# 2 Overview

# 2.1

### Prison health related environment

Prisons are not generally considered to be environments which are conducive to good health. They are often overcrowded and hostile. During 2007–08, the average daily number of prisoners in prison meant that prisons were used at 105 per cent of the capacity they were designed for (SCRGSP 2008).

Prisoners often arrive with a number of physical and mental health problems, and opportunities for exercise and fresh air outside cells is limited. During 2007–08, the average time prisoners spent not confined to their own cells was 10 hours per day (SCRGSP 2008). For the remaining 14 hours in each 24-hour period, prisoners were locked in their cells.

There are also a number of issues specific to health in a prison environment, including tobacco smoking, injecting equipment, dependent children, condom availability and mental health.

# Tobacco smoking in prisons

Smoking is banned or restricted in most enclosed public places in Australia, and increasingly in outdoor public areas and even private vehicles. The issue of whether or not to allow smoking in prisons is complex, given the very high proportion of prisoners who are smokers (see Chapter 5).

Partial or total smoking bans in prisons have been introduced in Australian states and territories and other Western countries (McCarthy & Brewster 2009). In New South Wales, Victoria, Queensland and Western Australia, programs or interventions are in place to assist prisoners to give up smoking or reduce the amount they smoke. Interventions include education and communication campaigns, increasing the cost of tobacco, limiting places where prisoners can smoke, nicotine replacement therapy and cessation support (Department of Corrective Services WA 2009; McCarthy & Brewster 2009, Queensland Corrective Services 2009, Stockman 2009). The National Health and Medical Research Council (NHMRC) has also funded a smoking cessation project (from 2005–2009) among New South Wales male prison inmates (UNSW 2009).

Interest in quitting smoking among prisoners is high. The 2009 NSW Inmate Health Survey found that 85% of current smokers wanted to quit, and over half (55%) had attempted to quit or reduce the amount they smoked in the previous year (Indig et al. 2010). The 2003 Victorian Prisoner Health Survey found 50% of prisoners wanted to address their smoking, drinking, drug or gambling problems (Deloitte Consulting 2003).

Barriers to quitting among this population include a strong smoking culture in prison, high levels of nicotine dependence, mental illness, limited access to nicotine replacement therapy and cessation programs, boredom and stressful events such as prison transfer, family and legal stressors (McCarthy & Brewster 2009).

### Mental health

It is well established that people with mental illness are incarcerated at a higher rate than the general population, and that prisoners have higher rates of psychological distress and mental illness than the general population (Senate Committee on Mental Health 2006, Butler et al. 2005). The difference is particularly pronounced for serious mental illness (Ogloff et al. 2006). The experience of incarceration and the prison environment itself may also have a detrimental effect on mental health (Velamuri & Stillman 2007), and imprisonment can be a more onerous experience for people with mental illness than for those without.

The desirability of reducing the number of people with a mental illness who are incarcerated, and avoiding imprisonment of people because of their mental illness, has contributed to an increased interest in alternative approaches to people whose offending is linked to mental illness, such as mental health courts and police-based diversion programs.

For those people with mental health problems who are imprisoned, the National Statement of Principles for Forensic Mental Health (2002) affirms that health services available in prison should be equivalent to that available in the general community. The Standard Guidelines for Corrections in Australia (2004) stipulate that prisoners with mental health issues should be provided with appropriate services, discharge planning for the continuation of treatment after release and access to specialist mental health care facilities as required.

### Injecting equipment

Blood-borne viruses can be transmitted via the sharing of needles (Butler et al. 2004b). According to a report by the National Centre in HIV Epidemiology and Clinical Research (NCHECR), needle and syringe exchange programs (NSP) in the general population have directly averted an estimated 32,000 new HIV infections and almost 97,000 new hepatitis C virus infections during 2000–2009 (NCHECR 2009b). The report estimated that for every dollar invested in NSPs, more than four additional dollars were returned during the 10 years in direct health care related cost savings. NSPs have been available in prisons in some countries for over 10 years, including Switzerland, Germany, Spain, Moldova, Belarus and Kyrgyzstan. These programs have been shown to consistently improve prisoner health and reduce needle sharing in prison while not undermining institutional safety or security (Lines et al. 2005). Currently there are no regulated NSPs in Australian prisons.

While no Australian prison provides access to sterile injecting equipment, in some jurisdictions bleach or bleach alternatives (which can be used to sterilise some injecting equipment) are available (Dolan 2000). Disinfection of used injecting equipment can theoretically reduce the likelihood of transmission of blood-borne viruses and other pathogens. Laboratory studies indicate that bleach may reduce viral infectivity, but studies on the effectiveness of bleach in inactivating the hepatitis C virus are limited (MACASHH 2008). The method of obtaining bleach in prison is also relevant to its usefulness in preventing the transmission of blood-borne viruses. Where bleach must be requested from prison officers, prisoners may be reluctant to make requests, fearing being searched or tested for drug use.

### Dependent children

Pregnant prisoners who give birth in custody may be allowed to keep their baby with them. Mother and baby units operate in some Australian prisons with children up to preschool age being able to stay with their mothers.

Many prisoners have dependent children. The 2009 NSW Inmate Health Survey found that 45% of prisoners have dependent children aged 16 years or under (Indig et al. 2010). Research has consistently identified that one of the main stressors for incarcerated women is the loss of involvement in their children's lives and concerns for their wellbeing (Justice Action 2010, Defence for Children International - Australia 2010).

## Condom availability

Condoms are used both to protect against sexually transmitted infections (STIs) and as a contraceptive. The World Health Organization recommends that prisoners should have access to condoms (Moller et al. 2007). The policies on availability of condoms in prison varies among jurisdictions in Australia, from being available anonymously in most jurisdictions, to not being available at all in the Northern Territory and Queensland, and only by request in Victoria (the availability of condoms in prisons in Victoria is under review) (Table 2.1).

Note that the information in Table 2.1 represents policy in each jurisdiction and may not reflect practice, which may differ from this (even within jurisdictions). The collection of data regarding the practice of condom availability was beyond the scope of this report.

Table 2.1: Availability of condoms in Australian prisons, by state and territory, 2009

	Condom a	vailability
	Anonymously	On request
New South Wales	V	×
Victoria	X	$\sqrt{}$
Queensland	×	×
Western Australia	$\sqrt{}$	×
South Australia	$\sqrt{}$	×
Tasmania	$\sqrt{}$	×
Australian Capital Territory	$\sqrt{}$	×
Northern Territory	×	×

Source: Levy et al. 2007 and National Prisoner Health Census 2009.

# 2.2 Australia's prisoners

At 30 June 2009 there were almost 30,000 persons in prisons in Australia (not including periodic detention or court cells) (Table 2.2). The number of people who are in prison at some time during the year is much higher than this, as people are constantly entering and being released from prison. It has been estimated that there were about 50,000 releases from prison during 2007–08 (Martire & Larney 2009).

Table 2.2: Number of prisoners in custody at 30 June 2009, by state and territory

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
Number in prison	9,724	4,007	5,659	4,405	1,781	540	153	1,053	27,322
custody 30 June 2009									

Source: ABS 2009b.

Prisoners are overwhelmingly male (93%) and young, with over two-thirds aged 20–39 years (ABS 2009b). Aboriginal and Torres Strait Islander people are significantly over-represented in the correctional system. At 30 June 2009, 26% of the prisoner population in Australia, compared with 2% in the general population, were Indigenous. Aboriginal and Torres Strait Islander people are imprisoned at a rate of 1,891 per 100,000 of the adult population, an age-standardised rate 14 times that of the non-Indigenous population (ABS 2009b).

Repeat imprisonment is common, with 56% of all prisoners at 30 June 2009 having served a sentence in an adult prison prior to the current episode (ABS 2009b).

In this report, data labelled as 'prisoners in custody' refer to the ABS's *Prisoners in Australia* data (ABS 2009b).

### 2.3 Prison entrants

There were 549 prison entrants who participated in the Census. They were predominately male (89%) and young (median age 29 years), with a disproportionate number being Indigenous (26%) compared with the general population. There were 61 female prison entrants (11%) and 7 transgender entrants, each of whom identified as male.

For over two-thirds of entrants (68%), this was not their first time in adult prison and almost one-quarter (24%) had been in juvenile detention at some time (Table 2.3).

Females were over-represented in the prison entrants sample (11%) compared with prisoners in custody (7%). Prison entrants also had a younger median age than prisoners in custody—29 compared with 35 years. These differences may reflect the fact that prison entrants are likely to include a higher number of those on remand or with shorter sentences, while prisoners in custody on any single day are likely to include a higher number of those on longer sentences.

Prison entrants were younger than the general population, with just over half (52%) aged 29 years or less. The median age of the general Australian population, including children, in 2008 was 37 years (the median age of the general adult population was not available but would be older than 37 years). Female prison entrants tended to be older than males—over one third (34%) of male entrants were aged 24 years or less, compared with less than half that proportion for females (15%). Almost half of female entrants (48%) were aged 25–34 years, compared with 33% of male entrants (Table 2.4).

Of the 549 prison entrants during the census period, 141 or 26% were Indigenous. The proportion of male and female prison entrants identifying as Indigenous was similar (Table 2.4).

Table 2.3: Characteristics of prison entrants, by state and territory, 2009

Characteristics	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Prison entrants	180	30	140	105	81	n.a	13	n.a	549
Male	163	19	128	94	71	n.a	11	n.a	486 (89%)
Indigenous	37	2	36	44	21	n.a	1	n.a	141 (26%)
Median age (years)	30	35	28	28	28	n.a	23	n.a	29
Age range (years)	19-70	18-65	18-57	18-58	18-63	n.a	19-44	n.a	18-70
Been in juvenile detention	34	8	33	31	22	n.a	5	n.a	133 (24%)
Been in prison before	108	18	115	74	53	n.a	6	n.a	374 (68%)

Source: National Prisoner Health Census 2009.

**Table 2.4:** Prison entrants and prisoners in custody, by sex, age group and Indigenous status 2009

	Number of prison entrants	Per cent of prison entrants	Per cent of prisoners in custody
Sex			
Male	486	89	93
Female	61	11	7
Age group			
18-24	180	33	19
25-34	188	34	36
35-44	126	23	27
45+	54	10	18
Indigenous status			
Indigenous	141	26	26
Non-Indigenous	401	73	74
Total	549	100	100

### Notes

- 1. Prison entrant data include New South Wales, Victoria, Queensland, Western Australia, South Australia and the Australian Capital Territory.
- 2. Totals include 2 prison entrants of unknown sex, 1 prison entrant of unknown age and 7 of unknown Indigenous status.
- 3. There were 7 transgender entrants, each of whom identified as male and were included in the male row. *Sources*: National Prisoner Health Census 2009; ABS Prisoners in Australia 2009.

The age profiles of the Indigenous and non-Indigenous prison entrants were similar, with 36% of Indigenous entrants aged 18–24 years, compared with 30% of non-Indigenous entrants. A slightly higher proportion of non-Indigenous entrants (24%) were aged at least 35 years compared with 14% of Indigenous entrants.

The majority of prison entrants were born in Australia (85%) and nominated English as their main language spoken at home (93%). Among those entrants born outside Australia and/or speaking a language other than English at home, there was a broad range of countries and languages nominated (Table 2.5).

A higher proportion of prison entrants were born in Australia, compared with prisoners in custody (81%) (ABS 2009b). New Zealand (2% of entrants and 3% of prisoners in custody) and Vietnam (1% and 3%) were among the next most common countries of birth for both groups.

**Table 2.5:** Prison entrants and prisoners in custody, country of birth and main language spoken at home, 2009

	Number of prison entrants	Per cent of prison entrants	Per cent of prisoners in custody
Country of birth			
Australia	467	85	81
New Zealand	12	2	3
England	6	1	n.a.
Vietnam	4	1	3
Other	58	11	n.a.
Total	549	100	100
Main language spoken a	at home		
English	509	93	n.a.
Vietnamese	6	1	n.a.
Aboriginal Australian	5	1	n.a.
Arabic/Lebanese	4	1	n.a.
Other	25	5	n.a.
Total	549	100	

### Notes

- 1. Prison entrants data include New South Wales, Victoria, Queensland, Western Australia, South Australia and the Australian Capital Territory.
- 2. Country of birth total includes 2 prison entrants of unknown country of birth.
- 3. Other country of birth includes the Philippines, Germany, Sudan, Costa Rica, Papua New Guinea, Scotland, Ireland, South Africa, Sierra Leone, China, Cambodia, Denmark, Zimbabwe, Brazil, Fiji, Thailand, Malaysia, India, Sri Lanka, Lebanon, Iraq, Netherlands, Romania, Zambia, Bosnia, Herzegovina, Russia, former Yugoslav Republic of Macedonia, Turkey, Afghanistan, Egypt and other not specified.
- 4. Other languages spoken at home include Dinka, Spanish, Filipino Tagalog, Cantonese, African languages, Korean, Brazilian, Portuguese, Fiji, Mandarin, Samoan, Albanian, Djaru, Russian, Sudanese, Macedonian, Turkish and other not specified.

Sources: National Prisoner Health Census 2009: ABS Prisoners in Australia 2009.

# Detention history

Prison entrants were asked whether this was their first time in prison or detention and, if not, how many times they had previously been incarcerated. Many of those entrants who had previously been in prison or detention had been there numerous times (Table 2.6). Almost one in ten entrants (9%) had been in juvenile detention at least 5 times, and almost one-quarter (23%) had been in prison at least 5 times.

A history of incarceration was more common amongst male entrants, and this difference was most pronounced in relation to previous adult imprisonment. Almost 70% of male entrants had been in prison before, compared with more than half (57%) of female entrants.

Table 2.6: Prison entrants, previous detention history, by sex, 2009

	Male		Fema	le	Total		
	Number	Per cent	Number	Per cent	Number	Per cent	
Number o	of times in juve	enile detention					
Never	357	73	51	84	410	75	
1-2	56	12	5	8	61	11	
3-4	19	4	2	3	21	4	
5+	49	10	2	3	51	9	
Total	486	100	61	100	549	100	
Number o	of times previo	usly in prison					
Never	144	30	26	43	172	31	
1-2	107	22	13	21	120	22	
3-4	113	23	12	20	125	23	
5+	119	24	10	16	129	23	
Total	486	100	61	100	549	100	

### Notes

- Includes New South Wales, Queensland, Western Australia, South Australia and the Australian Capital Territory.
- 2. Totals include 6 prison entrants for whom juvenile detention history was unknown, and 3 for whom prison history was unknown, and 2 prison entrants of unknown sex.

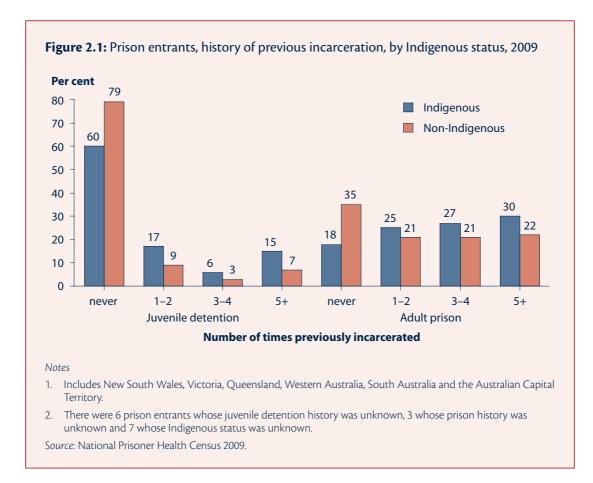
Source: National Prisoner Health Census 2009.

Having a history of previous incarceration was more common among Indigenous than non-Indigenous prison entrants (Figure 2.1). This difference was most pronounced for prior juvenile detention, which was twice as likely for Indigenous (38%) than non-Indigenous (19%) prison entrants. This history of previous incarceration was also more extensive for Indigenous than non-Indigenous entrants. For example, having previously been in detention at least 5 times was more common among Indigenous than non-Indigenous entrants for both juvenile detention (15% compared with 7%) and prison (30% compared with 22%).

### **Education level**

Education and health are related—generally, those with the lowest health status also have low educational and literacy levels. Higher levels of educational attainment are thought to directly impact on health by improving a person's health-related knowledge and their ability to efficiently use this information. Educational attainment is also associated with better employment prospects and higher income which, in turn, may serve to increase access to health-related services and products (AMA 2007).

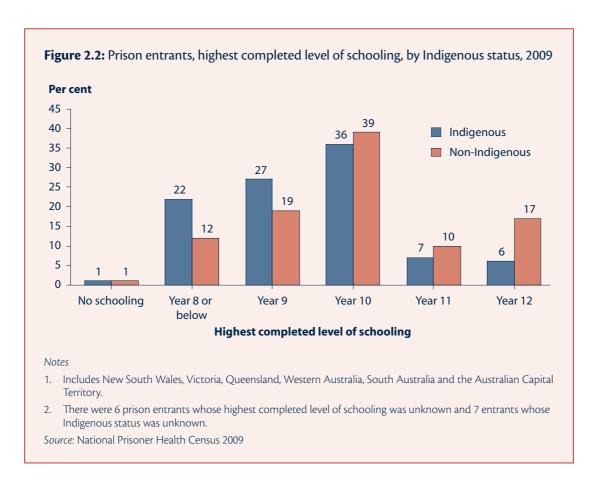
Studies have also found a relationship between level of education, repeat imprisonment and criminal activity. Research indicates that prisoners with more imprisonments have, on average, lower levels of education (Rawnsley 2003). Similarly, a higher level of schooling is associated with a lower probability of arrest and incarceration (Lochner & Moretti 2004).



Educational attainment among the 549 prison entrants was generally low. For three-quarters (75%) of all prison entrants, Year 10 or lower was the highest level of schooling completed. The highest level of completed schooling was similar for male and female entrants. A slightly higher proportion of females had completed Year 10 (43%) than males (38%), and males were more likely than females to have a highest completed schooling of Year 9 (22% and 18% respectively).

**INDICATOR:** Proportion of prison entrants by highest completed level of education. **NUMERATOR:** Number of prison entrants by highest completed level of education. **DENOMINATOR:** Total number of prison entrants during the census week.

Level of educational attainment was lower for Indigenous than non-Indigenous prison entrants. Half (50%) of Indigenous entrants had a highest completed level of education of Year 9 or lower, compared with just under one-third (32%) of non-Indigenous entrants (Figure 2.2). Non-Indigenous prison entrants were almost three times as likely as Indigenous entrants to have a highest completed level of education of Year 12 (17% and 6% respectively).



Just over one-quarter (26%) of prison entrants had a non-school qualification, with trade certificates most common (19%), followed by diplomas (5%) and bachelor degrees (2%) (Table 2.7). While non-school qualifications were more common among those who had completed a higher level of schooling, 13% of those who had not completed Year 10 had a trade certificate.

Table 2.7: Prison entrants, highest level of completed schooling by non-school qualifications, 2009

Level of schooling	Trade certificate	Diploma	Bachelor degree	Postgraduate degree	No other education	Unknown	Total
_	%	%	%	%	%	%	%
Year 12	29	20	10	_	27	14	100
Year 11	21	0	2	_	58	19	100
Year 10	20	5	_	0	62	13	100
Year 9	14	2	_	_	71	14	100
Year 8 or below	12	_	_	_	79	9	100
No schooling	17	_	_	_	83	_	100
Total	19	5	2	0	61	14	100

Source: National Prisoner Health Census 2009.

# 3

# Health conditions