

#### **Submission 107**

# 'Tough on Crime' versus Drug Treatment A VAADA Briefing Paper

## Key issues from the literature

- Specialist drug treatment is one of the most effective ways to reduce crime and crime recidivism
- Most prisoners (conservative estimates around two thirds of all offenders) have either committed their crimes to obtain money for drugs, or committed their crimes while intoxicated or using drugs.
- Drug treatment alone provided in the prison setting is less effective than a combination of intensive in-prison and intensive post-prison drug treatment and family support programs
- While Victoria's personal and property crime rate was the lowest rate in 1998, its prison population is now growing at a faster rate than any other State or Territory in Australia
- Most incarcerated Victorians are sentenced for less than 12 months indicating less serious crimes
- Due to a 52% increase in the prison population in Australia over a 10 year period (1990-2000), governments around Australia have implemented diversion programs and other strategies as a way of curbing this increase
- As a consequence of these measures, the average number of prisoners increased nationally by only 1% in the year from March 2000 to March 2001
- In a five year period to June 2000, Victoria's prison population increased by 27.8%
- In the 12 months March 2000 2001 Victoria's prison population rose by 8%, the highest increase in Australia, and counter to the trends in other States and Territories. The latest figures have confirmed this trend
- Prison population increases in 1999-2000 have meant that the average occupancy rate has continued to be in excess of 100% of current capacity

#### About VAADA

The Victorian Alcohol and Drug Association (VAADA) is the peak body representing alcohol and drug services in Victoria.

VAADA provides leadership, representation, advocacy and information to the alcohol and other drug and related sectors.

## Current debates around criminal justice issues

Recent media and public debate has centred around the need for increased criminal justice sanctions for drug users and 'dealers' as part of the policy platform in the lead up to the state election.

In response to this, a large contingent of community and social welfare groups (the Victorian Criminal Justice Coalition) have joined to form a concerted and unified response. VAADA is co-ordinating the drug sector's response as part of the campaign.

This briefing paper summarises the findings from several key studies which clearly demonstrate the current trends in correctional settings in Victoria, recidivism rates in the Australian prison population, drug treatment in the prison setting and the overall benefits of drug treatment.

## Prominent trends in the Victorian correctional settings population

In 1998, Victoria had the lowest crime rate for both personal and property crime in Australia (Australian Bureau of Statistics, 4509, Crime and Safety in Australia, 1999).

Figures released by Victoria Police in early August 2002 show that Victoria's crime rate is 20% below the national average, led by falls in theft and drug offences. The total number of offences fell by 2.8% over the past financial year. The figures show that drug related crime, robbery and car theft have all decreased over the last year, while harassment, assault, homicide and rape have all increased (The Age, 7 August 2002).

The vast majority of Victorian prisoners have a sentence of less than twelve months (NSW Law Reform Commission, *Discussion Paper No. 33, Sentencing*, Sydney, 1996).

In the year 1999 – 2000, 92.7% of all prisoners in Victoria were sentenced for 2 years or less. (Office of the Correctional Services Commissioner, Department of Justice Victoria Statistical Overview, The Victorian Prison System 1995-1996 to 1999-2000, page 26, Table 12, Melbourne, March 2001)

The total number of people in prison in Australia rose by 52% in the ten years from 1990 until 2000, but since the late nineties, most State and Territory governments in Australia have put in place diversion programs and other strategies to reduce the rate of increase. As a consequence of these measures, the average number of daily prisoners increased nationally by only 1% in the year from March 2000 to March 2001. In this same period, Victoria's prison population rose by 8%, the highest increase in Australia, and counter to the trends in other States and Territories. The latest imprisonment figures (September 2001, and December 2001) confirm this trend (Australian Bureau of Statistics, *Corrective Services Reports 4512.0 and 4517*, Canberra, 2001/2).

## Increased prison system demand in Victoria

1999 was the fifth consecutive year in which Victoria's overall crime rate was the lowest of all State and Territory jurisdictions in Australia – 19.6% below the national average. Reflecting this outcome, Victoria's imprisonment rates are also consistently the lowest in Australia – 42.2% below the national average. Nevertheless, there has been a substantial increase in the Victorian prison population over the last five years.

Between 30 June 1995 and 30 June 2000 the prisoner population increased significantly from 2,467 prisoners to 3,153 prisoners, an increase of 27.8%. The average total prisoner population grew by 25.9% during the same period.

The prisoner occupancy (or utilisation) rate rose from 88.5% of design capacity at 30 June 1995 to 109.7% at 30 June 2000. Nine of the State's thirteen prisons were operating in excess of their design capacity on 30 June 2000. The average prison utilisation rate increased from 93.8% to 106.5% during the same period.

Between 30 June 1995 and 30 June 2000, the female prisoner population increased significantly from 116 prisoners to 183 prisoners, an increase of 57.8%, which was more than twice the rate of increase of the male prisoner population in the same period (26.3%). The average female prisoner population grew by 50.4% during the same period (Office of the Correctional Services Commissioner, Department of Justice Victoria Statistical Overview, The Victorian Prison System 1995-1996 to 1999-2000, page 1, Melbourne, March 2001).

## The impact of increased prison system demand in Victoria

The Victorian prison system underwent unprecedented change, particularly during the years 1996 and 1997, with the opening of three new privately-managed prisons and the closure of five public prisons. These infrastructure developments, though substantial, have proved to be insufficient to fully absorb the unanticipated increase in prisoner numbers. Prison population increases during 1999-2000 have meant that the average occupancy rate continued to be in excess of 100% of the design capacity of the prison system for the second year in a row.

This increased demand has been accommodated by the provision of both temporary accommodation and double bunking. Despite an increase of almost 400 temporary beds in the prison system to 30 June 2000, there is still an urgent requirement to undertake a building program to accommodate the current and projected longer-term demand to avoid compromising prisoner management and accommodation standards. In addition, innovations in service delivery are being developed in response to changes in the profile of the prisoner population, with particular focus on the needs of vulnerable and at risk prisoners.

## Recidivism rates in the Australian prison population

Recidivism rates in Australian prisons are approximately 40%, but there are a number of key factors (e.g. employment, marriage, etc.) that reduce recidivism, while other factors such as drug dependence, increased recidivism (Tasmanian Department of Justice Annual Report 1996/97)

#### Drug treatment in the prison setting

Prison Journal examined a series of studies in 1999 that looked at drug treatment in prisons in California, Delaware and Texas. Out of 1,461 inmates, a quarter of those given **intensive treatment in prison and after their release** were again in prison three years later, compared with recidivism three times as steep for inmates who had no treatment. A report released by the National Institute of Justice, a research arm of the U.S. Department of Justice, looked at programs in California, New York, Delaware and Oregon and found recidivism reduced up to 60 percent by drug treatment programs. The very important condition on the effectiveness outcomes of these programs is that intensive in prison treatment is matched by intensive post prison treatment.

Where the prison treatment only is provided, recidivism is reduced by less than 10%. Where in prison and post prison treatment is provided, the programs reduced recidivism by over 30%. (Dr Stanley Sacks, *Modifiying TC's for Offenders*, World Therapeutic Communities Conference Paper, San Francisco, 2000)

## The benefits of drug treatment

Several large scale, multi-site, multi-treatment modality studies that have attempted to quantify the cost benefits of drug use have been conducted and are continuing in the United States and the United Kingdom.

One of the major costs of drug use is its impact in terms of criminal behaviour which is well documented (APSAD: 2001). These costs include the value of stolen goods, costs of medical care for crime victims, productivity losses for those who abandon the legitimate paid workforce, costs of police protection, legal representation, adjudication, sentencing and maintaining convicted offenders in correctional institutions (APSAD: 2001).

The major studies are the Drug Abuse Reporting Program (DARP); Treatment Outcome Prospective Study (TOPS); Californian Drug and Alcohol Treatment Assessment (CALDATA); National Outcome Treatment Research Study (NOTRS); and the Drug Abuse Treatment Outcome Study (DATOS).

All of these studies provide evidence for the efficacy of drug treatment to reduce crime, save money and improve the long term prospects for those involved. A brief summary of the outcomes of each study is as follows:

#### DARP

This study collected data on 44 000 clients between 1969 and 1973 from 52 programs. It clearly demonstrated the overall effectiveness of drug treatment with longer term stays in all treatment modalities associated with improved outcomes

#### **TOPS**

TOPS was intended to build on the base begun by DARP and 11 000 clients were recruited from 41 programs between 1979 and 1981 and tracked for up to 5 years.

This study not only endorsed the cost effectiveness of treatment, it also demonstrated that when crime-related costs are calculated, the cost of treatment was recouped during treatment and that further benefits accrued post treatment.

#### **CALDATA**

The CALDATA study examined the outcome of a range of treatment modalities, the cost of treatment and economic benefit to society of providing treatment. Key findings from the study included: treatment is cost effective (providing treatment to 150 000 participants cost \$209 million, while the benefits to the taxpayer were in the order of \$1.5 billion), crime decreased by two thirds with longer time in treatment associated with a larger decrease, and substance use declined by two fifths.

#### **NTORS**

The study began in 1995 and tracked clients through to 2001. As the first study of this kind in the UK, its results are strikingly similar to those produced in the US. The study recruited 1000 clients from four treatment settings, selected for their representativeness of the range of services available.

The findings indicated strong evidence of the improvements that occur after drug misuse treatment interventions. Even chronic, long-term dependent users were able to make marked improvements after treatment.

#### **DATOS**

DATOS is an extensive project undertaken in the US. The findings demonstrated substantial and significant reductions in illicit use for clients across four treatment modalities. The relationship between duration and effectiveness was evident, replicating the trend identified in the earlier TOPS project. This study combined with the DARP and TOPS studies, provides a longitudinal view of treatment in the USA.

In summary the key issues that emerge from these studies are:

- 1. Money spent on drug treatment saves the community far more (cost benefit analysis conducted in California estimated that for every dollar spent on drug treatment, \$7 is saved, another survey conducted in NSW calculated that for one drug treatment program, over 54 000 drug and crime free days resulted in savings to the community of over \$21 million) (APSAD: 2001).
- 2. The savings are based on significant reduction in crime (up to three quarters of the costs to the community associated with drug use according to one study) (APSAD: 2001).
- 3. Other benefits from drug treatment accrue to society including: significant improvements in health, reductions in hospitalisations during and after treatment, increased outcomes for individuals post treatment that extend to employment, saving lives, rebuilding families etc.

From: cbennett [mailto:cbennett@infoxchange.net.au]
Sent: Wednesday, September 18, 2002 6:24 AM

To: Gould, Gillian (REPS)

Subject: Additional Evidence - HOR Standing Committee on Legal and Cons Affairs

#### Dear Ms Gould

Further to my evidence to the House of Representatives Standing Committee on Legal and Constitutional Affairs Inquiry last Monday, 9 September 2002, I provide the following points of clarification around 'supported accommodation' treatment as promised.

- While the Victorian government has been able to claim an increase in the number of 'drug treatment beds', a breakdown of the figures shows a strong trend towards the funding of generalist programs, especially supported accommodation.
- There are currently 737 operational 'drug treatment beds' in Victoria. By the end
  of 2002, there will be an estimated total of 770 beds, increasing to 820 by the first
  quarter next year. Of these beds, 128 are withdrawal (six day stay), 178 are
  residential rehabilitation (longer term residential beds) and 433 are supported
  accommodation (the planned increase includes an additional 50 supported
  accommodation beds).
- Supported accommodation programs allow around \$50,000 per year to manage five houses, all tenanted by recovering dependent drug users who have high level support needs (e.g. homelessness, unemployment, lack of education, lack of family support, etc.). This is less funding than if the houses were tenanted by non drug using supported accommodation clients.
- Drug treatment services are grossly under-funded in comparison with any other health or welfare service. Supported accommodation in the drug and alcohol sector is funded at \$5000 per bed per year. A long term residential rehabilitation bed is funded at around \$25,000 per bed per year. By comparison, generalist residential services receive between \$60,000 and up to \$150,000 per bed per year (for the most complex clients), and prison beds cost between \$40,000 and \$60,000 per year.

Please let me know if you require this information in any other format. I note that the speaker who followed me, Professor Arie Frieberg, covered many of the points I agreed to clarify around the issue of the basis for the figure in VAADA's report that 60% of prisoners are incarcerated for drug related crime.

I trust that this concludes VAADA's evidence to the Inquiry.

Kind regards

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