

# DOING TIME

## DRUG USE IN AUSTRALIAN PRISONS

It's no secret that despite ongoing supply and demand reduction efforts drugs are still being smuggled into and being used inside Australia's prisons. The link between illicit drug use and incarceration is well established with numerous studies showing high incarceration rates among problematic drug users. The NSW Inmate Health Survey of 2001 found that 74 percent of female and 67 percent of male inmates had used illicit drugs regularly in the twelve months before entering prison.

**Director of the Centre for Health Research in Criminal Justice in NSW, Michael Levy, said that for many, drug use continued to occur when inside.**

Research into drug use in prisons had shown that drug trends inside prisons demonstrated many of the same characteristics as trends on the street.

"One reflects the other," Mr Levy said.

"Prisons are built to stop people from getting out, however, the prison walls allow just about everything to get in."

Debbie Kilroy couldn't agree more. Having spent several years inside Brisbane's once notorious Boggo Road prison she now directs Sisters Inside, an advocacy organisation which boasts women on the inside as well as outside prison on its management committee.

"We (Sister's Inside) are told that heroin is still the most commonly injected drug in South East Queensland's prisons," she said.

"However drug use inside generally reflects what is happening on the street and that means people are also using more speed."

Sister's Inside undertook research into drug use in Queensland's women's prisons in 2000.

"That research told us that one syringe could be used by up to five to eight different women," she said.

It is research that reflects much of the information gathered by corrections authorities and academics across the country.

The 2001 NSW Inmate Health Survey was the first document of its kind to be produced in Australia. It traced a number of health indicators including the nutritional, dental, medical and mental health of inmates across the state. It also examined patterns of drug use, both on the outside and in.

Of those who took part in the survey 49 percent of women and 48 percent of men said they had used illicit drugs while in prison. Cannabis and heroin were reported to be the most commonly consumed drugs.

The same report showed that women were more likely to have injected drugs while in prison and, of inmates who do inject, 11 percent of women and 12 percent of men had done so more than weekly in the past month.

A slightly more recent survey of inmate health in Victorian prisons, the 2003 Victorian Prisoner Health Study, painted a similar picture.

Of those surveyed 13 percent of women and 14 percent of men said they had injected drugs while in prison and, 10 percent of women and 11 percent of men, said they had shared needles while on the inside.

Caroline Gillespie is a Drug and Alcohol Counsellor and the Team Leader for the Brosnan Centre's Bridging the Gap Program in Victoria, which assists 17 – 25 year olds upon release.

She said the picture of drug use was very similar for Australia's young offenders.

"We know that there is a lot of cannabis and heroin use as well as people diverting buprenorphine to be injected," she said.

"We also know that prescription medication, such as benzos and psychiatric medications are fair game.

"People need to understand that life inside prisons is all about currency and power.

"Drugs, buprenorphine and prescription medications can be traded for things like cigarettes or people stand over others to get access to their medications.

"Some people might choose to go on methadone but are pressured to take buprenorphine because it can be easily diverted.

"They then either trade their dose or it is supplied to someone who has power over them.

Caroline said the result of drug use inside prisons was needle sharing.

"The issue of sharing is very real," she said. "One needle tends to be used by a lot of people."

"The result of that sharing is already obvious – we mainly see cases of hepatitis C – a trend that is already well documented.

"Some people will make a decision not to use while inside because of the issues around sharing but it isn't a deterrent for most.

"Most people will continue to use and some will come out with a full habit."

Each state and territory in Australia is responsible for the health of people who have been incarcerated and, while each state's response to drug use is different, it is clear that all invest most energy in supply and demand reduction programs.

The Australian National Council on Drugs issued a discussion paper titled, Supply, Demand and Harm Reduction Strategies in Australian Prisons:

Implementation, Cost and Evaluation, in July 2004. Representing the first attempt to document the nature and breadth of drug strategies that have been developed by prison authorities the paper highlighted the need for a more consistent approach.

All states and territories use sniffer dogs and urinalysis programs as supply reduction measures. Detoxification, opioid maintenance therapies and inmate counselling are commonly used demand reduction initiatives.

While no Australian prison offers a needle and syringe program the different states and territories have integrated some harm reduction measures.

All states and territories except Queensland provide inmates with harm reduction education; three states provide peer education programs and five states and territories offer bleach/detergent programs. Procedures for blood borne virus testing vary in each state and territory. For example, in NSW blood borne virus testing occurs as part of a screening program for at-risk prisoners, whereas in South Australia and Western Australia it is provided on a voluntary basis. Tasmania ceased compulsory testing for HIV during 2003.

Queensland's Sister's Inside has now managed to organise a hepatitis C education program for female inmates in the state.

Debbie Kilroy said the program provides, "health messages within a harm minimisation framework".

"The program teaches the women how to grow their own herbs and fruit and vegetables to help lead a healthier lifestyle," she said.

"We don't tell people not to use drugs but make sure they know that there are dangers, especially around hepatitis C, and offer drug education."

"If people aren't going to stop then they need to know how to reduce the harm."

For more information refer to *Australian National Council on Drugs (ANCD), Supply, demand and harm reduction strategies in Australian prisons: implementation, cost and evaluation, 2004.*

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## 5 Anex TURNS 10!

2005 has been Anex's 10th anniversary. The Bulletin takes a look at what Anex is, has been and hopes to be.

## 6 A MERRY CHRISTMAS TO ALL?

For most of us Christmas is a time of relaxation and celebration but for some of our clients it can be a trying time of year. Find out how some NSPs are bringing Christmas cheer.

## 8 PROFILE

Paul Dessauer from the Western Australia Substance Users' Association offers an insight into his own NSP experiences.