

Neurodiversity in prisons

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About me

Diagnosed with dyslexia as a child, I faced significant challenges in education and was eventually expelled from school. In my early 20s, I began independently researching neurodiversity — a journey that not only ignited a deep passion but also led to a private diagnosis of ADHD and Autism at 28.

Today, I proudly serve as a HMP Neurodiversity Specialist, an Ambassador for ADHD UK, and an ADHD Coach. I've worked across multiple mens and womens prisons, using both lived experience and professional insight to advocate for and support neurodivergent individuals within the justice system.

Categorisation of male prisoners in the UK

Category A

Category A prisons are high-security facilities housing prisoners who, if they escaped, would pose a severe threat to the public, police, or national security. These prisoners are involved in serious crimes such as terrorism, murder, and large-scale drug trafficking.

Category B

The majority of male prisoners enter the system as category B prisoners.

Remand prisons (prisons where people are held whilst awaiting trial or whilst waiting for transfer to a resettlement prison) are all Category B.

A prisoners categorisation can be reviewed based on their behaviour in custody, they can be increase to A or decrease to C or D.

HMP Nottingham is a Category B remand prison

Category C

Category C prisons house inmates who cannot be trusted in open conditions but are unlikely to make a determined escape attempt.

Typically used for offenders who have committed less serious crimes or those who have progressed through higher security categories.

Focus on training and resettlement to prepare inmates for reintegration into society.

Category D

Category D prisons are the lowest security prisons in the UK. Often called “open prisons” as eligible prisoners can leave the site during the day and return in the evening.

To be eligible for Category D status prisoners must have maintained a positive behaviour record whilst in prison and be deemed low risk to the public.

These prisons can be beneficial in helping prisoners reintegrate into society gradually.

Categorisation of other prisoners in the UK

Vulnerable prisoners (VPs)

Some prisons in the UK have a segregated wing for prisoners who are deemed to be vulnerable. A prisoner may be considered vulnerable if:

- They are in debt to other prisoners so at risk of harm
- They have a reduced mental capacity so are at risk of exploitation
- They have given evidence in court that incriminates someone else
- They are transgender so at risk of sexual violence or transphobic attacks
- They have committed a sexual offence or an offence against a child

Prisoners can request VP status during induction if they believe they will be at risk on the main wings

Young Offenders and Women

Due to the small population of women who make up the UK prison population, women prisoners are categorised differently.

Women and young adults are categorised and held in either closed conditions or open conditions, according to their risks and needs.

Women's prisons may also have mother and baby units for women who are pregnant when convicted.

Person Convicted of a Sexual Offence (PCSOs)

Some prisons hold only PCSOs such as HMP Whatton and HMP Risley.

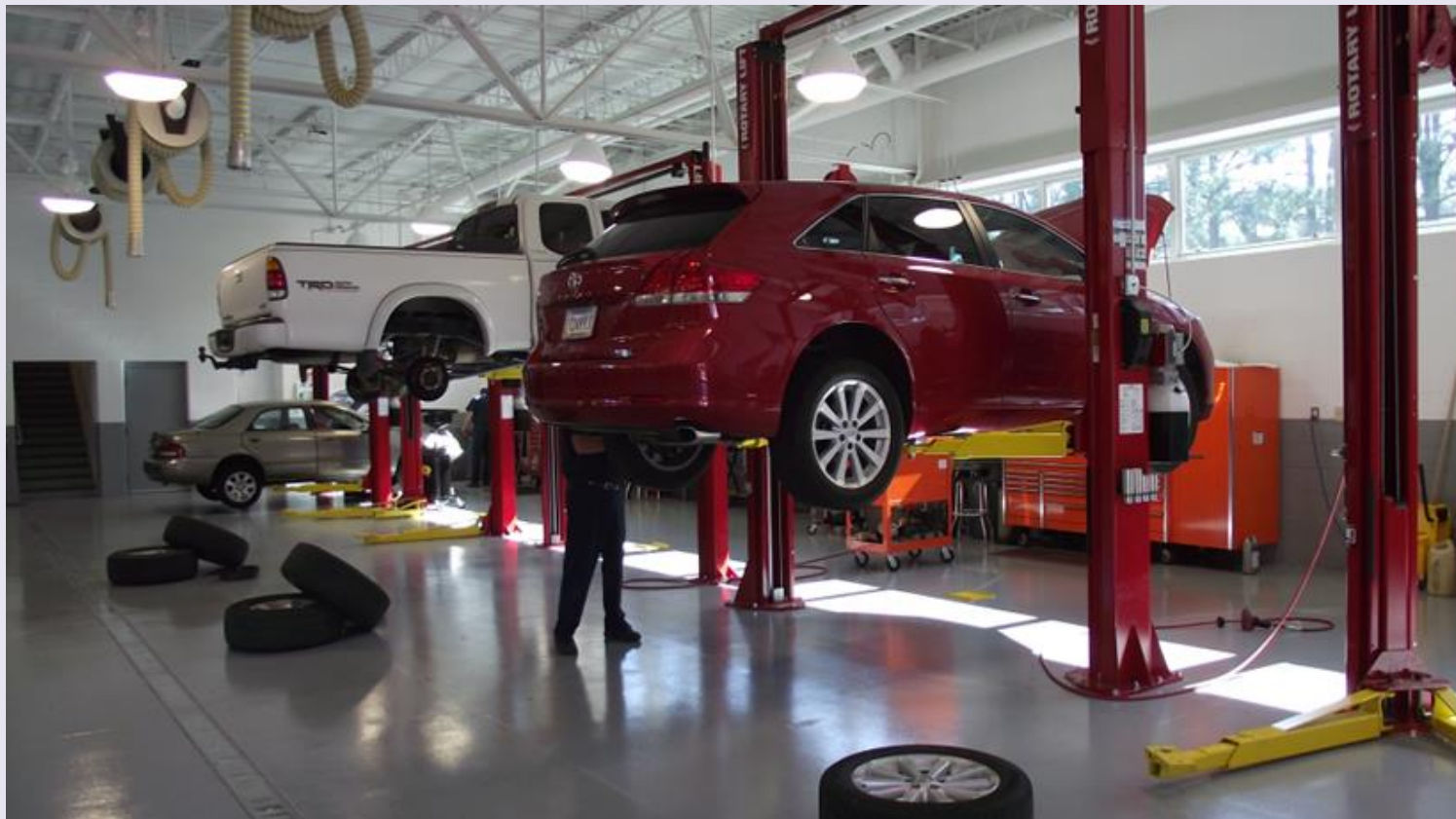
These sites are typically better equipped with specialist teams of psychologists who are experienced in delivering rehabilitation programmes specific to the nature of the crimes committed.

Separating PCSOs from general prison population also reduces the likelihood of violence between prisoners.

Life inside prison

Prisons typically have dedicated education departments, equipped with around 20 classrooms. These spaces offer a wide range of subjects, including English, mathematics, employability, business studies, and opportunities for higher education through Open University programs.

It looks like any college you'd find outside prison walls. The main difference is that there are usually no more than about 10 prisoners in a classroom at a time.



Those not participating in education are assigned to work or workshops.

Workshops may include mechanics, plumbing, bricklaying, painting and decorating, hairdressing, beauty, and textiles. These are often very popular but require a certain level of Maths and English to be eligible so many prisoners must complete these qualifications first.

Additionally, there are various jobs around the prison, such as cleaning, packaging and cooking.

Gender and offending

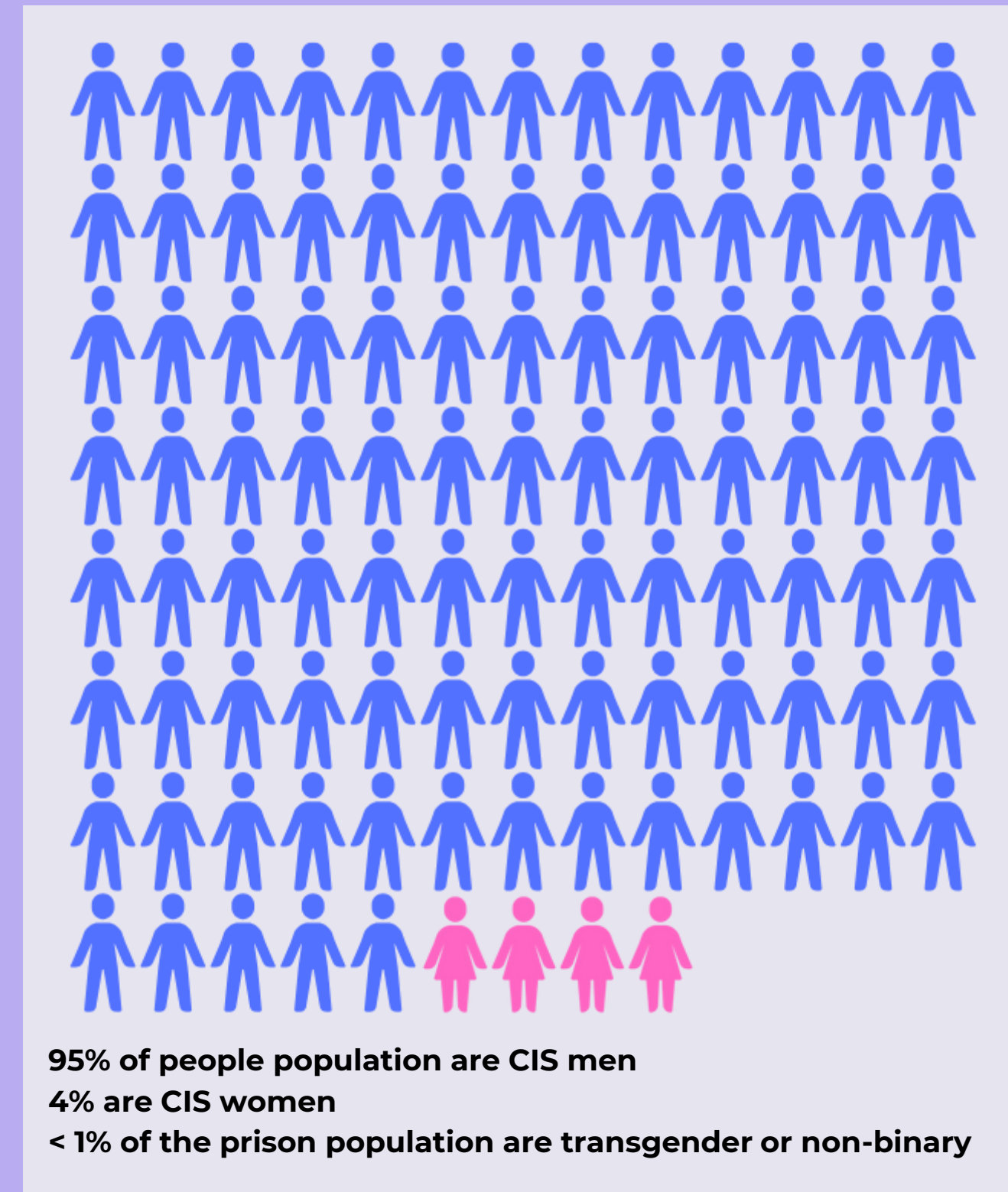
In 2024, there were 87,869 men and only 3,635 women in prisons

Men are more likely to commit certain types of crimes. Statistically, men tend to be involved in higher rates of violent crimes such as; assault, robbery, and murder.

Women tend to be convicted for different offenses: Women who are incarcerated are often involved in crimes like property crimes, drug offenses, or crimes related to survival

A significant number of women in prison have experienced a history of abuse, whether physical, sexual, or emotional. Studies suggest that up to 60% of women in UK prisons have suffered from at least one form of abuse during their lifetime, and many have been victims of domestic violence or sexual assault.

Both male and female prisoners in the UK face high rates of mental health problems. However, studies indicate that women in prison may experience mental health issues at higher rates than men, with conditions such as depression, anxiety, and post-traumatic stress disorder (PTSD) being more prevalent. However the sample size of women in prisons is much smaller.



The brains role in offending

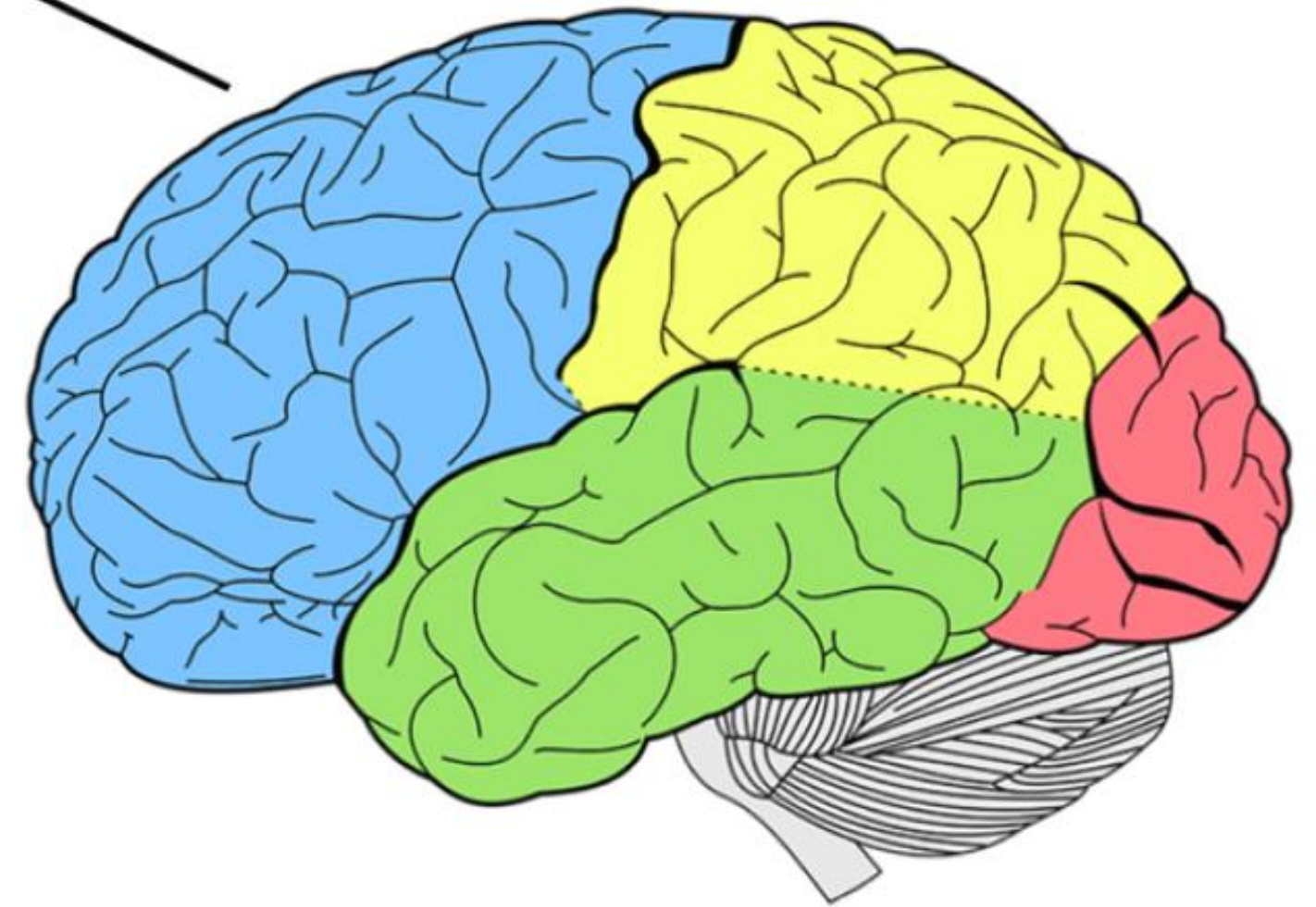
The prefrontal cortex plays a key role in decision-making, impulse control, and regulating emotions. Dysfunction or underdevelopment in this area can lead to impulsivity, poor decision-making, and a lack of empathy, which may contribute to criminal behaviour, including sexual offences.

Sexual offending has appeared prominent among offenders diagnosed with Autism in, despite a lack of evidence linking this behaviour to dysfunction in the prefrontal cortex. (Margari et al, Neuroscience & Behavioural Reviews, 2021)

Frontal Executive Functioning - DA

- Planning
- Problem Solving
- Motivation
- Judgement
- Decision Making
- Impulse Control
- Social Behavior
- Personality
- Memory
- Learning
- Reward
- Attention

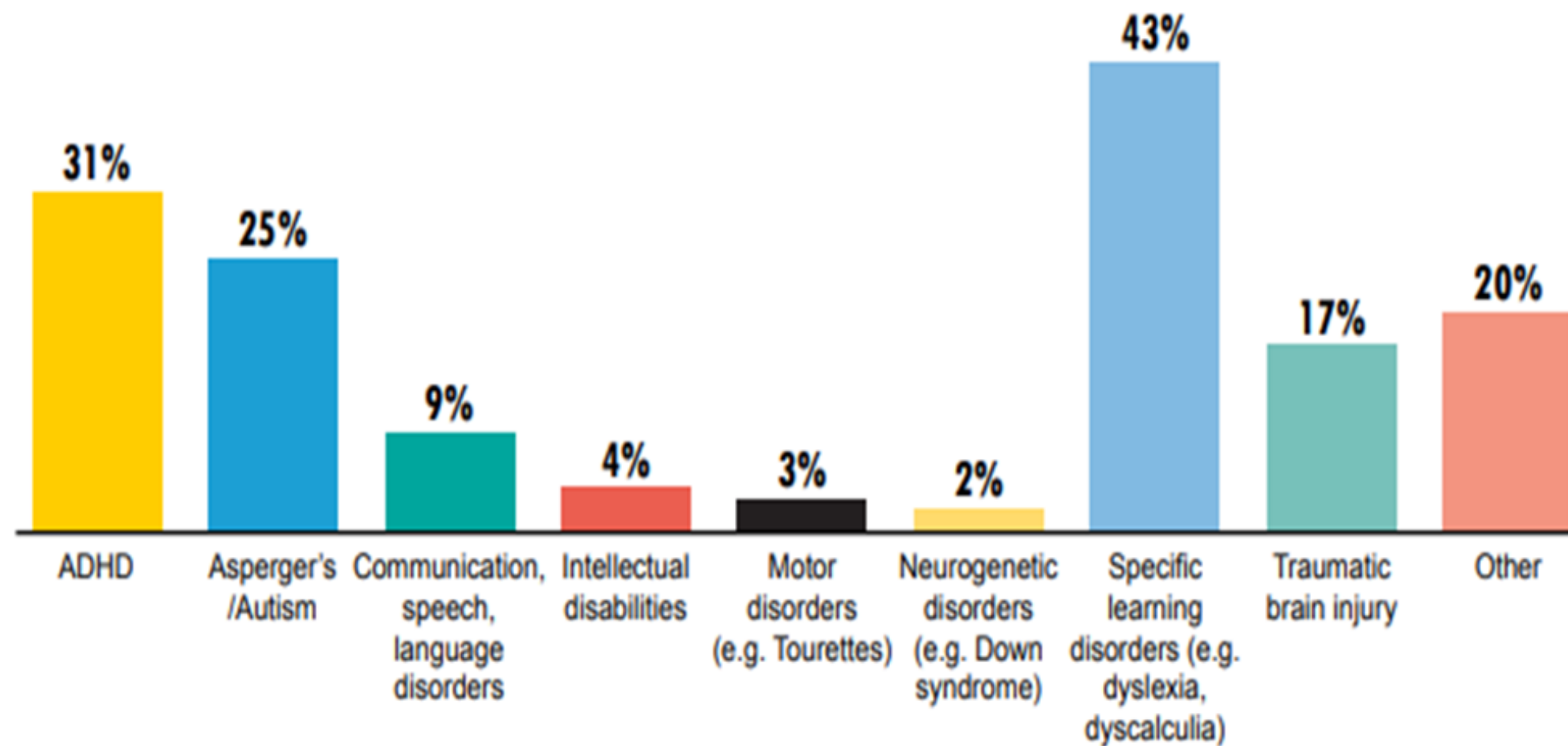
Function: “Action” Mental & Physical



The prefrontal Cortex is typically larger in women and is fully developed around two years before men. This could play a key role in the disparity between male/female offence rates

In 2021, a survey was conducted to gather information on neurodiversity within the criminal justice system and to identify the types of neurodiversity present.

NEURODIVERSE CONDITION



When I assess neurodivergent prisoners, it's evident that their challenges are rarely due to just one condition.

With prisoners, it's far more complex beyond ADHD, there's often PTSD, brain trauma, and the compounded effects of years of abuse and neglect.

They are failed repeatedly by the education system, social services, and other structures meant to support them. These systemic failures contribute to their struggles and eventual incarceration.

How we identify neurodiverse prisoners

Initial assessment

Everyone who enters prison will complete an induction questionnaire within a week of their arrival. This is a self report which asks prisoners about various aspects of their life such as memory, fine motor skills, reading, communication skills, ability to read others emotions

Section 1 - Reading, writing and maths

In your own language		YES	NO
1	Do you think you read slower than other people?		
2	Do you have to read something <u>over and over again</u> to understand it?		
3	Do you struggle to spell everyday words such as <i>they, would, said</i> ?		
4	Do you find it difficult to read or complete forms?		
5	When you read do you miss lines or find that the words 'move' on the page?		
6	Do you know the answer to a question but struggle to write it down?		
7	Do you find it difficult to learn your times tables or multiplication tables?		
8	Do you find it difficult to tell the time?		
9	Do you find it difficult to use maths in everyday life, for example adding up a canteen sheet or your shopping, or paying your bills?		
10	Do you confuse left and right?		
11	Do you find it difficult using equipment such as a knife and fork, pens, scissors, or tools?		
12	Are you clumsy or do you bump into things?		
13	Do people struggle to read your handwriting?		

Identifying needs

The responses are then assessed and given a score from 1 to 3 — with 1 indicating no additional needs, 2 indicating mild needs and 3 indicating that further support is required. If a prisoner is assessed as a level 3, they should be referred to a support specialist who will sit and complete a detailed 36-page document with the prisoner. This covers all aspects of their life, including education history, concentration and memory, medical conditions, and mental health needs.

Previous education and support			
What type of school did you go to?	Mainstream		Specialist school
	Pupil Referral Unit (PRU)		Youth Offending Unit
Other, e.g. home schooled, traveller, refugee			
Comment box to expand on the question above, e.g. If you attended a specialist school or unit, was it for behaviour or learning?			
Did you have any extra support at school?	Yes/No	Refer to RAPID screener section 5, question 6 to see if the learner self-declared. If YES, what kind of support was it? ☐ 1:1 with TA ☐ 1:1 with specialist teacher from LA ☐ Small group work – if yes which subjects, English/Maths? ☐ Study skills support/Extra tuition ☐ In-class support from a TA/LSW ☐ Pastoral support, e.g., nurture/behavioural group or learning mentor	

Providing support

The support specialist will then create a custom support plan based on the answers provided in the 36 page screener.

This is uploaded to a system that all prisons can access and use to help support prisoners in their facility, this means that even if a prisoner is transferred their support plan is accessible at their new prison.

This is particularly useful for instructors in workshops or tutors in education who work with the prisoners on a daily basis. Support could be anything from: fidget toys, notebooks for memory, coloured overlays for dyslexia, 1-2-1 sessions with the specialist to understand personal space or build conversational skills. This tailored approach helps individuals to access what they specifically need. These plans can be reviewed and updated at any time.

Disproportionate neurodiversity in prisons

Studies have shown UK prison populations are disproportionately made up of people who have neurological conditions including brain injury, ADHD, autism and learning disabilities.

In England research suggest 50% the prison population may have some neurodivergent condition (compared to 15-20% in the general population)

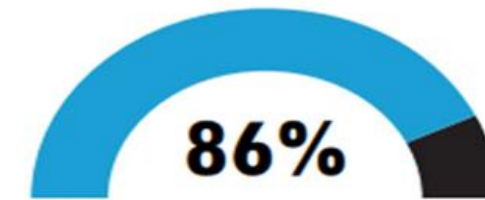
Today, around 6.3 million people in the UK have dyslexia — approximately 10% of the population.

Research into neurodiversity within prisons suggests that dyslexia may affect up to 50% of the adult prison population

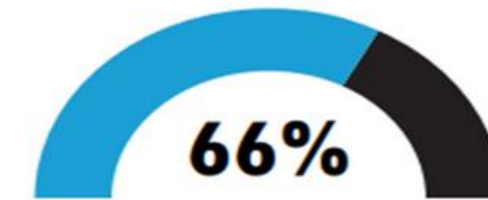
According to a recent report, if ADHD is recognised in prisons and managed appropriately, crime rates could lower by 32% for men and 41% for women. However, 80% of people in prison with ADHD are also undiagnosed.

User Voice, a charity run by people with lived experience of the criminal justice system, interviewed 118 prisoners with neurological conditions – they found there is low levels of awareness of neurodiversity in prisons.

KEY FINDINGS



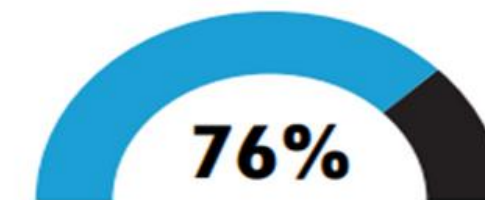
of service users had not heard the term 'neurodiversity'



of service users were not screened for neurodiverse conditions



of service users had not had any adjustments made to support their neurological needs.



of service users stated that staff in the criminal justice system did not understand their needs.

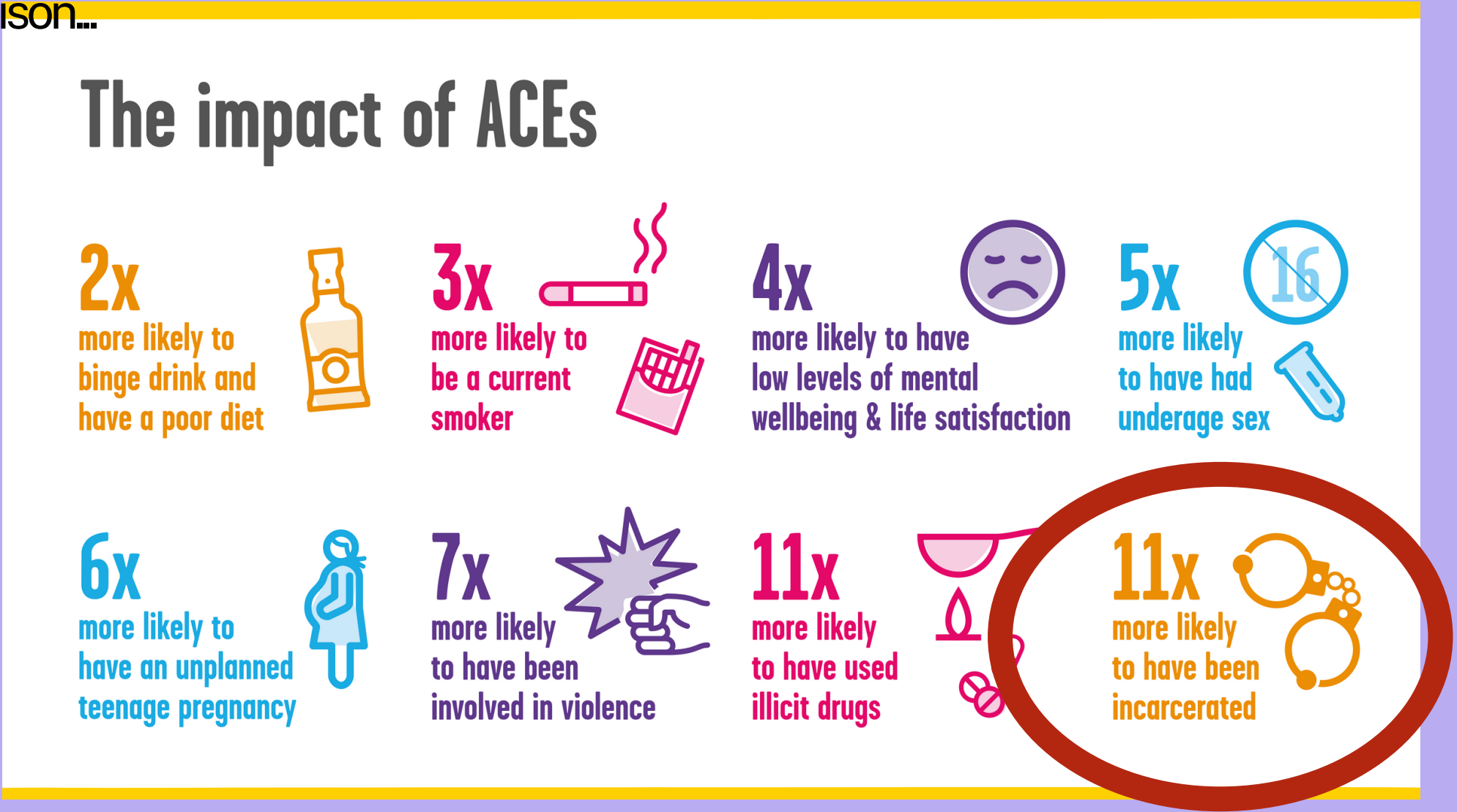


of service users had been on a programme or intervention that was designed or adapted for their needs.

ACE scores and their impact on offending

Adverse Childhood Experience Survey		
QUESTION	Yes	No
Did a parent or other adult in the household often or very often... Swear at you, insult you, put you down, or humiliate you? or Act in a way that made you afraid that you might be physically hurt?		
Did a parent or other adult in the household often or very often... Push, grab, slap, or throw something at you? or Ever hit you so hard that you had marks or were injured?		
Did an adult or person at least 5 years older than you ever... Touch or fondle you or have you touch their body in a sexual way? or Attempt or actually have oral, anal, or vaginal intercourse with you?		
Did you often or very often feel that ... No one in your family loved you or thought you were important or special? or Your family didn't look out for each other, feel close to each other, or support each other?		
Did you often or very often feel that ... You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? or Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?		
Were your parents ever separated or divorced?		
Was your mother or stepmother: Often or very often pushed, grabbed, slapped, or had something thrown at her? or Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? or Ever repeatedly hit over at least a few minutes or threatened with a gun or knife?		
Did you live with anyone who was a problem drinker or alcoholic, or who used street drugs?		
Was a household member depressed or mentally ill, or did a household member attempt suicide?		
Did a household member go to prison?		
Add up your "yes" answers – that's your ACES score		

The Adverse Childhood Experience (ACE) questionnaire is a 10-item self-report measure developed in 1985 to identify effects childhood experiences of [abuse](#) and neglect. The ACE score system has proven a strong correlation between childhood [trauma](#)/stress early in life and developing social, emotional, cognitive developmental and physical [health problems](#) in adulthood. A score of 4 or higher can have a detrimental impact on an individuals likelihood of going to prison...

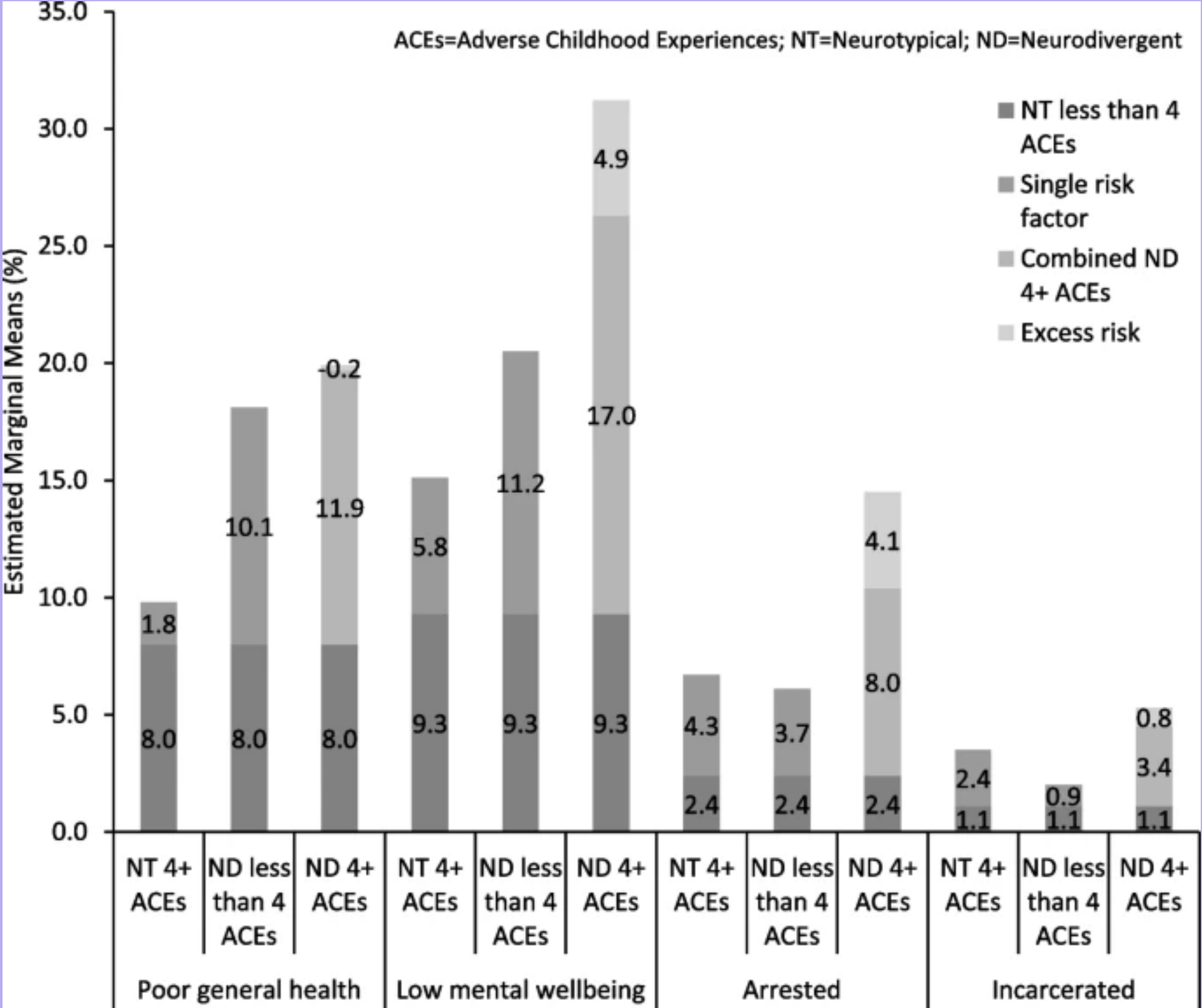


ACE scores and Neurodiversity

In 2024 research was conducted into the correlation between ACE scores and neurodivergence.

The findings show that a higher proportion of ND individuals experienced each ACE type than NT individuals and ND individuals were more likely to experience a greater number of ACEs than their NT peers.

The combination of being ND and experiencing ACEs could additively increase risks of experiencing poor wellbeing and criminal justice outcomes by a greater extent than expected. Preventing and responding to ACEs in ND populations should be a priority to reduce risks of poor health, wellbeing, and criminal justice outcomes in this population.



Wilson, C., Butler, N., Quigg, Z. et al. Relationships between neurodivergence status and adverse childhood experiences, and impacts on health, wellbeing, and criminal justice outcomes: findings from a regional household survey study in England. BMC Med 22, 592 (2024).

Addressing disparity moving forward...

In 2021, the Neurodiversity Support Manager (NSM) was introduced in prisons as part of a pilot programme. The NSM's primary aim is to increase awareness of neurodiversity within the prison environment and improve systems for identifying and supporting individuals with neurodivergent needs.

Overall, neurodiversity support has seen significant improvements in recent years, especially with the introduction of the Neurodiversity Support Manager. However, much like broader society, there is still a long way to go.

Early support systems

Conclusions from the study of ACE scores and Neurodiversity show that neurodiverse individuals are being failed from an early age to receive the support they require. The government needs to explore potential methods of protecting neurodiverse children from adverse childhood experiences whether that be through schools, charity funding or social services.

Training for Staff

Prison officers, healthcare, education and probation staff need proper training to understand neurodiverse needs and how to manage behaviours effectively and compassionately.

Post-release Support

Ensure proper support networks are in place to reduce recidivism, such as supported housing, mental health support, and employment training tailored to neurodiverse strengths.

Thank you very much
for listening!