



Birth Companions' submission to the Sentencing Council consultation 2024: The Imposition of community and custodial sentences guideline

Introduction

This submission outlines Birth Companions' response to the Sentencing Council's proposed changes to the Imposition guideline, with particular focus on the issues relating to women facing sentencing during pregnancy or the postnatal period (two years after birth).

Our submission has been developed with input from women with relevant lived experience, and our frontline staff who work with women in prisons and under probation supervision after leaving custody. Our response includes proposed revisions to the draft guideline, and comments shared by members of our Lived Experience Team.

Overall, Birth Companions strongly supports the Council's proposed changes to the Imposition guideline, though we believe elements of it need to be strengthened in order to ensure the specific needs and challenges faced by pregnant women, mothers of infants, and their babies are fully taken into account in sentencing decisions.

Throughout this submission, we recommend that references to pregnancy and birth are extended to include the postnatal period; and that the postnatal period be specified as covering the 24 months after birth. These changes will align the Sentencing Council's guidance with the critical 'first 1001 days' from conception to a child's second birthday, recognised by government as laying the foundations for long term development.¹ At Birth Companions, we believe that all efforts must be taken to avoid women spending any part of their pregnancy or postnatal period in prison custody and/or separated from an infant. Specific attention to the postnatal period in sentencing decisions is essential, not only for those pregnant women for whom a custodial sentence would see them give birth and transition into the postnatal period in prison; but also for those who face sentencing having already given birth.

In what follows, we provide detailed responses to the relevant consultation questions. Where Birth Companions suggests amendments and additions to the wording in the draft guideline, **our suggested revisions are marked in red.**

Responses to the consultation questions

Question 6: Do you have any comments on the unified thresholds section?

Birth Companions welcomes the greater clarity on the thresholds, and the factors that contribute to whether a threshold has been crossed or not.

¹ HM Govt. (2021). The best start for life: A vision for the 1,001 critical days. https://assets.publishing.service.gov.uk/media/605c5e61d3bf7f2f0d94183a/The_best_start_for_life_a_vision_for_the_1_001_critical_days.pdf

We also welcome the emphasis of the fact that *“numerous and frequent previous convictions might indicate an underlying problem (for example, an addiction) that could be addressed more effectively through a community order with relevant requirements, and will not necessarily indicate that a custodial sentence is necessary.”* This has particular relevance to women whose offending may be linked to unmet mental health need, experience of abuse, control or coercion, substance misuse, or financial need.

It is important that mitigating factors are reflected in this consideration too – including pregnancy and primary caring roles.

Question 7: Do you have any comments on the first part of the pre-sentence report section, before the list of cohorts?

We agree with the Council that more comprehensive and consistent guidance is needed across the board in relation to pre-sentence reports (PSRs), and that there are very few instances where a PSR would be unnecessary.

The effectiveness of even the most comprehensive PSR depends, of course, on the willingness of sentencers to fully engage with the information included in them. The Imposition guideline in its current form does not engage sufficiently with the fact that in many cases PSRs, were they do exist, are not given sufficient consideration. As can be seen in the lived experience contributions summarised at the end of this submission, many women in our Lived Experience Team had PSRs that recommended community sentences, and highlighted the potential impact of custody, yet these women were all sent to prison.

“My pre-sentence report advised against custodial sentence, but that was never even mentioned or considered in court.”

“I also had a PSR that recommended alternative to custody, but that was totally ignored when it came to sentencing.”

“It felt like my sentencer never even read the PSR – they just shoved it under the table.”

“It was exhausting to have to go round and get so much evidence and support from so many sources, character references and everything, to build up the case for a community sentence, and then not even have it looked at.”

We suggest that the guidance around PSRs is strengthened, to ensure not only that PSRs are seen as necessary, but that sentencers understand the importance of taking these into full account when considering sentencing options, and follow their recommendations or give clear justification for not doing so.

Question 8: Do you agree with the general inclusion of, and specific cohorts included, in the list of cohorts in the pre-sentence report section?

We agree with this list. We hope that work can be done in addition to this, and in line with the recommendations of Lord Farmer,² to make PSRs mandatory for all females, to ensure that the

² Lord Farmer. (2019). Importance of strengthening female offenders’ family and other relationships to prevent reoffending and reduce intergenerational crime. <https://www.gov.uk/government/publications/farmer-review-for-women>

circumstances and needs of those who may be pregnant or primary carers can be taken into account.

This is important in determining sentence type, but also, as the Council recognises, in determining the suitability of particular requirements. We often see women who are pregnant or caring for young children subject to requirements that they are unable to meet because of these circumstances; as well as instances in which adherence to requirements would severely curtail their access to routine and essential maternity care. For example, requirements relating to contact with persons under the age of 18, and the use of electronic monitoring, can impact on women's ability to attend normal healthcare locations.³

There is a need for significant investment in community services to ensure that the needs of women are met outside the prison system. Where community services are underfunded, inconsistent, or non-existent, requirements laid out PSRs often cannot be followed; and sentencers may be reluctant to consider community alternatives to custody where services are deemed inadequate.

Question 9: Do you have any comments on second part of the PSR section, specifically on the court giving an indication to Probation, adjournments and on committal?

N/A

Question 10: Do you agree with the inclusion of, and information proposed on deferring sentencing?

We support the specification of young adults as a key group for deferral. We suggest that the guidance could also give pregnant and postnatal women as a specific example of relevant "transitional life circumstances".

Question 11: Do you have any comments on the Purposes and Effectiveness of Sentencing section?

We welcome the emphasis of the fact that both community and custody can fulfil all the purposes of sentencing, and that sentencers should take full account of the individual and their personal circumstances in tailoring the most suitable sentence.

Question 12: Do you have any comments on the new section on young adult offenders?

It is essential that sentencers recognise the accumulated disadvantage faced by pregnant or postnatal girls and women who are:

- young (typically under 25);
- from minoritised communities;
- and/or are care experienced.

³ Birth Companions and Clinks. (2021). A Window of Opportunity: Understanding the needs and experiences of pregnant women and new mothers in contact with the criminal justice system in the community in England. <https://www.birthcompanions.org.uk/resources/264-a-window-of-opportunity>

There is a real risk that these factors, which are recognised elsewhere in sentencing guidance, may be overlooked or not adequately considered when sentencing those who are pregnant or have recently given birth.

This is especially relevant to the overlap with the age and/or lack of maturity mitigating factor, as pregnant or postnatal girls and women may be perceived as more mature than they are, or subject to “adultification”⁴ by virtue of having become pregnant. This will often not reflect the reality of their situation and care will need to be taken to ensure that immaturity, and neurodivergence, are properly factored in where women and girls are being sentenced under the age of 25.

Question 13: Do you have any comments on the new section on female offenders?

We welcome the focus on encouraging courts to consider the widest range of circumstances and full range of sentencing options, in particular through a gender-specific framework recognising the fundamental differences between female and male offending, and the differing impacts of custody on women and men.

Too often we see women entering prison where the full nature of their needs and experiences, and those of their young dependent children, have not been taken into account. This is particularly the case when relating to their experiences of trauma, abuse, poverty, unmet mental health need, and the health considerations linked to pregnancy and early motherhood.

It is vital that no pregnant woman or mother of children under the age of two is sentenced without a detailed pre-sentence report, allowing the impact of any sentence on her and her infant to be taken into full consideration when weighing up options. This should be reiterated in this section.

There are clearly evidenced risks to women in the postnatal period, from conditions such as sepsis, thrombosis and thromboembolism, to acute mental health risks which are linked to high numbers of deaths due to drug and alcohol use or suicide.⁵ The HMPPS policy framework relevant to the care of pregnant and postnatal women in prison extends the postnatal period to 24 months, to cover the entirety of the critical ‘first 1001 days’ from conception to a child’s second birthday. Mother and Baby Units also hold mothers whose babies may be up to two years of age. This guideline should therefore cover the same period, in order to reflect the widely recognised physical and mental health needs of both mother and child, and in particular the significant, long-term trauma associated with separation during this critical time.^{6,7}

Accordingly, throughout the explanatory note on female offenders, the references to pregnancy should be amended to specify:

- “pregnancy *and the postnatal period, extending up to 24 months after birth*”.

We strongly support the proposal to add further detail to the question of whether custody is avoidable, by stating that “*a custodial sentence may become disproportionate to achieving the purposes of sentencing where there would be an impact on dependants, including on unborn*”.

4 Youth Justice Legal Centre. (2023). Dare to Care: Representing care experienced young people.

<https://yjlcc.uk/sites/default/files/attachments/2023-09/YJLCC-Guide-DARE2CARE-16-D%20%281%29.pdf>

5 MBRRACE-UK. (2023). Saving Lives, Improving Mothers’ Care. <https://www.npeu.ox.ac.uk/mbrance-uk/reports>

6 Abbott, L., Scott, T. & Thomas, H., 2023. Compulsory separation of women prisoners from their babies following childbirth: Uncertainty, loss and disenfranchised grief. *Sociology of Health & Illness*, 45(5), pp.971-988.

7 First 1001 Days Movement. (2022). The First 1001 Days: An Age of Opportunity. <https://parentinfantfoundation.org.uk/1001-days/resources/evidence-briefs/>

children where the offender is pregnant. Courts should avoid the possibility of an offender giving birth in prison unless the imposition of a custodial sentence is unavoidable."

The focus in this important addition on birth is, however, too limiting. It is likely to narrow the risks to be considered in the minds of sentencers to the timing of the estimated due date, rather than the risks across the entirety of pregnancy and the postnatal period. We therefore recommend this is amended to the following:

- *"a custodial sentence may become disproportionate to achieving the purposes of sentencing where there would be an impact on dependants, including on unborn children where the offender is pregnant. Courts should avoid the possibility of an offender navigating the risks associated with pregnancy, birth and the postnatal period (up to 24 months after birth) in prison custody unless the imposition of a custodial sentence is unavoidable."*

Question 14: Do you have any comments on the imposition of community orders section?

N/A

Question 15: Is the new guidance on determining the length of a community order and how courts should consider time remanded in custody or on qualifying curfew clear?

N/A

Question 16: Do you have any comments on the new information against each of the requirements in the requirements section?

We welcome the reference to considering accommodation and family situation, including dependants and unborn children, in determining the ability to comply.

Question 17: Do you agree with the new approach to rehabilitative requirements in the Community Order Levels section?

We welcome the heightened focus on the suitability of sentences for offenders based on understanding of personal needs and circumstances. This is, of course, dependent on the quality of an accompanying PSR; adequate engagement with the PSR from sentencers; and adequate knowledge of the specific needs associated with, for example, pregnancy and the critical first 1001 days.

We also support the distinction being drawn between punitive requirements, and requirements focused on rehabilitation, based on an individual's needs. A primary purpose of sentencing pregnant women and mothers of infants should always be rehabilitation, and it is vital that sentencers fully consider the increased rehabilitative opportunities community alternative to custody provide.

There is a need for significant investment in community services to ensure that needs of women are met outside the prison system. Where community services are underfunded, inconsistent, or non-existent, rehabilitative requirements are often difficult or impossible to follow.

Question 18: Do you have any other comments on the Community order levels section?

No further comments.

Question 19: Do you have any comments on the Imposition of custodial sentences section? We welcome comments both on content and format/structure.

We welcome the proposed reference to unborn children where the offender is pregnant, based on the fact that a custodial sentence may become disproportionate where there would be an impact on dependants. However, as outlined earlier, the focus in this important addition on birth is too limiting, narrowing the risks to be considered in the minds of sentencers to the timing of the estimated due date, rather than the risks across the entirety of pregnancy and the postnatal period. We therefore recommend this is amended to the following:

- *“a custodial sentence may become disproportionate to achieving the purposes of sentencing where there would be an impact on dependants, including on unborn children where the offender is pregnant. Courts should avoid the possibility of **an offender navigating the risks associated with pregnancy, birth and the postnatal period (up to 24 months after birth) in prison custody unless the imposition of a custodial sentence is unavoidable.**”*

We welcome the fact that the guideline has been robustly reviewed in order to reflect new information and evidence. On this basis, we feel it is vital that the references to pregnancy and dependent children include a link to an expanded explanation of the specific nature and extent of the risks identified to women and babies held in custody. This could mirror the text proposed by Birth Companions to support the new mitigating factor on pregnancy:

- *“**The impact of custody on an offender who is pregnant or postnatal can be harmful for the physical and mental health of both the offender and the unborn/ newborn baby/ infant.**^{8,9}*

Women in custody are likely to have complex health needs which may increase the risks associated with pregnancy and the period following birth for both the offender and the baby/ infant.¹⁰ Pregnancy and the postnatal period are a high-risk time in terms of severe mental ill-health in women. There is significant risk of suicide or death as a result of substance use, as evidenced by the annual reports on maternal mortality.¹¹ The mental health risks are exacerbated by the uncertainty faced by those entering prison as to whether they will be able to access a place within a Mother and Baby Unit or have to deal with the trauma of separation. There are also major risks to the physical health of mother and baby, including premature and unassisted labour, pre-eclampsia, haemorrhage, and sepsis.¹²

8 Knight M., & Plugge E. (2005). Risk factors for adverse perinatal outcomes in imprisoned pregnant women: A systematic review. *BMC Public Health*, 5, 111.

9 Pitfield, C., Binley, J., Soni, S., Pontvert, C. & Callender, M. (2023). A rapid evidence review of clinical risk factors for poor perinatal mental health in women’s prisons in England. *The Journal of Forensic Psychiatry & Psychology*. pp.1-21.

10 NHS England (2022) National service specification for the care of women who are pregnant or post-natal in detained settings (prisons, immigration removal centres, children and young people settings). <https://www.england.nhs.uk/wp-content/uploads/2022/06/B1708-National-service-specification-for-the-care-of-women-who-are-pregnant-or-post-natal-in-detained-settings.pdf>

11 MBRRACE-UK. (2023). Saving Lives, Improving Mothers’ Care. <https://www.npeu.ox.ac.uk/mbrrace-uk/reports>

12 *ibid.*

NHS England states that "it is because of the complexities for women in detained settings that all pregnancies must be classed as high risk."¹³ The Royal College of Midwives and the Royal College of Obstetricians and Gynaecologists both emphasise the need for alternatives to prison to be used in sentencing pregnant women wherever possible.^{14,15} Research shows there can be significant difficulties accessing equivalent and appropriate healthcare, including urgent medical assistance or specialist maternity services in custody,^{16,17} and appropriate mental health provision.¹⁸

Many women who give birth during their time in prison, or who enter prison during the postnatal period, will be separated temporarily or permanently from their baby, interrupting breastfeeding and risking significant trauma in a time at which the mother-baby attachment is shown to be crucial in supporting long-term development.¹⁹

We also support the points made in Level Up's response to this consultation, relating to mandatory custodial sentences. The harm and risk that the custodial environment poses to pregnant and postnatal women and their babies is universal, regardless of offence. This was recognised in a recent Court of Appeal judgment, in which a woman's pregnancy was one of the factors considered in the decision to suspend her sentence, despite her original conviction being for a firearms offence carrying a mandatory minimum term of five years.²⁰ The revised guideline should therefore support sentencers to confidently factor in pregnancy, the postnatal period and a child's early development in all cases. We recommend inclusion of wording along the following lines:

- *For offences that carry a sentence of more than two years, or a mandatory minimum custodial sentence, a woman's pregnancy and the postnatal period (up to two years after birth) should be considered as 'exceptional circumstances'.*

This is in recognition of the fact that the imposition of a mandatory minimum term on a woman who is pregnant or postnatal results in a disproportionately severe sentence when compared with the imposition of such a sentence upon a person who is not affected by such considerations.

Question 20: Do you agree with the restructure and new factor in the table of factors indicating it may or may not be appropriate to suspend a custodial sentence?

We would encourage inclusion of pregnant women and mothers of children up to the age of two years old in the table on factors to be weighed in considering whether it may be appropriate to suspend a custodial sentence.

13 NHS England. (2022). National service specification for the care of women who are pregnant or post-natal in detained settings (prisons, immigration removal centres, children and young people settings). <https://www.england.nhs.uk/wp-content/uploads/2022/06/B1708-National-service-specification-for-the-care-of-women-who-are-pregnant-or-post-natal-in-detained-settings.pdf>

14 RCM. (2018). Position Statement: Perinatal women in the criminal justice system. www.rcm.org.uk/media/3640/perinatal-women-in-the-criminal-justice-system_7.pdf

15 RCOG. (2021). RCOG Position Statement: Maternity care for women in prison in England and Wales.

<https://www.rcog.org.uk/media/wwhogsk5/rcog-maternity-care-and-the-prison-system-position-statement-sept-2021.pdf>

16 Abbott, L., Scott, T. & Thomas, H. (2023). Experiences of midwifery care in English prisons. *Birth*, 50(1), pp.244-251.

17 Davies, M. et al. (2022). Inequality on the inside: Using hospital data to understand the key health care issues for women in prison. <https://www.nuffieldtrust.org.uk/research/inequality-on-the-inside-using-hospital-data-to-understand-the-key-health-care-issues-for-women-in-prison>

18 Pitfield, C. et al. (2023). A rapid evidence review of clinical risk factors for poor perinatal mental health in women's prisons in England. *The Journal of Forensic Psychiatry & Psychology*. DOI: 10.1080/14789949.2023.2212657.

19 First 1001 Days Movement. (2022). The First 1001 Days: An Age of Opportunity. <https://parentinfantfoundation.org.uk/1001-days/resources/evidence-briefs/>

20 Bassaragh, R. v [2024] EWCA Crim 20 (25 January 2024).

Question 21: Do you have any comments on the suspended sentence order section, including the guidance on requirements of a suspended sentence order?

N/A

Question 22: Is the guidance on determining the operational and supervision periods of a suspended sentence order and how courts should consider time remanded in custody or on qualifying curfew clear?

No comments.

Question 23: Do you think that the flowchart aligns with the proposed new structure in the guideline, and do you have any comments on the sentencing flow chart?

Yes, and we strongly support the specific reference to unborn children in here.

Question 24: Do you have any comments on the resource assessment and/or on the likely impact of the proposals on sentencing practice?

Guidelines can be hugely influential, but only if they are accompanied by significant work to ensure sentencers feel confident in applying them – this means training and resources are needed to ensure sentencers understand the risks and complexities associated with pregnancy and early motherhood in custody, so adequate weight is given in line with the guideline.

The consultation's commentary on sentencer's application of previous convictions in determining severity, which is a key driver for the review of the imposition guideline, for example, shows the potential consequences of sentencer discretion.

There is a need for significant investment in community services and support from probation to ensure needs of women are met outside the prison system. We would welcome recognition of this from the Sentencing Council in communications around this revised guideline, and in the Council's response to planned changes in the Sentencing Bill.

Question 25: Are there any equalities issues relating to the proposed revised guideline that should be addressed?

As mentioned earlier in relation to young offenders, it is essential that sentencers recognise the accumulated disadvantage faced by pregnant or postnatal girls and women who are:

- young (typically under 25);
- from minoritised communities;
- and/or are care experienced.

There is a real risk that these factors, which are recognised elsewhere in sentencing guidance, may be overlooked or not adequately considered when sentencing those who are pregnant or have recently given birth.

This is especially relevant to the overlap with the age and/or lack of maturity mitigating factor, as pregnant or postnatal girls and women may be perceived as more mature than they are, or

subject to “adulthood”²¹ by virtue of having become pregnant. This will often not reflect the reality of their situation and care will need to be taken to ensure that immaturity, and the presence of neurodivergence, are properly factored in where women and girls are being sentenced under the age of 25.

Question 26: Are there any other comments you wish to make on the proposed revised guideline?

No further comments.

Evidence from the Birth Companions Lived Experience Team

In February 2024 we held a focus group with six members of the Birth Companions Lived Experience Team, all of whom had experienced sentencing while pregnant or postnatal.

The discussions were led by the women, who had all reviewed the consultation document in detail in advance of the meeting. Their responses are outlined below, under themed headings.

The need for greater emphasis on the postnatal period in sentencing guidelines

Several women spoke at length about the specific challenges of navigating custodial sentences shortly after birth, and the importance of considering community alternatives in order to avoid separation from newborns, and protect the mental and physical health of mothers and infants.

"I gave birth while awaiting sentencing. When I was given a custodial sentence, I was separated from my newborn. We were "only" separated for 10 days – they were the worst 10 days of my life. I was breastfeeding at the time, and I ended up getting mastitis as I couldn't feed my baby. My baby wouldn't take a bottle, and I was so worried he wouldn't be feeding enough. The mental and physical strain of separation was enormous, but the reunification on the MBU after 10 days was horrific too. My newborn had forgotten who I was in that time, and it took us time to rebuild our bond."

"Sentencers are so focused on the due date, but after birth you are presented with a whole new set of risks. I had postnatal depression, I was crying all the time, and that can really impact how you look after your baby."

"Judges don't understand how difficult it is to access the services you need postnatally from within the prison. Being unable to access the necessary mental health support could lead to women taking their own lives."

"Separation from a baby – even temporary – I would not wish that on anyone. It was literally soul destroying."

21 Youth Justice Legal Centre. (2023). Dare to Care: Representing care experienced young people. <https://yjlc.uk/sites/default/files/attachments/2023-09/YJLC-Guide-DARE2CARE-16-D%20%281%29.pdf>

"There are so many physical changes after birth – my body didn't feel the same for a year after birth. But I couldn't even look at my body properly cos there are no mirrors in prison. I couldn't ask for the support I needed. I couldn't access the medical reassurance you might want, and I was unable to access my own networks of support and reassurance."

"There is a constant worry for mums, particularly first-time mums, about what impact their sentence is having on their baby's development."

"Once a child is involved, it's all so much more serious – you are impacting them too. You are giving them an anxious mum. You might impact their development. There are huge impacts of separation. Why can't they consider community MBUs, or houses for women and babies?"

"My child is a teenager now, and has had a lot issues with mental health and I believe it's from the stress of everything. I really believe it started from the prison and the aftermath of me being released with no real support network. As a mum, I really feel I passed that trauma down to her. I felt guilt for everything. Sentencers need to know the damage long term. It's never a 2 or 3 year sentence, it's a life sentence without the right support. I wonder how many children who were born in prison have mental health issues now."

The importance of strong PSRs, that are adequately engaged with by sentencers

All the women we spoke with agreed that comprehensive PSRs, taking full account of the individual and their personal circumstances, are essential for the appropriate sentencing of women during pregnancy and the postnatal period. However, most of the women we spoke with told us that although they had strong, comprehensive PSRs, sentencers in their cases paid little or no attention to the information and recommendations within them.

"PSRs don't even work – they don't care about them."

"My pre-sentence report advised against custodial sentence, but that was never even mentioned or considered in court."

"I also had a PSR that recommended alternative to custody, but that was totally ignored when it came to sentencing."

"It felt like my sentencer never even read the PSR – they just shoved it under the table."

"It was exhausting to have to go round and get so much evidence and support from so many sources, character references and everything, to build up the case for a community sentence, and then not even have it looked at."

"The judge couldn't be less interested in my PSR – she said, "well you know lots of women have successfully had babies in prison." There was no consideration of my situation, my mental health, my job, my living situation."

Sentencers' attitudes towards community sentences

There was a strong sense among the group that magistrates and judges do not see community

sentences as able to fulfil all the purposes of sentencing. For many of the women, community sentences would have enabled them to maintain care of their infants, access the full range of healthcare care needed at that crucial time, and make use of vital support networks. Yet the sentencers appeared not to even consider the possibility of a community alternative to custody.

"Sentencers view community sentences as a walk in the park, like you are not being punished."

"The judge I had went above and beyond what it said in the PSR and what the prosecutors said – everyone was going for a community sentence, but she on her own went beyond that. It was like she felt that community sentences are too gentle, too soft."

"Judges could just decide to go for a longer or harsher sentence if the whim takes them. It all depends on the judges you get, and their attitudes to community sentences."

Many of the women we spoke to had been sentenced for offences that stemmed from coercion, control and abuse by men. There was a strong sense among them that this context had not been sufficiently considered by sentencers; and that, in two different cases, custodial sentences had been given over community to reflect the very harsh or lengthy sentences of men involved in their cases.

"I was on a conspiracy charge, and afterwards I was told that I got a harsher sentence just so they could justify the really long sentences the other defendants – all men – got."

Women also spoke of perceived attitudes among sentencers towards pregnant and postnatal women, and the impacts of those attitudes on decision-making.

"It's like there's this idea that if a woman commits a crime, she hasn't put her family first, and so some sentencers will 'come down hard' because of that. A community sentence was never even spoken about, not even an option on the table."

"There's some worry that a woman would get pregnant on purpose to avoid a custodial sentence – it's like this widespread narrative among judges. But how would that work in practice? I didn't even know I was going to get arrested, how could I have planned this?!"

The need for strong services in the community

Many women noted that sentencers can be reluctant to consider community options where services and support networks are deemed to be lacking or unavailable.

"Sentencers might go against community sentencing on the basis of a lack of support network in the community."

"It's alright having community sentences to avoid custodial sentences, but there are hurdles there too, if you don't have the support around childcare to allow you to meet requirements."

"It's a postcode lottery around what's available in your area."

Women noted that sentencers may not always be familiar with what services and options *do* exist in the community, to enable women to carry out their punitive and rehabilitative requirements.

"Are they assuming that these community options don't exist? Or are they assuming they do exist, where they don't? Judges just don't know what's available; probation do, and that why they put that info in the PSRs."

"I recently spoke to a sentencer who said they thought that all female offenders should have a psychological assessment. So many women are involved in crime due to men, due to trauma. If they don't want to take PSRs into account, they need to start spending money on psych assessments, therapy, counselling."

For further information on this submission, or other aspects of Birth Companions' work with pregnant and postnatal women in contact with the criminal justice system, please contact Kirsty Kitchen, Head of Policy and Communications: kirsty@birthcompanions.org.uk.