



## *Sisters Inside Inc.*

Sisters Inside is an independent community organisation which exists to advocate for the human rights of women in the criminal justice system.

We work alongside women in prison to determine the best way to achieve this, and to address gaps in the services available to them.

# The impact of drug-related offending on female prison numbers

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*The majority of ... women do not need to be in prison at all. Most are charged with minor and non-violent offences and do not pose a risk to the public. Many are imprisoned due to their poverty and inability to pay fines. A large proportion is in need of treatment for mental disabilities or substance addiction, rather than isolation from society. Many are victims themselves but are imprisoned due to discriminatory legislation and practices. Community sanctions and measures would serve the social reintegration requirements of a vast majority much more effectively than imprisonment.*

(United Nations Office on Drugs and Crime 2008, p3)

*Except for those limitations that are demonstrably necessitated by the fact of incarceration, all prisoners shall retain the human rights and fundamental freedoms set out in the Universal Declaration of Human Rights, and, where the State concerned is a party, the International Covenant on Economic, Social and Cultural Rights, and the International Covenant on Civil and Political Rights and the Optional Protocol thereto, as well as such other rights as are set out in other United Nations covenants.*

(United Nations Basic Principles for the Treatment of Prisoners, Principle 5)

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## About Sisters Inside

Based in Brisbane, Sisters Inside Inc. exists to advocate for the human rights of criminalised women. Sisters Inside has engaged with a wide range of advocacy activities within Queensland, other states (including Victoria), nationally and internationally.

Sisters Inside's human rights work is driven and informed by our work with criminalised women and their children. Often a history of substance abuse is integrally related to a high level of complex needs in other areas of women's lives. Sisters Inside provides a variety of services for girls, women and their children pre and post release from prison, including:

- Sexual assault counselling and other support, by both Indigenous and non-Indigenous staff, for girls and young women in youth and adult prisons.
- Support for children and young people whose mothers are in prison.
- Intensive support for women and children rebuilding their lives after the trauma of prison.
- Reunification of women and their children, including reunification of families from the stolen generations.
- Improving women's pathways out of substance abuse, including helping them access housing, income support, family violence support services, mental health services, education, training and work.
- Developing stand-alone, user-friendly resources for Indigenous and non-Indigenous women and children which address the range of issues impacting criminalised women's lives.

**Sisters Inside is uniquely placed to contribute to this inquiry.** Sisters Inside is closely associated with similar organisations in other states/territories, frequently visits women in prisons throughout Australia, and has conducted 4 international conferences since 2001. Through our collaborative efforts to address violations of women prisoners' human rights, we have found that similar trends are occurring nationally. We therefore see the wider consequences of policies and practices within the criminal *justice* system. This includes the failure to address the complex inter-relationship between substance abuse, criminalisation and recidivism. Further, several Sisters Inside staff are former prisoners themselves and contribute perspectives based on many years of experience 'on both sides' of the system.

Sisters Inside has made a major contribution to the body of knowledge about women's criminalisation. We have undertaken research and documented the limited existing available data<sup>1</sup>. We have contributed to a wide range of state and Australian government inquiries. We have driven or supported initiatives to have breaches of women prisoners' human rights investigated in several states and territories. Particularly, over the past 10 years, we have progressively developed a model of service for working with criminalised women, which has recently been published. Further information about Sisters Inside publications is available at: <http://www.sistersinside.com.au/reports.htm>.

## *Focus of this Submission*

No doubt this Inquiry has already received all the available data on drug-related criminalisation of women, nationally and in Victoria.

This submission is based on the assumption that similar patterns and issues exist in Victoria, as elsewhere in Australia. In 2005, the Federation of Community Legal Centres and The Victorian Council of Social Service wrote a detailed submission (Cerveri et al 2005) to the Equal Opportunity Commission Victoria (EOCV) requesting a systemic review of discrimination against women in Victorian prisons. The submission outlined the experiences of women in Victorian women's prisons. The practices identified were very similar to those causing concern to human rights advocates in all Australian jurisdictions, and included substantial evidence of discrimination against women prisoners on the basis of sex, race and disability. Anecdotal evidence suggests that few improvements have occurred since this paper was written 5 years ago.

Sisters Inside acknowledges that Victorian women's prisons are a little more progressive than other states and territories. For example, Victoria has the lowest rate of (total) prisoners on remand (19%) of any state/territory<sup>2</sup>, and the existence of the Victorian Charter of Human Rights and Responsibilities is a valuable starting point to addressing issues. We also acknowledge that the population in Victorian women's prisons has its own unique characteristics. For example, the significant proportion of Vietnamese women in prison, and the lower numbers of Indigenous women compared with most other jurisdictions.

Ultimately, however, these state-based variations do not significantly alter the overall picture. Victoria, like every other state and territory, has a long way to go in addressing the human rights of criminalised women, including women criminalised due to drug-related activities.

Our submission focuses on the final two Terms of Reference of this Inquiry:

- Examine underlying causal factors which may influence drug related offending and repeat offending that result in women entering custody; and
- Recommend strategies to reduce drug related offending and repeat offending by women, including strategies to address underlying causal factors.

This Inquiry provides a unique opportunity for Victoria to lead the way in addressing fundamental injustices in the criminal *justice* system. Sisters Inside hopes that our submission will contribute to Victoria's capacity to implement new approaches to meeting the human rights of criminalised women.

# Causes of drug-related criminalisation and recidivism

## Criminogenic profile of women prisoners

There is no evidence of increased crime rates amongst women over the past 10 - 15 years<sup>3</sup>. Yet, between 1998 and 2008 imprisonment rates for women rose in all states/territories. Nationally, the number of women prisoners increased by 72% (compared with a 37% increase for men)<sup>4</sup>. Unsentenced women are increasingly being imprisoned on remand. Whilst Victoria has the lowest percentage of unsentenced prisoners (19%)<sup>5</sup> this remains a matter of some concern since women are generally more likely to be imprisoned on remand than men<sup>6</sup>.

Women are typically charged with less serious and violent crimes than men<sup>7</sup>, and many less women than men are convicted of *violent* offences<sup>8</sup>. The few serious violent crimes committed by women are generally against violent partners<sup>9</sup>. (Women rarely commit violent acts toward people they do not know.) Most women prisoners have no history of security breaches, no evidence of management concerns and are less likely to re-offend than men<sup>10</sup>. Yet, throughout Australia, women prisoners are highly disproportionately classified as high security prisoners.

Most women are imprisoned for minor offences. Anecdotal evidence suggests that in Victoria, like Queensland, large numbers of women are imprisoned for breaching an order, fines and drug possession<sup>11</sup>. Sisters Inside understands that in Victoria CaLD (particularly Vietnamese) women are disproportionately imprisoned for drug-related offences, and substance abuse is a key underlying cause of imprisonment for Indigenous women. Studies in NSW and Queensland have found that as at 2004, 17% of women (compared with 7% of men) were imprisoned for drug-related offences<sup>12</sup>. This rate is likely to have increased over the subsequent 5 years<sup>13</sup>.

In Victoria, as at 2005, women were disproportionately imprisoned, with over 80% of women prisoners serving sentences of less than 12 months<sup>14</sup> compared with a mean aggregate sentence length for all prisoners in Australia of approximately 3 years<sup>15</sup>. Overall, women receive heavier sentences for equivalent first offences, than men<sup>16</sup>. An AIC study found that a staggering 60% of imprisoned women in Australia (compared with 2% of men) are first time offenders<sup>17</sup>.

It is difficult to find any reasonable, non-discriminatory explanation for the fact that women are being imprisoned at a significantly increasing rate. In particular, it is difficult to justify the increased imprisonment of women (particularly mothers of dependent children) for short sentences, for first offences and on remand. Even a very short period of imprisonment (1-2 weeks), can mean that a woman's children enter state care; she loses her housing, income and all personal possessions; and leaves prison with new debts.

The vast majority of women prisoners in Victoria could be released immediately, with no question of any threat to public safety.

## Social profile of criminalised women

According to a Sisters Inside survey in Queensland, 88% of women in prison used drugs and/or alcohol prior to imprisonment, with 51% stating that they had continued to use drugs (mainly heroin) whilst in prison. 84% of women claimed to be receiving no help in relation to their drug and alcohol abuse whilst in prison<sup>18</sup>. Assuming some transferability of this data to Victoria, this indicates the magnitude of the impact of substance abuse on the criminalisation of women.

It is important that this Inquiry addresses drug-related offences in the context of women's overall lives. To date, consistent data on the backgrounds of criminalised and imprisoned women in Australia is not collected. Therefore, we must often rely on *ad hoc* data from various jurisdictions to demonstrate possible national and Victorian trends.

Most commonly, substance abuse amongst criminalised women is a symptom of deeper personal and social issues:

- Repeated studies have found that at least 85% of Australian women prisoners have a history of abuse, most having experienced sexual abuse, childhood abuse and multiple abuse<sup>19</sup>. That is, the vast majority of women prisoners are victims of violent crime.
- Estimates of the incidence of childhood abuse amongst women prisoners nationally range from 48% - 85%<sup>20</sup>.
- A massively disproportionately high percentage of women prisoners in Australia are Indigenous<sup>21</sup>.
- Studies in different state/territories have found that 50%-84% of women prisoners have a psychological/psychiatric disability<sup>22</sup>.
- Studies in various states/territories have found that 12%-30% of women prisoners have an intellectual disability<sup>23</sup>.
- Studies in various states/territories have found that 15%-50% of women prisoners have a learning disability<sup>24</sup>.
- Women prisoners have significantly higher rates of health physical health issues than the wider population, including smoking, alcohol use, injecting drug use, Hepatitis C, unplanned pregnancies, tooth extraction (at 4 times the rate of fillings), low rates of exercise and poor nutrition<sup>25</sup>.
- 25% - 50% of women prisoners have a history of childhood incarceration and institutionalisation<sup>26</sup>.
- Throughout Australia, studies have typically found unemployment rates of between 50% and 75% prior to imprisonment<sup>27</sup>.
- In Queensland, 70% of all Queensland prisoners have a Year 10 or below education level and 76% of women prisoners report not having completed secondary school.<sup>28</sup>

A recent (unpublished) Sisters Inside study provides further details on the socio-economic situation of Queensland women prior to imprisonment:

- 15% of women were homeless and 14% lived with their mother.
- 82% of women were the primary carers of their children.
- Each woman had an average of 2.5 children, of whom about half were aged 1-10 years.
- 76% of women were unemployed, 19% were employed and 6% were students.
- Women's financial survival depended on a combination of Centrelink benefits, prostitution and crime, with an average income of \$251.61 per week.
- 53% of women prisoners were still in debt at the time of the survey.

Even if the most conservative estimates are used, this means that the vast majority of women prisoners in Victoria face multiple social disadvantages.

## Impact of imprisonment on recidivism

There is every indication that the vast majority of women are effectively imprisoned as a result of:

- Being a woman - since women are incarcerated for lesser offences than men.
- Being a victim of crime - particularly sexual assault and family violence.
- Having a disability - particularly a mental health or intellectual disability.
- Being culturally, socially or economically disadvantaged.
- Having substance abuse issues.

These factors are also key predictors of recidivism. In 2003, a study followed a sample of 339 prisoners released from prisons in NSW and Victoria for 9 months. A variety of social and relational needs were identified as important factors in recidivism. Two of the more critical factors were:

*Moving often (more than twice in a three-month period immediately post-release) and/or experiencing worsening problems with heroin use were predictors of return to prison. Half the sample was in a state of homeless post release. Being transient made tackling drug and alcohol problems almost impossible.*

(Baldry 2007:4)

According to the research, some other key predictors of recidivism amongst former prisoners are - that the person is from a socially and economically disadvantaged background; and/or is homeless or transient, or has insecure housing; and/or has debts; and/or is returning to an abusive or violent relationship; and/or has mental health issues or other disabilities; and/or is isolated from family/friends; and/or has a poor educational background; and/or has substance abuse issues<sup>29</sup>. None of these predictors of recidivism can be seen in isolation from one another.

Imprisonment itself appears to contribute to the likelihood of recidivism amongst women. Since 80% of women in Victorian prisons are serving less than 12 month sentences, and many others are on remand and will not ultimately receive a custodial sentence<sup>30</sup>, it is critical that this Inquiry address the risk that imprisonment itself poses. Eileen Baldry found that *prison is criminogenic*:

*... it is evident that serving time in prison greatly increases the chance of being re-incarcerated somewhere down the track compared to not ever having been incarcerated. Having served a term in prison is far from a deterrence to further offending ... This is salient because in the current policy and legislative climate of building more prisons to manage risk and therefore to deal with difficult social problems, more people with little capacity to negotiate the criminal justice system will be imprisoned and the more persons imprisoned, the more will return to prison; prison itself is criminogenic. (Baldry 2007:2)*

Most women should never have gone to prison in the first place. Having been imprisoned once, they become more likely to be imprisoned again.

## Access to drug-related treatment and programs

Sisters Inside does not have detailed information about women's access to drug-related treatment and programs in Victoria. Given similarities between the experiences of women prisoners across Australia in other areas, it appears likely that similar problems exist in Victoria.

In Queensland, women's access to alcohol or drug treatment is entirely at the discretion of Queensland Corrective Services (QCS). If a woman was in a program prior to imprisonment, there is no guarantee that she will be allowed to continue. Some women are provided with medication to assist with withdrawal, and some are allowed to access substance replacement (eg. methadone). Some programs (eg. Buprenorphine Treatment, or *Subutex*) are only available to women who were on a treatment program before coming to prison, and only if there is space available on the program. Women must meet a number of criteria to qualify for programs such as Methadone Maintenance. But availability of places in these programs is limited and budget-driven.

Women's access to drug or alcohol intervention programs is entirely at the discretion of QCS. The criteria for participation in substance abuse programs reflect the much longer prison sentences typically served by men. These programs are not available to short term or remand prisoners, thus precluding the majority of women prisoners. A high proportion of women imprisoned for drug-related offences re-offend.

Many women, upon entering prison, are left to go through drug withdrawal with little or no medical assistance. Up to 84% of women prisoners report having received no assistance in relation to their drug use, whilst in prison. It is hardly surprising, then, that up to 50% of women report continuing to use drugs, mainly heroin, whilst in prison. These drugs are evidently not entering prisons through visitors, since all women are routinely strip-searched following every contact visit - and drugs were only found on a total of 2 occasions in 3 years, across all women's prisons in Queensland<sup>31</sup>.

It is important that this Inquiry examine the availability, accessibility and appropriateness of substance abuse support services in Victorian women's prisons.

## Impact of human rights violations on imprisonment rates

According to many human rights instruments and Australian guidelines and policies, the primary purpose of prisons should be to *rehabilitate* prisoners. All advocate the use of humane practices which treat prisoners with dignity and respect. Most talk about the importance of culturally appropriate practices in prison management. Many talk about the need to treat different categories of prisoners in different ways. Many require that prisoners should be classified at the lowest possible level, in order to facilitate their reintegration into the community upon release.

Women's prisons in Victoria, and Australia more widely, fall far below these standards of practice. Women's dignity is undermined on a daily level, in a prison system designed for non-Indigenous men, which serves more as punishment than rehabilitation. Unsentenced women are in high security prisons. The majority of women prisoners are unjustly categorised as high security prisoners. Many women who are classified as low security prisoners are forced to serve their full sentence under high security conditions. Women are disadvantaged in their access to conditional release and parole.

There is an emerging body of evidence nationally about breaches of women prisoners' human rights. Similar patterns are occurring in prison systems throughout Australia. In 2002, the NSW Select Committee on the Increase in Prisoner Population released *Interim*

*Report: Issues Relating to Women* expressed concern about possible discrimination on the basis of sex in NSW prisons. Investigations by the Anti-Discrimination Commission Queensland in 2006 and the NT Ombudsman in 2008 identified many poor practices in the treatment of women prisoners. These included possible breaches of international human rights instruments and possible cases of sex, race and disability discrimination.

Similar concerns have been expressed through a variety of studies and national inquiries, including the 2005 Palmer Inquiry into the immigration detention of Cornelia Rau, several *Social Justice Reports* over the past decade by the Aboriginal and Torres Strait Islander Social Justice Commissioner and The Senate Select Committee on Mental Health (2006). Annual Prisoner Census Data produced by the Australian Bureau of Statistics, provides clear and growing evidence of the deterioration of women's access to their fundamental human rights whilst in prison.

In 2005, the Federation of Community Legal Centres and The Victorian Council of Social Service wrote a detailed submission<sup>32</sup> requesting a systemic review of discrimination against women in Victorian prisons. The submission included a focus on discrimination on the basis of sex, race and disability (particularly intellectual disability) in Victorian women's prisons. In response, the (then) Equal Opportunity Commission Victoria (EOCV) called upon Corrections Victoria to perform an audit of the infrastructure, policies and procedures applying to women in prison to ensure compliance with the (then) *Equal Opportunity Act 1995*, and to consult with the Commission in the framing and monitoring of the audit. In requesting the audit, the Commission accepted that:

*... at face value the Submission raises some allegations which may disclose breaches of the laws prohibiting discrimination on the ground of sex, parental status, disability, religious belief or race under the Act. The Commission also accepts that the alleged discrimination is of a systemic and serious nature ... (EOCV 2006:5).*

As far as Sisters Inside is aware, there has been no substantial improvement in meeting the human rights of women prisoners in Victoria, since the EOCV made this statement. **This continues to have major long term consequences for women prisoners - all of which increase their risk of recidivism.**

Breaches of human rights in women's prisons fall into 3 broad categories:

1. Treatment that fails to meet agreed human rights standards.
2. Mandatory strip searching, which falls within the CAT definition of *torture*.
3. Failure to provide services required to address recidivism.

## **1. Violence against women prisoners**

Women's prisons have consistently been found to violate the human rights of prisoners, and are therefore, by definition, *violent*. This violence is expressed both directly and indirectly. **Covert violence** through mechanisms commonly used in women's prisons such as constant monitoring, excessive rules and regulations, arbitrary application of rules, employment of male prison officers, use of administrative segregation and breaching women for minor *offences*. Disciplinary procedures are disproportionately applied to CaLD women, women with mental health and intellectual disabilities and Indigenous women - often due to their failure to understand the rules, or the inability of prison officers to distinguish disciplinary and mental health issues. Disciplinary procedures have a greater impact on women with a history of assault (for example, when re-traumatised through being placed in isolation cells) and mothers (particularly when fines are used, since most mothers spend the majority of their discretionary income on their children).

**Overt violence** occurs through mechanisms such as use of excessive force; ogling/touching; deliberately humiliating or making lewd comments about women during strip-searching; strip-searching women where they can be seen by others; bullying women; sexually assaulting women; and using bodily restraints such as straight jackets, body belts and handcuffs. The submission to the EOCV included a detailed comparison of the published statistics from DPFC and Barwon<sup>33</sup>. It found that, proportional to the number of prisoners in each facility:

- Women were twice as likely as men to be charged with breaches of prison discipline.
- Women were subject to segregation orders at 4 times the rate of men.
- Instruments of restraint (eg. body belts, handcuffs and leg shackles) were used 25 times more frequently with women prisoners.
- *Use of force* incidents occurred 35 times more frequently at DPFC than Barwon.
- The mobile riot squad was deployed more often at DPFC than Barwon.

Close examination of the actual incidents involving the riot squad in Victoria, suggested that women experiencing *distress, depression or other mental health issues* were often responded to punitively. All the clinical evidence suggests that women experiencing emotional trauma will turn it in on themselves physically or emotionally, rather than using violence toward others. This is in marked contrast with men, who commonly express emotions outwardly, through violence against others.

The pressures of prison life are likely to initiate or exacerbate mental illness. Suicidal thoughts or actions are not always an indication of a psychiatric disability - *wanting to die* can be a reasonable, rational response to the trauma of imprisonment, particularly for those women who have been sexually assaulted in the past and are re-traumatised as a direct result of prison policies and practices. Suicidal behaviours are commonly exacerbated through placing women in isolation. Self injury is a common response by women to the stress of imprisonment. Self harm occurs more commonly amongst short term, than long term, women prisoners. This is due to the *desensitisation* (disengagement from feelings) which long term women prisoners develop, in order to survive within a violent system.

All too often, women leave prison re-traumatised, in poorer mental health and less confident to manage their life, than they entered prison. This decreases their capacity to adjust to community life, and increases the risk of recidivism.

## 2. Mandatory strip searching

The practice of routine strip searching in prisons throughout Australia is perhaps the single most blatant and extreme example of breach of women's human rights. The *Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment* (CAT) defines *torture* as any act intentionally inflicted upon a person which causes severe pain or suffering which is either mental or physical. However, the UN definition of *torture* does not include pain or suffering arising **only** from a *lawful sanction* (such as imprisonment itself). It has been repeatedly stated throughout the human rights literature that women are imprisoned **as** punishment, not **for** punishment. Use of routine, mandatory strip searching is not implicit in imprisonment. It is the result of a deliberate policy.

*Routine or mandatory* strip searching is strip searching which is carried out as standard practice, without any reasonable suspicion that a prisoner is concealing a prohibited item. Sisters Inside contends that strip searching women prisoners falls within the CAT definition of *torture*. However, even if this were not the case, this practice undoubtedly falls within Article 16 (1) of the CAT, which requires State Parties to prevent *other acts of*

*cruel, inhuman or degrading treatment or punishment which do not amount to torture legitimised in any way by public officials.*

What is a strip search? In Victoria, it involves:

*... a prison officer naming every item of clothing, whereupon the prisoner removes it. Once the prisoner is naked she is required to flip her ears, run her fingers through her hair, open her mouth and remove any dentures if applicable, lift her breasts, bend over and part the cheeks of her buttocks.*

(Cerveri et al 2005:15)

There is no such thing as a *dignified* strip search. Women must continue to interact on a day-to-day level with the very officers who have seen them naked. The trauma of strip searching is even further exacerbated when observed or carried out by male officers. There are many examples of women's personal accounts of strip searching on the public record. The following is particularly concise:

*I honestly felt the only way to prevent the search becoming more intrusive or sexual was to remain as quiet and docile as possible. I later wondered why I was so passive. All I could answer was that it was an experience similar to sexual assault. I felt the same helplessness, the same abuse by a male in authority, the same sense of degradation and lack of escape.* (A Victorian woman pedestrian<sup>34</sup>)

Corrections departments throughout Australia have recognised that many women prisoners have been the victims of sexual abuse. Yet they continue to strip-search women prisoners with an almost blatant disregard for the trauma this inflicts on women, and its long term consequences for the mental health of many women.

Correctional authorities typically justify strip searching by placing it in the context of *risk management* and *good order and security*. This is inconsistent with the available data on the effectiveness of strip searching as a security measure. For example, within DPFC in Victoria in 2001-2 each woman was strip searched an average of 93 times with only 1 item of contraband being found, whereas at Barwon Prison, each male prisoner was strip searched an average of 43 times, with 21 items of contraband being found<sup>35</sup>. Routine strip searching is transparently ineffective in uncovering contraband entering prisons.

Routine strip searching is a deliberate and degrading policy, which reflects a lack of respect for women's dignity and humanity. It is used by prisons to humiliate, violate and control women prisoners. Strip searching generates fear, and functions as a form of punishment against women prisoners. Both routine and non-mandatory strip searching function to directly undermine any attempt to help women to recover, or reintegrate into the community.

Strip searching often functions to discourage women from receiving visits or undertaking activities outside the prison, including work/study release or accessing specialist medical care. Far from improving women's safety, strip searching places every woman prisoner in Victoria at serious emotional risk. Further, there is some evidence that strip searching may increase propensity for drug use whilst in prison<sup>36</sup>.

### **3. Failure to rehabilitate women prisoners**

The *Revised Standard Guidelines for Corrections in Australia* (the Guidelines) whilst not legally binding, are jointly published by all State & Territory Governments. These are Guidelines are based on two international agreements - the *Basic Principles for the Treatment of Prisoners* and the *Standard Minimum Rules for the Treatment of Prisoners*.

Data on the general **health** needs of women prisoners is not routinely collected by prison authorities in Australia. However, the likely extent of women's general health needs has been highlighted through comprehensive surveys of women prisoners instituted by correctional authorities. For example, the main Victorian study<sup>37</sup> found that 60% of women prisoners had hepatitis, and 40% had asthma.

The Guidelines entitle women to health services at a standard comparable to that in the general community (2.26). This includes access to professional counselling (2.20), and medical specialist services such as psychiatric and dental services, compatible with community standards of health care (2.27, 2.36). Prisoners with a mental illness or intellectual disability are entitled to appropriate support services (2.37).

In practice, women consistently report that it is difficult to access a doctor, quality medication and quality counselling inside prison. Many report having their existing treatments discontinued by prison medical staff. Often, women are unwilling to access the limited available medical services because of a lack of privacy and a perceived lack of confidentiality. Many are unwilling to attend health services outside the prison (such as specialist services) because of the associated trauma and humiliation. Women consistently report that existing health issues receive little or no attention whilst they are in prison. These pre-existing issues, combined with limited preventative health checks means that women leave prison with the accumulated affect of lack of treatment for the duration of their imprisonment, plus any new health problems experienced but not diagnosed/treated whilst in prison.

Provision of **education and productive employment** for women prisoners plays a key role in improving the post-release prognosis for both women and their children. Recidivism rates amongst participants in prison education, vocation and work programs have been found to be significantly lower than non-participants. The evidence suggests that outcomes are even more pronounced for women prisoners than men. At least 80% of Victorian women prisoners are the primary carers of dependent children, and the family breadwinner<sup>38</sup>. An investment in women's education, and consequent job opportunities, can have a significant impact on both women and their children.

Employment skills development and other educational opportunities for women in Australian prisons fail to meet international human rights standards. Women repeatedly report that limited opportunities are available, and that most employment is in low-skilled, gender stereotyped areas. These programs are even more inaccessible to the majority of prisoners who are further disadvantaged by their race, disability or age. The quality of so-called educational programs directly provided by corrections authorities has been widely found to be particularly unacceptable. In particular, these programs, which were designed for non-Indigenous male prisoners, almost completely fail to address the criminogenic profile of women prisoners.

According to the Guidelines, women should be provided with access to programmes and services, including education, vocational training (and employment), that enable them to develop appropriate skills and abilities to lead law abiding lives when they return to the community (3.6). Availability of educational opportunities, including full time study (3.8) and numeracy/literacy programs (3.9) are encouraged by the Guidelines. Employment should enable women to acquire skills that are in demand in the employment market so they have real employment opportunities upon release (4.10), including opportunities to achieve national competency accreditation (4.11). The Guidelines state that work should be free of gender stereotyping (4.12). Further, they advocate quality programs and services to address criminogenic needs (3.10).

Practical **transition** programs and services are essential to immediate survival upon release from prison. These are an entitlement under the Guidelines (3.14, 3.16) and include provision of key survival needs upon release including documentation, clothing

and the means to sustain themselves in the short term (3.17). The Guidelines explicitly state that *Such programmes and services should address such matters as housing, employment and community support and should be developed in conjunction with community corrections where appropriate* (3.15). Women throughout Australia consistently report being released from prison without personal identification or accommodation - let alone key essentials to address recidivism in the long term such as employment and community support.

In short, women typically leave prison in a traumatised state. They are less physically and mentally healthy than when they entered. The economic issues that contributed to their imprisonment have been exacerbated - many have accumulated debts and few have access to secure income and housing. Conversely, their capacity to access employment has diminished, due to their criminal record. Most have not received any useful education or training which might counterbalance this. Their children are often also traumatised as a result of the separation and mothers require a higher than usual level of parenting skills. Most have received no assistance in relation to their substance abuse, and many have continued to use drugs whilst in prison.

In short, women's confidence and ability to function effectively in the community has been diminished by their imprisonment. It is hardly surprising, then, that some women's propensity toward substance abuse, and the likelihood that they will commit drug-related offences, has increased as a result of their imprisonment.

# *Strategies to address drug-related criminalisation and recidivism*

## **Reducing the number of women in prison**

Whilst women commit significantly less serious offences than men, they receive heavier sentences for the same offences and are much more likely to be imprisoned than men. Despite this, most women serve relatively short sentences. This underlines the minor nature of women's offences.

Imprisonment causes significant short and long term harm to women, and increases their likelihood of being re-imprisoned at some time in the future. Many children of women prisoners ultimately become involved in the juvenile and/or criminal justice systems - sometimes, as a direct result of their mother's imprisonment. The children of prisoners are 5 times more likely to end up in prison than other children<sup>39</sup>. Given that most women prisoners are mothers of dependent children, imprisonment of women for even a short sentence significantly increases the likelihood of multi-generational criminalisation and associated problems such as substance abuse.

The most recent Aboriginal and Torres Strait Islander Justice Commissioner's *Social Justice Report* provides a detailed, evidence-based rationale for *justice reinvestment* as an alternative to continuing increases in rates of incarceration:

*Justice reinvestment asks the question: is imprisonment good value for money? The simple answer is that it is not. We are spending ever increasing amounts on imprisonment while at the same time, prisoners are not being rehabilitated, recidivism rates are high and return to prison rates are creating overcrowded prisons.* (Aboriginal and Torres Strait Islander Justice Commissioner 2009:13)

The Report found that in 2007-8, the cost of adult imprisonment in Australia was \$2.6 billion<sup>40</sup>. The Report looked at a study in Britain that measured the costs and long term benefits of diversionary programs for women. It found that every £1 invested into community-based diversions generated £14 of social value for women, their children, victims and the community over a 10 year period. Further, the study found that the adverse consequences for mothers' imprisonment on their children carried a cost of more than £17 million over a 10 year period<sup>41</sup>.

Women, particularly mothers, should not be imprisoned for minor offences such as unpaid fines and possession of drugs for personal use. Untried women should not be imprisoned at all.

The single most effective strategy to address drug-related offending would be a moratorium on imprisoning women for sentences of less than 12 months, and reinvestment of 80% of current expenditure on imprisonment to *wrap around* support services, including drug and alcohol services, for women.

## **Addressing substance abuse in its social context**

As demonstrated earlier, most criminalised women have complex, inter-related needs. Substance abuse cannot be treated in isolation from the other issues women face in their lives. Women repeatedly report using substances in order to deal with the adverse circumstances of their lives, particularly family violence, sexual assault and poverty. Any

attempt to reduce drug-related offending must occur in the context of responses to the full range of issues faced by women.

The prison and community corrections systems have consistently proven ineffective in addressing the causes of women's criminalisation and providing effective transition support. The corrections system as a whole is risk averse, and driven by a focus on containment and control rather than support. The system functions to encourage women to conform to the requirements of authority. Following release, it requires women to remain powerless, whilst expecting them to take control over certain aspects of their life without the means to do so. It provides little resourcing to address the typical needs of criminalised women including income security, appropriate housing, mental and physical health services, substance abuse support, parenting support, legal services, assistance to deal with family violence or past abuse, education, training and employment.

Criminalised women remain at risk of recidivism if they do not receive support in these critical areas. Most women are in a traumatised state, with additional compounded needs, when they leave prison. Many have lost all their personal possessions, including essential documentation such as personal identification. Most do not have stable income or housing. Some have lost custody of their children; most must deal with children who are highly traumatised by their mother's imprisonment. Women with mental or physical health issues often do not have necessary medication, a prescription or the means to pay for medication. Women who were on drug-related treatment programs in prison have no guarantee of continuity of treatment. Women with dual diagnoses (eg. mental health issues and drug dependence) often fall through the cracks between services.

It is easy for women to quickly conclude that they have little practical alternative but to return to violent relationships, or drug use, or theft, in order to meet some of these needs.

If we genuinely want violated women and children to take their rightful place in society, we must begin by giving them the same autonomy and right to make decisions about their lives as other community members. Women with complex, inter-related needs must quickly build their resilience, confidence and sense of personal power if they are to have a reasonable chance of not returning to prison. Conventional models of service delivery, such as case management, tend to undermine women's confidence and take away their decision-making power. Mainstream services generally function in a siloed way - with each service focusing on a single issue or need. These approaches are not viable when working with criminalised women:

- There is little point in providing housing, if a woman's mental health needs are not being met and their behaviours put them at risk of eviction.
- There is little point in addressing drug dependence, if drugs provide the cushion a woman relies on to function in a violent family setting.
- There is little point in referral a woman to Centrelink for income support, if she does not have personal identification, or the means to pay for it.

Or, as Eileen Baldry states:

*... it is doubtful that any one intervention alone is going to be effective, particularly for those with complex needs. Indications are that combinations of support and rehabilitation programs in the community appropriate to the circumstances and needs of the person are necessary. This and a human relational approach that takes into account the impact of things like returning to violent and abusive relations or isolation and loneliness, have the best chance of assisting people being released from prison to reduce re-offending.*

(Baldry 2007:5)

Over the past 10 years, Sisters Inside has progressively developed an alternate model of service for work with criminalised women. Driven by human rights values, the *Inclusive Support* model focuses on identifying and working with women's strengths and optimising their power in identifying their own needs and priorities. It encourages women to take back authority over their own, and their families', lives. The model is designed to be able to concurrently address the full range of women's inter-related needs, through providing highly flexible, customised support packages. It may provide a useful way forward in addressing *drug related offending and repeat offending by women* in Victoria. A brief fact sheet on this model is attached to this submission. A more comprehensive outline of the model is available from Sisters Inside.

## Improving drug-related support for women prisoners

Given the poor health status of women prisoners generally, an equitable approach to health service provision would require a better quality and quantity of services than in the wider community. Similarly, given the high concentrations of women with a history of substance abuse, an equitable approach to drug-related support would require a higher than usual concentration of services within women's prisons. At the very least, drug-related treatment and programs for women prisoners should be equal to those available in the community.

Many women are currently imprisoned for minor drug-related offences; some are on remand pending drug-related charges; many report having committed offences whilst substance-affected. For women spending a short time in prison, this period could provide a *window of opportunity* for them begin to address their drug-related issues. Women on longer sentences should have the means to address their drug-related issues in a comprehensive manner whilst in prison. Any attempt to reduce drug-related offending and recidivism depends on women having easy and immediate access to:

- Continuity of treatment commenced prior to imprisonment.
- Opportunities to commence treatment whilst in prison.
- Continuity of treatment following release from prison.

For some, this could be usefully coupled with drug education programs and individual counselling or support. The effectiveness of this process will depend heavily on women's access to effective support systems in other areas impacting on their criminalisation - such as their mental and physical health needs, sexual assault/family violence counselling needs, family support needs, education and training needs and the quality of transition support available. The effectiveness of any drug-related support programs will be undermined if the human rights of women prisoners continue to be breached.

## Addressing the human rights of women prisoners

For too long women have been forced to exist in a prison system where they are practically forgotten. It is not possible to make minor modifications to the Victorian prison system to address women's needs. A fundamentally different approach must be taken to prison policies and practices. This must be driven by respect for women's human rights.

Practices which are in contravention of women's rights, and actively contribute to women's traumatisation and subsequent recidivism, must be discontinued. These include employment of male prison officers in women's prisons, use of administrative segregation (particularly for women with mental health issues) and use of all forms of overt and covert violence against women prisoners, including strip searching.

Current failures to address women's right to rehabilitation must be redressed. The so-called *transition support* available to women post-release is entirely inadequate to meet the complex and inter-related needs of each woman, let alone her children. These needs include new needs directly resulting from the trauma of imprisonment. Dot Goulding, from Murdoch University, in perhaps the most detailed study of the needs of women post-release, noted the importance of recognising the full breadth of women's needs, including whole-of-family needs:

*There are few post-release supports in place that deal specifically with social isolation and loneliness, with programmes which address drug rehabilitation, anger management and alcohol awareness attracting funding priority. Loneliness is simply not recognised by the authorities as a 'real problem' associated with recidivism - the factor by which programme success or failure is generally measured. However, this study found that many women who felt socially isolated returned to abusive relationships, recommenced associations with peers they had used drugs and committed crime with and, generally, placed themselves at high risk of resuming offending behaviour patterns. (Goulding 2004:55)*

A comprehensive program of health, education, training, employment and transition services must be provided, if recidivism rates are to be reduced. Prisons have demonstrated their inability to provide quality services appropriate to the criminogenic profile and needs of women prisoners. Non-government services may be better equipped to provide these types of developmental services, particularly the more esoteric services to address issues such as loneliness and social isolation, within the Victorian corrective services system.

Ignorance of women's needs should not provide an excuse for inaction. Research about women in prison accounts for only 3% of all publications on prisoners in Australia<sup>42</sup>. As demonstrated throughout this submission, repeated studies in Australian states/territories have identified many actual or potential breaches of women prisoners' human rights. However, it is difficult to firmly substantiate women's profile and needs in the absence of coherent data. Human rights advocacy bodies and prison policy makers alike, are forced to rely on piecemeal research and anecdotal data, when seeking to address the needs of women prisoners.

State and territory prison authorities throughout Australia have repeatedly refused to (individually or collectively) collect the data required to adequately understand the background, needs and criminogenic profile of women prisoners. It is only through a legislated requirement that coherent data will be collected about women prisoners in Victoria. It is only through the existence of this data, that human rights abuses will be able to be conclusively identified and remedied. Only then can prisons be made truly accountable for their human rights record, policies and practices.

Prisons in Australia are largely unaccountable to the wider community for their actions. There is a complete lack of routine, independent, external scrutiny of Victorian prison policies and practices. (This is also the case in all other Australian jurisdictions except Western Australia<sup>43</sup>.) As a result, Victorian prison authorities are rarely called to account for policies and practices which violate women prisoners' human rights. At the very foundation of the state's obligations toward criminalised women is Article 8 of the Universal Declaration of Human Rights which states:

*Everyone has the right to an effective remedy by the competent national tribunals for acts violating the fundamental rights granted him by the constitution or by law.*

Women prisoners are amongst the most vulnerable victims of crime in Australia. Yet, their treatment inside prison is generally not open to external scrutiny. Existing

accountability arrangements have been inadequate to encourage Victorian prison authorities to adhere to agreed human rights standards. The only way to ensure that prisons operate in a non-discriminatory way, and that the human rights of women prisoners are protected, is to require transparent, external review processes through legislation.

Human rights advocacy organisations, like whistle-blowers, are at the coalface of human rights violations. In the case of women prisoners, organisations such as Sisters Inside are in a unique position to identify and expose breaches of human rights. By informally monitoring prison practices on a day to day level, these organisations are well positioned to alert the relevant authorities when potential or actual violations are identified, and to contribute to the enhancement of women prisoners' human rights. In order to be able to fulfill this role, community-based service providers with a human rights focus should be legislatively guaranteed that their funding cannot be threatened if they speak out. They should be granted access to prisons which cannot be arbitrarily removed by prison authorities. Human rights advocacy organisations must be protected against any penalty (against the organisation itself, or women in prison) if they speak out.

## Leading the way in Victoria

This Inquiry provides a unique opportunity for Victoria to lead the way in addressing fundamental injustices in the criminal *justice* system. Sisters Inside hopes that our submission will contribute to Victoria's capacity to implement new approaches to meeting the human rights of criminalised women.

## Endnotes

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<sup>1</sup> According to McGuire, research about women in prison accounts for only 3% of all publications on prisoners in Australia. McGuire 2000:4 cited in Goulding 2004:14.

<sup>2</sup> ABS 2008:8, 13. The percentage of prisoners who were unsentenced ranged from 19% in Victoria to 49% in the ACT.

<sup>3</sup> ABS cited in Goulding 2004:14.

<sup>4</sup> ABS 2008:7. Prisoner numbers across Australia are increasing at a rapid rate, from 141.1 per 100,000 of the adult population in 1998, to 168.7 in 2008 (ibid:37). Rates were as high as 610 per 100,000 in NT, 83% of whom were Indigenous people (ibid:5). The actual number of women in prison has increased from 1,135 to 1,957. Over the same period, the number of male prisoners increased by 37% (from 18,771 to 25,658) and the total number of prisoners increased by 39% (from 19,906 to 27,615).

<sup>5</sup> ABS 2008:8. The percentage of prisoners who were unsentenced ranged from 19% in Victoria to 49% in the ACT (ibid:13).

<sup>6</sup> For example, in NSW, women are placed on remand at a rate of 30%, compared with 18% for men. (Armstrong et al 2005:8; Baldry 2007:2)

<sup>7</sup> Armstrong et al 2005:8.

<sup>8</sup> For example in Queensland in 1999-2000, only 15 of the 50,761 convictions recorded against women were for *homicide etc* (DCS and OESR statistics, cited in Kilroy 2004:7). Similar statistics are available from NSW.

<sup>9</sup> Almost every woman convicted of a violent offence, knew her victim. Killing often occurred in the context of a long history of abuse by her partner, or self-defense during an argument or fight. It is rare for women to kill strangers. Men, by contrast, are less likely to kill people they know, but twice as likely to kill a stranger (DCS and OESR statistics cited in Kilroy 2004:7). Similar statistics are available from Vic.

<sup>10</sup> James cited in Cerveri et al 2005:12. Nationally, the ABS found that in 2003, 58% of total male prisoners and 49% of total female prisoners had been imprisoned previously (cited in Aboriginal and Torres Strait

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Islander Social Justice Commissioner 2004). Re-offending rates are very different for Indigenous and non-Indigenous women - various studies indicate as low as half the recidivism rate for non-Indigenous women.

<sup>11</sup> Kilroy 2000:3

<sup>12</sup> Department of Correctional Services (Qld) statistics cited in Kilroy 2004:7

<sup>13</sup> For example, the number of women incarcerated for drug related offences in NSW increased by 40% between 1994 and 2003 (Armstrong et al 2005:7).

<sup>14</sup> SIS and Aboriginal Family Violence Prevention and Legal Service 2005:4

<sup>15</sup> ABS 2008:3

<sup>16</sup> Goulding 2004:28.

<sup>17</sup> Cited in Cerveri et al 2005:12.

<sup>18</sup> Kilroy 2000:4

<sup>19</sup> See for example: Johnson 2004:16; Kilroy 2004:8,24,26; Goulding 2004:35; Victorian Prisoner Health Survey 2003 cited in Cerveri et al 2005:6,7; SIS study cited in Kilroy 2000:3; Hockings et al 2002:52-55.

<sup>20</sup> Byrne & Howells 2000:25.

<sup>21</sup> In 2004 their rate of imprisonment was 20.8 times higher than non-Indigenous women, and there was a 343% increase in numbers between 1993 and 2003 (ABS cited in Aboriginal and Torres Strait Islander Social Justice Commissioner 2004. Individual State figures are similar: (WA) Department of Justice, cited in Goulding 2004:14; ADCQ 2006:107; Kilroy 2004:8; Armstrong et al 2005:6-8). As at 30 June 2008, Indigenous people are still 13 times more likely to be in prison than other Australians (ABS 2008:6).

<sup>22</sup> B.A. Hocking cited in Anti-Discrimination Commission Queensland 2006:92, Kilroy 2004:12, Butler & Allnutt, cited in Goulding 2004:32, Armstrong et al 2005:15-17, SIS and Aboriginal Family Violence Prevention and Legal Service 2005:5, Tye 2002 cited in Cerveri et al 2005:6.

<sup>23</sup> NSW Council on Intellectual Disability study cited in Cerveri et al 2005:39-40, ADCQ 2006:92,

<sup>24</sup> Cerveri et al 2005:38-41, Kilroy 2004:13.

<sup>25</sup> Hockings 2002:ii-iii

<sup>26</sup> Johnson 2004:17; Kilroy 2004:8. A SIS survey found that 50% of women in Queensland prisons had been in the care of the State as children themselves (Kilroy 2000:3).

<sup>27</sup> *2001 NSW Inmate Health Study* cited in Armstrong et al et al 2005:10; DCS and ABS statistics, cited in Kilroy 2004:8.

<sup>28</sup> Spence, Judy (Minister for Correctional Services), *Queensland Prisoners Developing Skills in Multi-Million Dollar Prison Industries*, Media Release of 23 August 2007.

<sup>29</sup> Johnson 2004 cited in Payne 2007:59; Baldry 2007; Drabsch 2006 cited in Baldry 2007

<sup>29</sup> Baldry 2007

<sup>30</sup> Based on NSW data - Thompson 2000 cited in Baldry 2007:2.

<sup>31</sup> SIS uncovered the following data as the result of a Freedom of Information request. Over a 3 year period, a total of 41,728 strip searches were conducted on women in Queensland prisons. Only 2 found any drugs at all - and it is unclear whether these were illicit or pharmaceutical drugs, or a quantity of drugs of any significance.

<sup>32</sup> Cerveri et al 2005

<sup>33</sup> Cerveri et al 2005:14

<sup>34</sup> Cited in Pereira 2001.

<sup>35</sup> Cerveri et al 2005:16. It is unclear whether the single incident of contraband resulted from a mandatory strip search or one based on suspicion.

<sup>36</sup> Pereira 2001

<sup>37</sup> Cited in Cerveri et al 2005

<sup>38</sup> According to Cerveri et al 2005:12, 80% of all women in prison in Victoria received some sort of parenting payment prior to imprisonment

<sup>39</sup> Shine for Kids (Children of Prisoners Support Group) cited in Aboriginal and Torres Strait Islander Justice Commissioner 2009: 19

<sup>40</sup> Australian Institute of Criminology (2008) cited in Aboriginal and Torres Strait Islander Justice Commissioner 2009:39.

<sup>41</sup> New Economics Foundation 2008 summarised in Aboriginal and Torres Strait Islander Justice Commissioner 2009:17.

<sup>42</sup> McGuire 2000 cited in Goulding 2004:14

<sup>43</sup> An exception is Western Australia, where the Office of Chief Inspector is directly answerable to the WA Parliament (ADCQ 2006:128-129).

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# Fact Sheet: Inclusive Support

## A Responsive Alternative to Case Management<sup>44</sup>

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Conventional models of case management have been spectacularly unsuccessful in addressing the needs of severely disadvantaged populations. These are people who face many complex, inter-related, multi-faceted issues. They typically need to: find accommodation; secure income and other basic needs; access mental health support; address domestic violence; deal with child/family issues; access substance abuse support; deal with the criminal justice system; and address education/training/employment needs.

Sisters Inside (SIS) has developed a model - Inclusive Support - which has proven successful in working alongside criminalised women<sup>45</sup>. This model is highly transferable to work with other severely disadvantaged social groups.

At SIS, Inclusive Support begins from the assumption that criminalised women are not *clients*! Women are seen as ordinary community members. Like anyone else, criminalised women are entitled to expect that their basic human rights will be met. Like anyone else, they are entitled to make decisions about their own, and their families', lives. Like anyone else, they are entitled to experiment, test their ideas and, if necessary, learn from their mistakes. Like anyone else, they are entitled to privacy. Like anyone else, criminalised women are most likely to develop autonomy, independence and resilience, if they have maximum possible control over their life decisions.

Inclusive Support aims to work alongside criminalised women in a way that respects these rights. This may involve challenges for organisations and staff. Workers are required to address their assumptions and identify their personal motivations for working with disadvantaged women. Often this requires them to deal with the fact that they enjoy being a *professional*, and having power over other people. (*Help* is the sunny side of control!) A worker may feel anxious about being perceived as ineffective, when a woman plans actions which the worker suspects will be unsuccessful or even destructive. (In the Inclusive Support model, there are no assumptions about any woman's *best interests*.) A worker may find it difficult to communicate within a woman's cultural context, rather than expecting the woman to operate within the worker's *comfort zone*. Successful implementation of Inclusive Support requires that workers address their personal and professional assumptions and needs ... and have these met elsewhere, if they do not function to empower women.

**Like** models of case management, Inclusive Support aims to:

- Reduce duplication, gaps and inconsistencies in service provision.
- Articulate common boundaries and protocols across all workers.
- Maintain consistent communication between workers and women.

**Unlike** many models of case management, women drive the decision making process which is designed to serve their perceptions of their own needs; to actively include them in responding to their life challenges. This helps the woman build her practical and emotional capacity make life changes and take responsibility for her own decisions. Therefore, Inclusive Support aims to:

- Give each woman maximum possible power in every interaction.
- Help each woman to clarify and prioritise her own perception of her needs and priorities.
- Work within each woman's often-changing priorities, in a responsive (rather than reactive) way.
- Focus on identifying each woman's strengths, so these can be reinforced and utilised.
- Respect each woman's fundamental intelligence and competence.
- Share responsibility for developing/implementing/reviewing each woman's long and short term goals.
- Respond to changes in each woman's situation, through providing fast, intense services when needed, and functioning as a *safety net* when they prefer to manage on their own.
- Concurrently address the full range of (inter-related) needs expressed by each woman, through providing highly flexible, customised support packages.

Meeting multiple needs concurrently is fundamental to the success of the Inclusive Support model:

- There is little point in providing housing, if a woman's mental health needs are not being met and their behaviours put them at risk of eviction.
- There is little point in addressing drug dependence, if drugs provide the cushioning women depend on to function in a family violence setting.
- There is little point in referring a woman to Centrelink for income support, if they do not have personal identification, or the means to pay for it.

To coin a currently popular phrase, Inclusive Support provides *wrap around services* for severely disadvantaged women. It is distinguished from other models by the fact that the services are not wrapped so tightly that they *smother* women. Each woman chooses whether, and when, to access services according to their perceptions of their needs and priorities.

At a functional level, each woman has a *Support Worker*, who is her first point of call, and who coordinates service provision. The woman has significant input into the allocation of her Support Worker. The Support Worker helps the woman identify her service needs and preferences, and her broad, long term, life vision. The Support Worker is responsible for keeping an eye on the woman's long term goals and keeping the structural pathways open for her to ultimately achieve this vision. (For example, the Support Worker may ensure that the woman's name is not removed from the public housing list when she is changing address frequently, or they may track application dates for entering education or training programs.) This role is particularly important when women are preoccupied with meeting multiple short term goals or dealing with crises.

**The Support Worker focuses on *plan tracking*, rather than *plan setting*.** A broad, long term vision is developed with each woman. However, it is not formalised into a case management plan (or similar). Many criminalised women have limited literacy, or have experiences of written material being used against them. Their situation and goals often change frequently. Many women are therefore understandably resistant to formal documentation of their plans, and feel disempowered by conventional case management planning. (Sisters Inside has found a combination of the *SIS Referral Form* and internal use of the *Case Management System* (CMS) useful in tracking each woman's changing situation and retaining her long term vision.)

It is essential that Inclusive Support programs include highly flexible brokerage funds, which can be used to pre-empt potential crisis situations, or provide a pathway toward meeting longer-term goals. Areas which cannot typically be funded through conventional emergency relief funds include:

- Providing overnight motel accommodation, when shelter places are unavailable.
- Purchasing a birth certificate to establish ID essential to accessing Centrelink benefits and other services.
- Searching the TICA list where private rental is a possibility.
- Purchasing private mental health or drug/alcohol services, when public services are unable or unwilling to meet participant needs.
- Paying small debts (eg. housing debts) which are a barrier to the woman moving forward.
- Paying course fees or providing stationary/books/computer to enable the woman to undertake study.

This model is readily transferable to work with other severely disadvantaged populations. However, **Inclusive Support can only be successfully implemented in organisations which hold strong human rights values.** It is critical that program workers share these organisational values, are committed to learning about the cultural context of participants and collectively represent a range of personal backgrounds. It is very helpful when at least some of the workers are peers. (In the case of Sisters Inside, women frequently cite trusting the organisation because it employs Indigenous staff and workers with lived prison experience.) It is useful if the organisation has the capacity to address a number of different service needs - it is generally easier to access multiple programs within a single agency than to coordinate service provision across several organisations. Organisations should also have the capacity to provide continuity of service over the long term - with a commitment to functioning as a *safety net* when service users' most urgent needs have been met and they are settled into everyday life.

**For a more detailed publication on the SIS Inclusive Support model contact:**

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<sup>44</sup> © Sisters Inside Inc. 2010. Written & compiled by Suzi Quixley.

<sup>45</sup> *Criminalised women* refers to all women impacted by the criminal justice system - including women prisoners, women on parole or non-custodial orders, women with past prison experience and women who have been charged but not convicted.