrated, multi-disciplinary approaches to justice and the building of connections not only between individuals and relevant services, but between the services themselves.*

Three types of problem-solving approach which were examined by Churchill Fellows are discussed below. First, we look at welfare-oriented and diversionary work with children and young people who have offended or are at risk of offending. Secondly, some collaborative initiatives between the police and mental health services are outlined. Thirdly, we discuss a range of problem-solving courts.

Integrated approaches to children in trouble with the law

The youth justice system of England and Wales deals with suspects, defendants and convicted offenders aged between 10 and 17. Recent years have seen a sharp decline in the numbers of children and young people in the youth justice system – with first-time entrants having declined by more than 80% since 2006, and 10 to 18-year-olds in custody by more than 70% since 2003.\(^3\) The rapidly falling youth justice caseloads appear
to reflect both declining levels of youth crime and greater use of diversionary options by the police. A natural corollary of these trends is a greater concentration of entrenched and complex needs within the remaining youth justice population – posing considerable challenges for the system, and underlining the importance of integrating youth justice practice within wider service provision. Another notable, and challenging, feature of youth justice in England and Wales is that, at ten years, the age of criminal responsibility is lower than in almost all other European jurisdictions.

The Ministry of Justice commissioned a wide-ranging review of the youth justice system in 2015. The final report on this review, published on 12 December 2016, calls for:

a new system in which young people are treated as children first and offenders second, and in which they are held to account for their offending, but with an understanding that the most effective way to achieve change will often be by improving their education, their health, their welfare, and by helping them to draw on their own strengths and resources.⁴

The Churchill Fellowships which focused on work with children and young people in trouble with the law variously looked at preventative, diversionary, alternatives to custody and welfare-oriented initiatives. Fellow Laura Baynton, for example, looked at a preventative programme in Brazil (see Fellowship observations 1), and went also to Denmark where she was:

struck by the language practitioners and politicians used to talk about crime and youth justice – the strong sense of societal responsibility for crimes committed by children, the widely-held pride in the low numbers in custody and the role of the state in investing in early intervention on a scale unheard of in England and Wales.

In the USA, Baynton explored the use of after-school reporting centres as an alternative to pre-trial detention—these are centres to which young defendants not posing a high risk to the public, but who would typically be remanded into custody, can be sent to report to ensure they do not break their bail conditions, abscond or offend before their trial.⁵

Diane Hart’s primary interest was in the ways in which different countries work with children who are removed from home because of their challenging or criminal behaviour. She looked at the Finnish welfarist model of youth justice (Fellowship observations 2); the emphasis on education and the application of ‘love and boundaries’ in custodial units for children in Spain; and progressive models of what was commonly termed ‘positive youth development’ within some custodial establishments in the USA.⁶ Stephanie Waddell contrasted approaches to youth offenders in Sweden, the Netherlands and France, where she came across a number of promising interventions seeking to address youth violence through preventative, diversionary or enforcement means – including the use of the Halt penalty in the Netherlands (Fellowship observations 3).⁷
Fellowship observations 1: 
Preventative work with young people at risk of offending in Brazil

Vivo Rio is an non-governmental organisation running the innovative Scholastic Acceleration Programme which supports young people from disadvantaged backgrounds in catching up and completing school in less than a year. The programme’s premise is that educational qualifications are one of the most powerful tools in helping young people stay out of trouble with the law, find and keep work and raise their aspirations.

Viva Rio offers young people a chance to quickly recover lost time in their education (due to truancy, exclusion, problems at home or lack of support) and promotes social integration. The programme is run by a team of specialist teachers who are “under rigorous pedagogical supervision”, and students are expected to complete their primary education in nine months and secondary education in eleven months, as well as receive guidance on citizenship and employment. Set up in 1996 in Rio de Janeiro, the approach has now been adopted as public policy across the country. The methodology (created by the Roberto Marinho Foundation) is now certified by the Brazilian Department of Education and over 90,000 young people across Brazil have to date participated in the programme.

Laura Baynton visited Viva Rio in Brazil in 2012.

Fellowship observations 2: 
Welfare-oriented youth justice in Finland

In Finland the overwhelming majority of children who have engaged in criminal behaviour are dealt with by the child protection system because such behaviour is regarded primarily in terms of the risks it poses to their health and development. As in other Nordic countries, the state is committed to offering high quality services to support families, including accessible day care. Most children growing up in Finland will have benefitted from this and then attended a school with in-built support services, including child mental health practitioners. Problems are identified and tackled at an early stage, including emerging conduct disorder. If a child does develop behavioural problems, this is seen as a manifestation of a collective failure which should be addressed through support rather than punishment.

The age of criminal responsibility in Finland is 15, meaning that any children who have engaged in problematic behaviour before that age cannot be prosecuted; the families of such children are offered child welfare or health services, and additionally some reparation work may be undertaken with any victim. Even where those aged 15 or older are referred to a criminal court, the most likely outcome is a community disposal or suspended sentence. Only a handful of children are ever imprisoned and there must be ‘weighty reasons’ for such a disposal – generally understood in terms of serious violence. From 2005 to 2011, the average number of 15-17 year olds in custody at any one time was six, most of whom had been subject to pre-trial remand rather than sentenced to imprisonment.

Diane Hart visited Finland in 2015.
Integrated responses to suspects’ mental health needs

Across much of the world, the police are the service that can be most easily called upon to respond to individuals in mental health crisis; and there are high rates of mental illness within prison populations worldwide. In England and Wales, as elsewhere, there are abiding concerns about the numbers of people with serious mental health needs who come to police attention and about the appropriateness or adequacy of police responses to these needs and it is recognised that the prevalence of mental illness among prisoners is persistently high. One current and large-scale initiative intended to ensure that suspects and offenders receive the mental health services and support they require – either within or through diversion outside the criminal justice system – is the national roll-out of criminal justice liaison and diversion schemes, which undertake screening and referral of individuals at police stations and courts. In July 2016, the UK government announced an additional £12m investment to extend NHS England liaison and diversion services from 50% population coverage to 75% by 2018. Nevertheless, there remains much local variation in the extent to which, and ways in which, criminal justice and mental health practitioners work together to identify and respond to mental health problems and other vulnerabilities.

Three Churchill Fellows – Mark Bolt, Alex Crisp and Paula Reid – looked at a range of initiatives aimed at integrating policing and mental health provision in the USA, Canada and Australia. Many of these initiatives were based on the crisis intervention team model

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Fellowship observations 3: Diverting young people from the criminal justice system in the Netherlands

The Halt programme in the Netherlands offers young people a last chance before they enter the youth justice system. This programme, which is run by a private sector organisation, is enshrined in the Dutch penal code and has been in existence for over 25 years. Children and young people aged from 12 to 18, who have been apprehended by the police for minor crimes such as theft or nuisance behaviour, can be referred directly by the police, or by the public prosecutor, for a Halt penalty which involves a mixture of unpaid work (between 6 and 20 hours), support to help change behaviour, and restorative justice. Those who accept a Halt penalty do not receive a criminal record, and it is not possible to go through the programme more than twice. Each year some 22,000 children and young people are referred to Halt.

Parental involvement from the point at which their children are first referred to Halt is seen as key to the work of the programme. Parents are helped to develop skills to prevent their children from engaging in criminal behaviour in the future, and are expected to be involved when their children offer apologies for their behaviour and make amends for any damage done.

Stephanie Waddell visited the Halt programme in the Netherlands September 2013.
which seeks to improve the ways in which operational police officers respond to mental health problems (*Fellowship observations 4*) – and which has since been adapted to the UK context by Mark Bolt (see *Applying the learning* outline below). Other initiatives visited by these Fellows involve various forms of co-response to mental health crises by teams made up of police officers working together with mental health practitioners (*Fellowship observations 5*).

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**Fellowship observations 4:**
Crisis Intervention Teams in the USA and Australia

The Crisis Intervention Team (CIT) model was first developed in Memphis, Tennessee in 1988, following the fatal shooting by police of a young man with mental health problems. The model has since been applied, with modifications, in many parts of the US – over 3,000 American police forces are estimated to have adopted CIT, according to Churchill Fellow Alex Crisp.

The CIT model involves providing frontline police officers with the skills and knowledge to deal effectively with individuals in mental health crisis in the course of their normal duties. Training in active listening and de-escalation skills, including through role play, is a core component of CIT, as is provision of information about mental health. Experiential learning with people who have had mental health problems is another aspect of CIT. Officers are selected for training through a voluntary and competitive application process. A survey of 224 CIT programmes conducted by Fellow Paula Reid found that, on average, 45% of officers in participating forces had been CIT trained.

One of CIT’s reported strengths is that a range of stakeholders (such as mental health service providers, service users and advocacy groups) have direct involvement in the programme, including in its design and delivery of training. Thus not only does the CIT actively encourage inter-agency working – for example, by facilitating police referrals to mental health services – but partnership and community ownership are intrinsic aspects of the programme itself.

CIT has been introduced in adapted forms outside the USA, including by New South Wales Police in Australia. Here, the Mental Health Intervention Team (MHIT) programme entails a four-day residential course and is provided by a partnership between the police and various health, welfare and academic bodies. Themes covered by the training include the needs of differing cultures with regard to mental health provision; personality disorders; and the roles and responsibilities of non-police agencies.

*CIT programmes in many parts of the US were visited by Mark Bolt and Paula Reid in 2013, and by Alex Crisp in 2015. Crisp also visited the MHIT programme in New South Wales, Australia in 2015.*
Applying the learning:
Introduction of mental health awareness training for the police in England and Wales

Churchill Fellow Mark Bolt, an operational officer from Devon and Cornwall Police, has introduced aspects of the mental health awareness training programme he saw in both Chicago and Baltimore into police training in his force area since his return. At the time of writing, he has just started rolling out the next phase of training on how to de-escalate situations for front-line officers across the force. Approaches to Street Triage (involving the provision of on-the-spot advice and assistance by mental health practitioners to police dealing with people with mental health problems) and Liaison and Diversion have been influenced by his Fellowship and are now embedded in the way in which the force deals with vulnerable suspects and victims.

Fellowship observations 5:
Police and mental health co-responses in Canada, Australia and the US

In Toronto, Canada, the Mobile Crisis Intervention Team (MCIT) consists of a police officer and mental health nurse. The team acts as a so-called secondary responder: they are not dispatched to emergency calls in the first instance but attend if requested by police officers at the scene; they also undertake follow up calls and some proactive outreach work. However, these responsibilities have to be balanced against the demands of serving as part of an emergency response system.

The police officers and mental health professionals involved in MCIT are trained together so that there is clarity around their different roles, particularly in regard to relevant legal frameworks. The nurse can make referrals at the scene, avoiding the need for admission to hospital or the emergency department. If admission is necessary, the nurse can potentially do some initial triaging at the scene to speed up the process on arrival at hospital, meaning the person can access appropriate mental health care more quickly.

A similar co-responder model exists in Cairns, Australia, developed by police in partnership with Queensland Mental Health Services. The model pairs a police officer with a mental health practitioner as a police response team. This initiative commenced in 2010, with an emphasis on education and the promotion of good police mental health detentions: that is, safe detentions on grounds of need. This initially had the effect of increasing the number of detentions instigated by police, which then prompted work to reduce numbers detained.

A contrasting approach can be seen in Anne Arundel County in the US state of Maryland, where mobile crisis teams comprise pairs of licensed mental health professionals. They can be called out to attend any incident at the request of the police, and work to divert the individual to the least restrictive setting possible – for example, to an outreach team or residential provision. The mobile crisis teams also support emergency department staff if required, and can work at this stage to divert people from hospital admissions where appropriate.

Paula Reid visited crisis response teams in Toronto and Maryland in 2013; Alex Crisp looked at the co-responder model in Cairns, Australia in 2014.
Problem-solving courts

What are broadly referred to as problem-solving courts originated in the United States but have since been established in many other parts of the world. The distinguishing feature of problem-solving courts has been described as the way in which they:

bring together community treatment and services, with the court, and more specifically the judge, as a principal mechanism for delivering behaviour change. Putting judges at the centre of rehabilitation, problem-solving courts deliver specialised community sentences, tailored to change offenders’ behaviour and hold them accountable through regular monitoring by the judge.\(^\text{16}\)

In England and Wales, there have been some trials of problem-solving in criminal justice – the most well-known of which was the North Liverpool Community Justice Centre, which ran from 2005 to 2014.\(^\text{17}\) The problem-solving model is also being applied to family justice through the Family Drug and Alcohol Court which currently has 13 teams working across 21 local authority areas.\(^\text{18}\) And while this jurisdiction has not, to date, seen wide-scale or sustained implementation of problem-solving courts, government and the senior judiciary continue to signal their interest in this approach. In February 2016, for example, the Lord Chief Justice and then justice secretary Michael Gove set up a working group to review models of problem-solving criminal courts and advise on possible pilots,\(^\text{19}\) while a joint statement, Transforming Our Justice System, issued in September 2016 by the Ministry of Justice, Lord Chief Justice and Senior President of Tribunals, included a commitment to “continue to explore the use of innovative ‘problem-solving’ criminal courts”.\(^\text{20}\) This is the context in which the Centre for Justice Innovation has set out “an ambitious plan for the wider adoption of the problem-solving approach over the course of the current Parliament”.\(^\text{21}\)

A wide variety of kinds of problem-solving court were visited by Churchill Fellows, largely in the USA. Peer courts in several American states were reviewed by Mark Walsh (see Fellowship observations 6), who has since developed a peer court in England (see Applying the Learning, below).\(^\text{22}\) Other problem-solving courts seen by Fellows include drug courts in Colorado and Florida visited by Fiona Gilbertson\(^\text{23}\) and Lynn Jolly\(^\text{24}\) respectively (Fellowship observations 7); mental health courts in the USA and Canada visited by Paul Reid;\(^\text{25}\) a street outreach court in Detroit visited by Penelope Gibbs (Fellowship observations 8);\(^\text{26}\) a community court in Vancouver, Canada visited by David Martin (Fellowship observations 9);\(^\text{27}\) and a re-entry court in Louisiana visited by Andy Laidlaw (Fellowship observations 10).\(^\text{28}\)
Fellowship observations 6: Different types of peer court in the US

Peer courts are community-led problem-solving courts focused on young people. They provide an alternative court system through which young offenders can be heard, questioned and judged by other young people - their peers - and not just by criminal justice professionals in isolation from the community. These courts generally work with relatively low-level first-time offenders to prevent or delay their entry into the formal criminal justice system. According to the National Youth Court Database, the number of peer court programmes in the US rose from 78 in 1994 to well over 1,000 by 2013.

The main peer court models in operation across the US are:

The adult judge model: This is perhaps the most widely used model, in which an adult presides over the hearing in the role of judge while young people carry out all other roles in the court.

The youth-judge model: Here a youth volunteer carries out the judge role. Hearings are led by young people, while an adult co-ordinator ensures the paperwork is complete, explains the process to the parties, and attends the hearing in order to provide any help or advice required.

The peer jury only model: In this model there are no judge or (usually) advocate roles. The case is presented to the peer jury by the clerk or bailiff, or a member of the jury leads the hearing. The jurors ask the respondent questions and determine the disposal. This model tends to be less formal than others, and looks more like a forum or conference than a court process.

The youth tribunal model: This involves a panel of 3 – 4 young people who, rather than a jury, hear the case and decide on the sanctions. The case may be presented by an individual in an advocate role, a youth clerk or bailiff or the peer court co-ordinator.

Mark Walsh visited peer courts in the USA in 2013.

Applying the learning: Establishment of a peer court in Hampshire, England

Following his visit to peer courts in the US, Churchill Fellow and Police Constable Mark Walsh has worked with colleagues in developing the Hampshire Community Court programme for first-time offenders aged between 10 and 17. This programme has adopted the US concept of empowering young people to help and hold to account their peers, while placing a greater emphasis on restorative practice than is typically the case in the US peer courts. The court is run from a local police station, and cases are heard by panels comprising young volunteers. Where possible, victims are encouraged to attend the court hearings to give their views and to seek restitution if appropriate. The Hampshire initiative recently completed a 20-month pilot phase. Offences dealt with
include cannabis possession, criminal damage, theft and assaults. All cases referred had first been screened to ensure that they were suitable for a police disposal.

To date, 95% of 185 children referred as suitable for the programme have engaged positively with their peers and the learning opportunities provided. Levels of attendance by victims have also been high. Victims, offenders, offenders’ parents and police officers who have been surveyed have largely reported that they believe the peer court concept to be worthwhile and that the programme has adequately challenged and changed behaviour. In the wake of the pilot, the programme is being rolled out in other localities in Hampshire and – as the only initiative of its kind in England and Wales – has provoked interest elsewhere.

**Extracts from survey responses**

*After the hearing my son stated that he felt really bad for his victim. He didn’t think she was that bothered about it until now. He has found himself a Saturday job and wants to pay her back the money he stole as suggested.*

*At first I thought the hearing was bizarre as it was just like having a chat with other young people and I expected to be shouted at or something. They listened to me more than the police did and I felt they understood where I was coming from – that’s why I had no issue with completing my directions.*

*I did not want to see my daughter prosecuted for damaging my door – I just needed support in getting the message across to her that it was not acceptable. The hearing did that and my relationship with my daughter has been better since.*

*I thought the hearing was a scary process which really made me think about my actions.*

*I felt the panel understood me and know what it is like to be a young person dealing with pressure. I liked it when they said to me, explain in my own words what happened as it felt like they wanted to listen and were down at my level.*

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**Fellowship observations 7:**

**Drug courts in Colorado and Florida, USA**

Drug courts in the US are specialist courts working with substance dependent offenders whose offending is generally related to their drug use. Typical practice in these courts is that clients are offered the choice of a criminal justice sanction or attendance at a court-led programme of treatment. If they opt for the latter, they must sign a formal agreement to comply with the programme, the components of which are set out clearly in an effort to make the process transparent, inclusive and simple.

One such drug court is in Santa Fe, Colorado, which has been running since 1997 and operates a 12 month, intensive drug treatment programme. Eligible defendants are those...
who have committed drug or drug-related non-violent offences which are suitable for a non-custodial disposal, have breached a probation order in the past because of substance misuse, acknowledge that they have an addiction, and have not previously been involved in a drug court programme. The treatment programme is made up of four stages, with a gradual reduction in supervision and support and over the course of which they report back to the court. On completion of each stage participants are awarded a $25 gift card and a certificate, the judge praises their progress and the court applauds.

A drug court programme in Volusia County, Florida, similarly requires participants to attend a support programme and to report on progress regularly to the court. Participants come before the judge in open court to be asked about their progress, their struggles and their goals. ‘Stayers’ and ‘tryers’ are rewarded with words of praise and encouragement to continue with their incremental, positive change. Those who have hit a wall or had a set-back are questioned closely. Admonishment or further encouragement then follows.

Drug courts in the US, including in Colorado, were visited by Fiona Gilbertson in 2015; Lynn Jolly visited the drug court in Florida in 2014.

Fellowship observations 8:
A street-outreach court in Detroit, USA

Street outreach courts are specialist courts for homeless people, which seek to address the particular difficulties that these extremely marginalised individuals face during the court process. Those who are homeless often accumulate large fines which, by virtue of their homelessness, they are unable to pay – meaning that they become increasingly caught up within the criminal justice system.

The Downtown Detroit Street Outreach Court was established in 2012. Those involved in setting it up, particularly two local judges, wanted it to be held outside the courthouse itself, in an environment less intimidating to its clients. Homeless people are frequently terrified of courthouses – fearing that, as soon as they enter such a place, they will be shackled and imprisoned for previous misdemeanours, or for non-payment of fines. At the same time, bailiffs fear the homeless people. Bailiffs provide security in courthouses and rooms: they search people and bags on entry into the court buildings, and have strength in numbers at these premises, should any offender turn violent. The bailiffs were very concerned about the security implications of holding court hearings in downtown Detroit, outside the courthouse. Eventually the two judges persuaded both the new Presiding Judge and the bailiffs to let them start the court in a local hostel for the homeless. Churchill Fellow Penelope Gibbs reports that the court has since had considerable success in terms of avoiding violence during hearings, and assisting clients to obtain stable housing and income and to cease offending.

Penelope Gibbs visited the Downtown Detroit Street Outreach Court in 2014.
Fellowship observations 9:
A community court in Vancouver, Canada

Vancouver’s Downtown Community Court deals in a holistic fashion with offenders who commit multiple petty offences and typically serve one short prison sentence after another. Having been established in 2008, it deals with around 1,500 offenders per year, who tend to have a range of health and social problems including substance dependence, homelessness and poverty.

The court attempts to address the reasons for offending behaviour and to put systematic interventions and specialist support in place, with assistance from a range of governmental and non-governmental agencies. The sentencing of offenders can be deferred to allow for completion of any actions recommended by the judge which have been devised with the assistance of the project team. The offender is then brought back and the sentencing decision may be informed by his or her participation in the recommended actions. Partnership is core to the work of the court, which seeks to establish new relationships between all relevant criminal justice and non-criminal justice services.

David Martin visited Vancouver’s Downtown Community Court in 2011.

Fellowship observations 10:
A re-entry court in New Orleans, USA

Re-entry courts are very different to other forms of problem-solving courts in that they are not focussed on potential support or sanctions following an arrest or conviction, but are rather concerned with determining and providing appropriate support at the end of a prison sentence.

One such initiative is the Orleans Re-entry Court Workforce Development Program in the USA, which aims to ensure that all newly released men from the Louisiana State Penitentiary (known as Angola prison) have every opportunity to avoid recidivism. Mentoring is a major part of the support provided to the ex-prisoners, including by current and other former Angola prisoners and by Judge Laurie White who oversees the work of the court.

Re-entry candidates attend the court with their mentors and with corrections staff from Angola. Some of the men also bring family members or other support. The judge develops a positive relationship with the candidates and makes it clear that she wants them to become productive citizens and not return to prison. The court also deals with any outstanding fines, with each individual expected to pay something towards their fine each week. Churchill Fellow Andy Laidlaw described the role of the judge at the court as follows:

This judge was using her influence and power through the Re-entry Court to assemble a cast of contributors who could effectively give a newly released former prisoner no reason to reoffend. It really was easier to comply, given all the support in the room.

Andy Laidlaw visited the Orleans Re-entry Court in 2015.
Looking ahead

We hope that the initiatives studied in this report will offer ideas and innovative avenues for those working in criminal justice in the UK, and that interested parties can take these forward and adapt them to their own context. This report only touches on certain specific aspects of the Fellowships covered here, and we would urge readers to read the full reports listed in the Appendix for more information, or to contact the Winston Churchill Memorial Trust, the Prison Reform Trust or the Institute for Criminal Policy Research for more details.

Winston Churchill Memorial Trust http://www.wcmt.org.uk/
Prison Reform Trust http://www.prisonreformtrust.org.uk/
Institute for Criminal Policy Research http://www.icpr.org.uk/
According to the Institute for Criminal Policy Research World Prison Brief database, the current prison population rate stands at 147 per 100,000 of the national population (http://prisonstudies.org/highest-to-lowest/prison_population_rate?field_region_taxonomy_tid=14, accessed 4 November 2016).


Research cited by the World Health Organisation, for example, suggests that at least one in nine of all prisoners have a ‘severe mental disorder’, while prevalence of a mental health problem and/or drug dependence has been estimated at around 60 to 65% (WHO, 2007, ‘Background Paper for Trenčín Statement on Prisons and Mental Health: Towards best practices in developing prison mental health systems’, http://sb86eb09335ad47f5.jimcontent.com/download/version/1345503312/module/6300197152/name/OMS%202007-Trencin%20Statement%20on%20Prison%20and%20MH-.pdf).


For example, a 2007 survey of prisoners found that that 26% of women and 16% of men said they had received treatment for a mental health problem in the year before they were imprisoned (Ministry of Justice, 2007, Gender differences in substance misuse and mental health amongst prisoners, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/220060/gender-substance-misuse-mental-health-prisoners.pdf).

https://www.england.nhs.uk/commissioning/health-just/liaison-and-diversion/

http://www.prisonreformtrust.org.uk/PressPolicy/News/vw/1/ItemID/338


In the face of some controversy, the government took the decision to close the North Liverpool court on the grounds that its workload was falling, the costs were high, and there was a lack of evidence of a positive impact on re-offending rates. (See, for example, http://thejusticegap.com/2013/10/next-community-justice-pioneering-court-closes/)

http://fdac.org.uk/


Appendix

The following is a list of the 12 participating Fellows who contributed to this report, with a link to each online profile on the WCMT website. The profile includes the option to download the full report where available.

Laura Baynton
*Seen from the other side: Exploring youth justice innovation in Denmark, USA and Brazil, 2013*
http://www.wcmt.org.uk/users/laurabaynton2012

Mark Bolt
*Mental health and criminal justice in the USA, 2013*
http://www.wcmt.org.uk/users/markbolt2013

Alex Crisp
*Understanding best practice: the emergency response to mental health crisis in Australia, Canada & the USA, 2015*
http://www.wcmt.org.uk/users/alexcrisp2015

Penelope Gibbs
*The decision to imprison: how training and engagement influence judges in the USA, 2014*
http://www.wcmt.org.uk/users/penelopegibbs2014

Fiona Gilbertson
*Creating recovery courts: rehabilitation not incarceration in the USA, 2015*
http://www.wcmt.org.uk/users/fionagilbertson2015

Diane Hart
*Approaches to secure care for troubled children in Finland, Spain and the USA, 2015*
http://www.wcmt.org.uk/users/dianehart2015

Lynn Jolly
*Comparing practice in the support of learning disabled offenders in Canada and the USA, 2013*
http://www.wcmt.org.uk/users/lynnjolly2013

Andy Laidlaw
*The impact of effective mentoring on reoffending and community safety in the USA, 2015*
http://www.wcmt.org.uk/users/andylaidlaw2015

David Martin
*From custody to community: a more realistic & helpful approach, in Canada and Finland, 2011*
http://www.wcmt.org.uk/users/davidmartin2011
Paula Reid
*Diverting offenders with mental illness from the criminal justice system in Canada and the USA, 2013*
http://www.wcmt.org.uk/users/paulareid2013

Mark Walsh
*Restorative justice for youths administered by youths in the USA, 2013*
http://www.wcmt.org.uk/users/markwalsh2013

Stephanie Waddell
*European approaches to addressing youth violence in custody and the community in France, Netherlands and Sweden, 2013*
http://www.wcmt.org.uk/users/stephaniewaddell2013
The Winston Churchill Memorial Trust (WCMT) was established in 1965 on the death of Sir Winston Churchill. The WCMT funds UK citizens from all backgrounds to travel overseas in pursuit of new and better ways of tackling a wide range of the current challenges facing the UK. For more information please visit www.wcm.org.uk.

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The Prison Reform Trust works to create a just, humane and effective penal system. We do this by inquiring into the workings of the system; informing prisoners, staff and the wider public; and by influencing Parliament, government, and officials towards reform:

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