Australia’s prison population has a much different demographic profile to the population in general: it is composed mostly of young males, with a significant overrepresentation of Aboriginal and Torres Strait Islanders (ABS 2012; AIHW 2013). At 30 June 2012, there were over 29,000 people in prisons throughout Australia (sentenced or unsentenced) (ABS 2012). Around half of all sentenced prisoners were expecting to serve less than 2 years in prison (median sentence length of 23 months) and as a result there are thousands of people being released into the community each year (ABS 2012). This means that the health issues and concerns of prisoners are also those of the general population.

The National Prisoner Health Data Collection is the main source of data about the health of prisoners. Information is collected at prison entry, while prisoners are in custody, pre-release and post release. In 2012, data were collected from 794 prison entrants, about 4,000 prisoners who visited the prison clinic, more than 9,000 prisoners taking medication and 387 prison dischargees. This snapshot presents some findings from the collection.

The data show that the health profile of the prison population is very different to the general community (see AIHW 2013). People often arrive at prison with high rates of mental health problems, certain chronic conditions and communicable diseases. They also exhibit high rates of alcohol misuse, tobacco smoking and illicit drug use prior to prison entry. Most prisoners, however, report improvements in their physical and/or mental health during their time in prison.

### Physical and mental health

- One in 3 prison entrants (32%) reported having 1 or more chronic conditions—asthma was the most common (24%), followed by arthritis (7%) and cardiovascular disease (5%).
- About one-third (34%) of female prison entrants and 21% of male entrants tested positive to hepatitis C compared with an estimated national prevalence of 1.4% (Butler et al. 2011).
- A large proportion of entrants reported a history of mental health-related issues; almost 2 in 5 (38%) reported having ever been told they had a mental health disorder.
- On reception to prison, about one-quarter (26%) of prison entrants were referred to mental health services for observation and assessment, and 20% of all prisoners took medications for mental health-related conditions while in custody.

### Risky health behaviours

- More than 4 in 5 prison entrants (84%) reported being a current smoker—about 5 times the rate of the general community.
- Almost half (46%) of all prison entrants reported drinking alcohol at risky levels before imprisonment, and 7 in 10 had used illicit drugs in the 12 months before entering prison.
Changes during incarceration

- More than half (57%) of prisoners about to be released felt their physical health had got 'a little better' (20%) or 'a lot better' (37%) since being in prison, and 47% that their mental health became a little or a lot better.
- While about one-third (35%) of prison dischargees tried to quit smoking while in prison, only 8% were successful.
- Indigenous prisoners about to be released were more likely than their non-Indigenous counterparts to report positive changes to their health while in prison (Figure 5.12).

Figure 5.12

Note: Excludes Western Australia as it did not participate in the 2012 National Prisoner Health Data Collection. These data should be treated with caution due to low participation rates among prisoners preparing for release from prison. Source: AIHW 2013: tables A2 and A10.

Prisoners due to be released from prison, self-rated changes in physical and mental health while in prison, by Indigenous status, 2012 (per cent)
What is missing from the picture?
Jurisdictional coverage of the National Prisoner Health Data Collection has improved in recent years, but is still incomplete; in 2012, all jurisdictions except Western Australia participated. 2012 was the first year where information about prisoners preparing to leave prison was collected, and there was a relatively low participation rate among these people (about 28% compared with 60% of entrants).

The AIHW is working with the jurisdictions to improve coverage and participation rates for the next data collection, currently scheduled to be conducted during 2015, actively engaging with jurisdictions to ensure the information to be collected will be of good quality and useful for policy and service delivery purposes within jurisdictions. At this stage, all jurisdictions except New South Wales will be participating in the 2015 collection.

Where do I go for more information?

References