

# **SISTERS INSIDE**

**SUBMISSION**

**SUBSTANCE ABUSE IN AUSTRALIAN  
COMMUNITIES**

**JUNE 2000**

## FORWARD

The House of Representatives Parliamentary Standing Committee on Family and Community Affairs advertised in *The Australian* on the 15<sup>th</sup> April calling for written submissions on Substance Abuse in Australian Communities.

Sisters Inside's submission is confined to gender specific issues for women in Queensland prisons pre and post release.

There are many generic issues, which virtually affect women prisoners because they are prisoners but not because they are women prisoners. The most striking example is the number of women in prison for drug-related crimes and how this affects their families, children and community.

Without any fanfare, the 'war of drugs' has become a war on women, and it is clearly contributed to the explosion in women's prison population. While the intent of the get tough law and order policies is to get rid of drug dealers and the so called king-pins, drug offences make up a greater proportion of offences committed by women in contrast to men in Queensland.

## **Sisters Inside Inc**

Sisters Inside Inc. is a community-based organisation that was established in 1992. Sisters Inside is a group of women working to support the successful transition of women in prison to outside life. We place a high priority on confidentiality in all activities by creating a safe environment where women can explore and develop their potential.

Sisters Inside's Management Committee members are women in prison and women outside. Sisters Inside philosophy values women in prison's experience and knowledge and we believe that they are the experts on identifying what is needed to support them through the successful transition process to the community.

Sisters Inside's Mission Statement, Values, Vision & Role ensures that the organisation and its service provisions are focussed and directed by women in prison.

## **Current & Previous Programs of Sisters Inside Inc**

Sisters Inside has supported women in prison, their children and families through many programs. As you are probably aware of the over population of women in prison, the number of women and children Sisters Inside works with has tripled in the last 5 years. The numbers have increased from under 100 women incarcerated in 1994 to approximately 350 women incarcerated presently.

- **Journal "Women in Prison":** This journal is a bi - annual publication that allows academics, government, women in prison, service providers and interested others to publish articles about current trends and research in relation to women in prison and young women in detention. The journal is distributed internationally
- **Sexual Assault Service:** We have 2 sexual assault counsellors, one indigenous and one non-indigenous, that work with the women in Southeast Queensland prisons. This program was established in 1994 due to the high percentage (85%) of women in prison who have been sexually abused at some time in their life and this abuse being one of the contributing factors to their offending. This program is highly successful and over 3,200 women access this counselling service annually.
- **Women's Transition Workers:** Department of Corrective Services has funded Sisters Inside for an indigenous women's transition worker and by Jupiter's Casino for a non-indigenous transition worker. Both funding is for only a one-year period. These workers work with the women who are about to be released back into the community and support the women and their children and families through this process. This period is of high need for women, in the last 24 months 19 women have died just after their release back into the community from either drug overdoses, suicide or from a domestic violence situation. This pilot project aims to reduce the deaths and hopefully support the women and their children through this transition

period with individual assistance they need to move back into their community so they don't return to prison.

- “The Insider” Newsletter: “The Insider” is a newsletter written and produced by the women in prison. The women in prison produce these newsletters bimonthly. Workshops to develop skills on the computer program have been developed and implemented. The newsletter allows for communication between each of the 4 women’s prisons in Southeast Queensland and information is distributed about dates of parole sittings etc. Every woman in prison receives a copy and over 300 women are in the prison at any time. Feedback is very positive and the women look forward to each newsletter.
- Kids of Mums in Jail Project: These projects began in 1994 through one off funding. Sisters Inside has been refunded recently non-recurrently for 3 more camp programs. These camps are for women in prison and their children over a number of school holiday periods. Throughout the project we assist with the development of parenting skills for women who are about to be released from prison. The project facilitates parent / child contact that would not be otherwise be available to families; provides a safe environment for the children to work through their trauma issues regarding their mother being in prison; provides information to prisoners about family support upon releases; promotes the rights of the children to their family members and provides information and support about combating abuse at home. The most important strategy to this project is that the camps are children focussed. This project is very successful in the reunification of the children and their mothers.
- WILL (Women Inside Living & Learning) Program: This is a recently funded program that aims to reduce the transmission of HCV to women incarcerated in Southeast Queensland prisons and to provide harm minimisation strategies to those women who may have already contracted HCV. Sisters Inside has researched drug use in Southeast Queensland prisons and statistics prove that over half the population have injected drugs whilst in prison. Syringes are being used between 5 – 7 women and cleaned with hot water in most cases. Transmission of HepC is increasing in the women’s prisons and this constitutes a public health risk.
- Youth Crime Prevention Program: This is a recently funded program that will enable a group of young people whose mothers are in prison to participate in this program. The young people will develop a resource kit that will assist them and other young people in the future about issues that are raised for them while their mums in jail and referral and information about organisations that can support young people while their mums in jail. Young people will be involved in activities that will enhance their self esteem and confidence such as, participating in canoeing, ropes courses, art workshops and they will also attend white water rafting camps and indigenous camps. Due to this program recently being developed it has come to our attention that 2 young people have suicided within three weeks of their mothers release from prison. Many are homeless, self harming, excluded or suspended from school, drug and alcohols abusers, living in violent environments.

- “Crying Walls” Drug & Alcohol Prevention Project for Incarcerated Women in Southeast Queensland - This project has been recently funded by the Commonwealth of Australian National Illicit Drug Strategy Community Partnerships Initiative funds. The project will incorporate education young women in prison about the effects of drug and alcohol use with particular focus on harm minimisation; the social, physical and mental effects of drug and alcohol use (particularly intravenous drug use), and exploration of alternatives to drug and alcohol use.
- Children’s Booklets: These booklets focus on the children of women in prison to work through the trauma, grief and loss they experienced because of their mother’s incarceration. These booklets written by a young aboriginal boy whose mother was in prison have just been finalised and ready for distribution. They will be used as a National resource for children who have a mother in prison so their experience of trauma, loss and grief is understood and validated. These booklets will also ensure that their mothers, caregivers and other service providers – government and non government have an understanding of the impact and trauma these children are experiencing due to their mother being in prison and continue to experience as they grow older.
- Research projects to identify needs of women in prison (two such projects have researched the effects of domestic violence on women in prison and the needs of women from non-English speaking backgrounds when in prison).
- Release Kit – Indigenous and Non Indigenous Kit. These kits are invaluable for women when they are about to be released back into their community. It covers nine areas that women in prison have identified as information they need once released. The areas included are transport, accommodation, parole and home detention, finances, getting children back, legal issues, family, well being and relationships. The Release Kits are distributed to all women regularly to ensure each woman has a copy.
- “My Prison Experience” is a book of short stories that describe a young indigenous woman’s experience when her mother was incarcerated and her experience now as she is incarcerated. Another young indigenous woman who is also presently incarcerated did the artwork. These are powerful stories of experience and are available as a resource across the Nation.

### **Geographical Area and Scope**

While this service is geographically based in the metropolitan area, the women are from all areas in **Queensland**. Approximately 25% of the population at any time are composed of indigenous women. A significant proportion approximately 40% of the population also consists of young women most of whom are young mothers.

Despite the diversity of ages and cultural backgrounds represented in the facilities, Sisters Inside is of the belief the **Brisbane Women’s Correctional Centre Wacol, Helena Jones Community Correctional Centre Albion, Numinbah Correction Centre**

**Numinbah and Warwick Work Camp Warwick** each constitute a community of its own. The women generally share common links in that they are from poorer socio-economic background, have low educational attainment, and usually have a history of personal, physical/verbal/sexual abuse and a previous history of incarceration either as children, juveniles or adults.

For the period of their incarceration, the women are closer “neighbours” than in any comparable outside community. They work, eat, sleep, spend what leisure time is available and interact with the same people everyday. The prison setting provides the women with their housing, work environment, social environment and all of the material necessities of life. Though inmates are isolated from the external world, involuntarily, in some respects it could be argued that its characteristics parallel isolated rural townships.

### **THE WOMEN, THEIR CHILDREN & THEIR FAMILIES**

- Vulnerability of target population

Mothers who are incarcerated are particularly vulnerable whilst in prison and on release. They often lack confidence / skills / well being which facilitate a successful transition. Yet, women are also usually primary care givers and so their transition is made more demanding as they are faced with the added difficult of reintegrating their family.

#### **Indigenous Women**

- Indigenous women are significantly over represented in custody comprising 22.33% of all women under custodial orders. These women do not access community custody options to the same extent as non indigenous women;
- The majority of the indigenous women in prison are between the ages of 25 – 34 years;
- The increase of indigenous women in prison under 25 years has increased rapidly over the last 5 years;
- 89% of indigenous women were not in paid employment prior to arrest;
- 68% of indigenous women in prison have below year 10 education;
- 85% of indigenous women in prison have been victims of sexual assault;
- 89% of indigenous women in prison have been victims of family violence;
- 85% of indigenous women in prison are mothers with an average of 2.5 children;
- 80% of indigenous women in prison are involved with substance abuse;
- 63% of indigenous women in prison have known prior adult imprisonment.

#### **Non Indigenous Women**

- Approximately 75% of women in prison are non indigenous;
- The majority of women in prison are between the ages of 25 – 34 years;
- The increase of women in prison under 25 years has increased rapidly over the last 5 years;
- 87.34% of women were not in paid employment before incarceration;

- 85% of non indigenous women in prison have been victims of sexual assault;
- 89% of women in prison have been victims of domestic violence;
- 85% of indigenous women in prison are mothers with an average of 2.5 children;
- 85% of women in prison are involved with substance abuse;
- 63% of women in prison have known prior adult imprisonment;
- Literacy levels are lower than for the general Australian population;
- 70% of women in prison report that they have used heroin in prison
- 65% of the women self reported that they have attempted suicide and or self harm;
- 80% of these women report that the self harm occurs whilst in prison;
- Deaths in custody in the past 10 years there have been 5 deaths, one murder, 3 suicides, one by natural causes and two from lack of medical attention;
- Post Release Deaths - in the past 24 months 18 women have died within the first 12 weeks after release from prison;

### **Culturally & Linguistically Diverse Women**

- 15% of women in prison are from a non English speaking background;
- Approximately 90% of these women are primary care givers;
- 85% have been sexually abused;
- 90% are victims of domestic violence;
- The majority of these women experience overt racism within prison;
- These women do not have regular access to interpreters;
- There is no translation in any form for these women to understand policies and procedures whilst in prison; and
- They are alienated from their own culture.

### **Young Women in Detention:**

- 90% are Aboriginal & Torres Strait Islander
- All young women are under 25
- 15% of young women have Hep C
- 90% have experienced sexual abuse
- 89% have been in a domestic violence situation
- 91% have been in a family violence situation
- 10% are mothers
- 85% of the young women have used drugs and alcohol
- Minimal reports of drug use by young women in detention
- 80% report attempted suicide and / or self harm whilst in detention

### **Children & Young People**

- 100% of children and young people who's mother was their primary care giver experience trauma of family breakdown;
- A high percentage will experience confusion, abandonment, fear, anxiety, shock,

- deep sorrow, loss and anger when their mothers are first incarcerated;
- A high percentage of children and young people enter care of the Department some voluntary due to no other careers being available or involuntary due to previous issues with the parenting by the mother or environment they are living;
  - Most young people between the ages of 14 – 17 end up homeless, turn to drug and alcohol, truant or are expelled from school;
  - Some of the young people between 14 – 17 years attempt suicide or self harm;
  - Two young people have committed suicide within 3 weeks of their mother's release from prison in the last 6 months;
  - Over 80% of children are living in violent environments when their mother is in prison;
  - A high percentage face the torment and stigma everyday while their mother is in prison;
  - A high percentage of young people 14 years of age and onwards are at risk of developing a mental illness;
  - Presently there are over 30 mothers in prison who have a child or have had a child in custody.

### **Community Impact**

The impact on the immediate community: hardship for women, children and families post release:

- Many families are plunged into a series of almost insurmountable difficulties when their mother is released:
- Re-claiming the role of motherhood after considerable absence and often with little or no contact during the period of incarceration;
- Children and young people trusting that their mother's behaviour has changed and the same dysfunctional cycles of violence, drug use and trauma will not be repeated
- Finding housing – most women 87% need housing on release but the process is made difficult by lack of bond money and references for rental housing and difficulty in accessing housing services from prison and racist attitudes for indigenous families within relevant Departments;
- Drug related issues particularly in relation to choice of housing and especially for those women on treatment programs; and
- Financial and emotional support – most women have little or no money on release and few personal belongings.

### **Medical conditions reported:**

- Previous hospital admissions – 72.4%
- Prescribed medications – 55.2%
- Cardiac condition – 11.6%
- Asthma – 37.6%
- Risk behaviours for HIV 40.9%



- Diabetes – 6.6%
- Sexually Transmitted Disease 11.6%
- Hepatitis B – 11.5%
- Hepatitis C – 74.2%
- Currently pregnant – 9.0%
- Previous pregnancies – 82.3%

### **Mental Health Indicators:**

Information reported in regards to women in prisons and mental health indicators are as follows (Data is from Department of Corrective Services):

- Previous Psychiatric hospital admissions – 9%
- Previous Counselling or Treatment – 37%
- Reports current emotional problems – 83.92%
- Previous mental health problems – 36%
- Self Reported Depression – 95%
- Anxiety – 80%
- **Substance use – 85%**
- Trauma – 95%

### **Mental Health Needs of Women in Prison Related to Drug Use**

Women's experiences of mental illness are different to men's. A wide range of studies in Australia and overseas have identified differences in the types of mental illness experienced by men and women. It is critical to recognise that women need to be considered within a biopsychosocial framework. The issues of 'difference' and 'sameness' and the enduring debate ensure that the interpretation of feminist theory and ideological differences between women continues. These issues are explored by MacCulloch who identifies the dilemma "...that women were too disparate a group, were too diverse to be meaningfully classified as a single social unit" (MacCulloch 1994).

A majority of imprisoned women are sentenced for non-violent offences; for crimes such as fraud or **drug related offences**. Although women are sentenced for less serious and violent crimes than men, they are highly likely to be incarcerated in maximum-security facilities. Many women come from impoverished backgrounds, are **addicted to drugs and/or alcohol**, and have emotional and mental health problems. The crimes these women commit are often a reaction to negative life events, a response to a crisis or to prolonged disadvantage and abuse.

Society has paid little attention to the female inmate population. They are seen as 'expendable', 'evil', 'mad or bad', and 'incapable of change'. Women within the criminal justice system, particularly women in prison, have 'special and/or particular needs'. Compared to women in the general population, there is a high level of psychological disturbance in women prisoners. Hurley & Dunne (119:468) state that "the prevalence of

high to severe disturbance in prisoners was approximately 150% greater than in women living in the community". Women in prison, while a disparate group, have common elements in their lives and shared needs. Therefore, it was possible to formulate the proposed model of service delivery for imprisoned women's mental health care, and thus address the mental health needs of women in prison and their families.

Studies show that women in prison are in serious need of mental health counselling. More than 80% of women surveyed had coexisting mental health and **substance abuse problems**. Such dual diagnoses typically require specialised services that address both problem areas simultaneously. As stated women's experience of mental illness is different to men. The literature suggests that two thirds of the women newly admitted to prison in the United States suffer sufficiently significant psychological distress to require mental health services. Besides the acute problems that may develop, pre – existing mental health problems are likely to be present. It is revealed that 55.2% of women had taken medication prescribed for emotional or mental health problems prior to imprisonment. In the Hurley and Dunne study conducted at Brisbane Women's Correctional Centre during 1989, 53% of prisoners were diagnosed as current cases of a psychiatric disorder with the most frequent diagnosis being adjustment disorder with depressed mood and personality disorders. A follow up study after four months showed no fall in the prevalence of psychological distress and psychiatric morbidity (Hurley & Dunne 1991).

It is of the upmost importance to remember that for Aboriginal and Torres Strait Islander women these problems are only exacerbated. A majority of the indigenous female population in prison come from broken homes (85%). They have either personally suffered from being removed from their own family (85%) or live with the intergenerational effects. These women have also been subjected to sexual violence (85%), and family violence (90%). Public hospital morbidity data for 1993 shows the rate of hospital separations of intentional injuries was 10.6 times the rate for non-Aboriginal and Torres Strait Islander peoples reflecting in part the high suicide rate. The Queensland Health discussion paper: Towards A Policy Statement for Queensland acknowledges the negative impact on mental health from social and economic disadvantage which affect many Aboriginal and Torres Strait people, such as:

- Colonisation/dispossession of land;
- **Drug and Alcohol abuse;**
- Depression;
- Removal of children;
- Family displacement; and
- Unemployment.

#### ANECDOTAL VIEWS OF IMPRISONMENT

The criminal justice system is complex and often confusing. From the time a woman is charged, through the process of committal hearing, trial or sentencing, until reception at Brisbane Women's Correctional Centre (BWCC), she is under constant stress. Women

sentenced outside the Brisbane area may spend several days in a police watch house before being transferred to BWCC. It is widely accepted that conditions in police watch houses in this State are general substandard.

Women entering prison, particularly for the first time, often find the locking of the gates behind them creates a felling of claustrophobia. On reception a woman will experience a series of dehumanising and degrading procedures that are a forerunner to daily life in prison. At BWCC all new receptions and remand prisoners are held in the maximum-security section of the prison. This block within the prison contains high security prisoners and those women considered by the correctional staff to be 'difficult' or 'at risk'. Accordingly this block is a harsh initiation to prison life, particularly for first offenders and women on remand. It is nothing less than a terrifying experience and likely to be an exacerbating factor in mental health problems. While in the block it is extremely difficult because of security considerations, to have access to the minimal services provided at BWCC. For instance, although there is 24 hour nursing staff on – site, it is nigh impossible to access nursing staff because of the necessity to rely on the mood of correctional staff. This may be attributed to preconceived stereotypical attitudes that denote prisoners as less than human because of their wrong doings and therefore staff is able to justify their non-fulfilment of their role as service providers.

In most prisons there is a rigid demarcation between the staff and prisoners, with the staff's authoritarian role and the inmate's subordination role emphasised. Women learn very quickly that there are many rules and regulations and they must 'play the game', behave like a 'good girl' and not make waves. The unwritten and unspoken 'code of behaviour' and the constant stress of not knowing what will happen next cause untold mental health problems for the women. Women find themselves living in an alien world. Nothing in their previous experience prepares them for the total sense of powerlessness that pervades every aspect of their lives. To survive in such a hostile and alien world it is necessary to shut down one's emotions and learn not to feel. Expressing outrage in this enclosed world is strictly forbidden. Women's prisons are the ultimate expression of social control. If a woman begins to feel (anger, anxiety, and depression) and expresses those feelings in an institutionally inappropriate fashion or else seeks assistance the response most often used by the prison is to medicate her.

The post – release period is also difficult. Prison only temporarily replaces existing outside problems with the ones of prison. As movingly stated recently by a woman released from prison "... You're released to face your old problems, you have even fewer resources than before in terms of housing, friends, or sense of self, with the added stigma of being an ex-prisoner to complete your sense of isolation." The last thing that any woman wants upon release is further 'interference' in their lives. Simultaneously women acknowledge that "...the first six months out I could've done with a counsellor", I became withdrawn and felt the need to be home more...", "...Sisters Inside's workers can be so important to your progress and transition back to normality". Clearly Sisters Inside is an essential link to support services in the post release period. Unfortunately Sisters Inside is under funded and under resource to provide an ongoing service for all women post – release.

Perhaps the following, from another woman who was released early this year, most clearly illustrates the sense of isolation experienced by women in the post release period, "...It's best that you don't go out of your way to meet the people around you. I didn't have any friends. I wish I'd had a number to call and say, 'Listen I'm not having such a good day', I know Sisters Inside is there for me but they are under resourced and always trying their best for all women in prison."

One of the major difficulties with post – release is that while a woman is in prison, the thought of release provides hope. Unfortunately, the level of expectation attached to release is often unrealistically high and destined to produce heartache not joy. Furthermore, once released, the hope that has sustained the individual is not replaced with anything. There is nothing else to hope for. This is obviously a most vulnerable time in a woman's life and the consequences are not hard to imagine. In the last 24 months 18 women have died, **due to drug overdose**, suicide or a violent partner, within 12 weeks after release from prison. Sisters Inside believes that these deaths may have been avoidable providing the right support mechanisms are in place. In providing the proposed services to women in prison and their family's pre and post release we hope to fill the gap.

Currently there is minimal evidence that mental health assessment occurs during the reception at BWCC. The 1989 study at BWCC suggested that two simple screening measures might be useful to women who are at risk on reception. Psychological and support services could then be offered to these women. While acknowledging that all women in custody are 'at risk' to some degree of mental health problems some women are obviously more 'at risk'. There appears to be no identification of 'at risk' groups, e.g. Aboriginal and / or Torres Strait Islander women, first offenders, young women and women with an intellectual disability.

At present only those women with extreme behaviour come to the attention of the correctional staff. For example, women with depression are often not regarded as being 'at risk' although there is ample literature that points to depression as a major indicator of possible suicide. The Victorian study by Herrman et. al. (1994) and a Western Australian study by Dear (1999) found an apparent pool of prisoners with largely untreated major depression. Is there any reason to believe that this is not the case in Queensland?

Indeed the incidence of self – harm among imprisoned women needs urgent attention, particularly amongst young women at the juvenile detention centre, considering the high percentage of women who have a history of self harm and the escalation once in prison there needs to be serious interventions put in practice. This becomes all the more alarming knowing that a majority of the young women in the detention centre are of Aboriginal and Torres Strait Islander descent. The reaction of prison staff to self-harm is to treat it as attention seeking and breach the woman (a breach is an internal disciplinary procedure) and lock her in the detention unit.

While women are under threat of being breached and locked in the detention unit they are becoming more creative with how they are self-harming. A woman was telling Sisters Inside recently that instead of slashing her wrists now she is slashing her groin so the correctional staff couldn't see the injuries. The real reasons behind the self – harm are not acknowledged and usually never addressed by the prison staff. The strategy of 'not feeling' does not stop the feelings. It only blocks them. Sometimes the core of pain may become too much.

A real lack of after – care exists for women in prison with mental illness. Anecdotal evidence points to the fact that many such women continually re-offend as prison means at least "getting fed and having somewhere to sleep". These women cannot look after themselves and need after – care. The challenge is to make referral linkages to community services available to women in the post – release period so that women will "feel OK" about contacting those services. The 1989 study at BWCC found "Given the high prevalence of psychiatric disorder, and the risk of re-imprisonment, it would seem important to offer post – release counselling and treatment services, and then to evaluate whether such programs are effective in preventing further criminal convictions". The only service women have access to presently is Sisters Inside's Women's Transition Program. This program is a pilot and finishes in April 2000. This program funds one worker only.

The purpose of the Women's Transition Program was to provide support and counselling to women in SouthEast Queensland prisons who are being released back into the community. The primary focus was transition and post – release. Statistics from the Women's Transition Program in a six-month period are as follows:

- 847 counselling sessions
- 237 new referrals
- 127 family members counselling and support sessions
- 324 telephone contacts, referral and information provided

Statistics from the Sexual Assault Counselling service in a 3-month period are as follows:

- 702 counselling sessions
- 78 new referrals
- 79 family members counselling and support sessions
- 124 telephone contact, referral and information provided.

Much can be achieved to reintegrate women back into the community. As previously stated many women have unhealed wounds from childhood victimisation and abuse and, usually nothing has occurred during imprisonment to break the cycle. In the current situation there is no way, with the conflicting aims of security and self-improvement, that the prison system can be said to 'rehabilitate' a woman in prison. However, a person can possibly increase the range of lifestyle options available, if the tools are available.

The development of self-esteem and living skills is not encouraged inside, although these are prerequisites for successful adaptation on the outside. The development of self-esteem is particularly important, for most of these women have been victims of violence,

which often results in the deterioration of self-worth and identity.

Relationships between the health and correctional sectors, the tension between ‘therapy’ and ‘security’, the issues of confidentiality and trust constitute a challenge. Sisters Inside can offer the women in prison confidentiality and ensure the trust from the women, as the organisation is independent from the Department of Corrective Services. For too long service providers have said that it is ‘too hard’. In this current climate of ‘working in partnership’ it is timely to convert the rhetoric of government commitment into action.

## **The Impact of the War on Drugs**

Without any fanfare, the ‘war of drugs’ has become a war on women, and it is clearly contributed to the explosion in women’s prison population. While the intent of the get tough law and order policies is to get rid of drug dealers and the so called king-pins, drug offences make up a greater proportion of offences committed by women in contrast to men in Queensland.

We need to be more honest with ourselves that the vast majority of women receiving prison sentences are not the business operatives of the drug networks. The glass ceiling seems to operate for women whether we are talking about legitimate or illegitimate business. The women are very small cogs in a very large system, not the organisers or backers of illegal drug empires. This, coupled with a growing mood among the Australian public reportedly concerned about early intervention for troubled children and more drug treatment in preference to prisons, should give us the opening we need to look at better and more cost effective ways of dealing with women offenders.

Over the last 10 years, the federal and state government criminal justice authorities have increased efforts to detect and prosecute people who violate drug laws and legislatures required courts to impose harsher penalties. The so-called war on drugs has resulted in a significant increase in the number of people who are incarcerated and the length of incarceration for people convicted of committing drug crimes.

The imprisonment of women for drug related crimes have been the main element in the overall increase in the imprisonment of women.

Women have been described as disproportionately the “victims” or “prisoners” of the war on drugs. The number of women imprisoned for drug related offences in Queensland alone have tripled between 1944 and 2000. The reported patterns of illicit drug use (upon reception) are consistently higher for women prisoners than for male prisoners. While intravenous drug use has increased over the last three-year period for both males and females, women report particularly high intravenous drug use patterns. Furthermore opiate use is much higher for female prisoners than for male prisoner in Southeast Queensland; and that heroin is the preferred drug for female opiate users<sup>1</sup>. Whilst incarcerated female prisoners ingest illicit drugs at a higher level in comparison to male

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<sup>1</sup> Department of Corrective Services 2000

prisoners. This suggests that women almost exclusively ingest hard drugs. These include opiates, amphetamines and benzodiazapines.

Pointing to the link between substance abuse and the prevalence of physical and sexual abuse among women, it seems that the “war on drugs” has succeeded only in criminalising women already suffering under extreme socioeconomic and psychological stress.

The harsh penalties that are being imposed on so many people convicted of violating drug laws and related drug crimes has given rise to a number of concerns among people of various backgrounds, including judges, legislators, people working in welfare and human rights organisations.

We as a society need to address issues that impact on women in prisons both pre and post release. This includes their children and their families. This will ensure positive reintegration back into their community.

## **RECOMMENDATIONS**

- 1. That each Attorney General ensure that, through judicial education, magistrates and judges always use the option of prison as a last resort when sentencing a women who is the parent of dependent children irrespective of the existence of mothers and children's units in prison.**
- 2. That alternative sentencing options for primary care givers be developed to ensure that the family unit is maintained.**
- 3. There should be a much greater co-ordination of a drug treatment policy and programs for women in prison so the provision of counselling and treatment meets the needs of the women. The program should only be offered by the non-government sector.**
- 4. Drug education programs should focus on multiple high-risk behaviour, including risks for the women themselves and their children, born and unborn.**
- 5. Women and visitors should not be strip searched under the banner of "drug strategy" as this discourages visits that are necessary to maintain strong family ties.**
- 6. Women should not be stripped searched due to the psychological stress and re-traumatisation of previous sexual violence.**
- 7. That efforts are made to improve quality of contact between women in prison and their children.**
- 8. That, as soon as possible, the Federal Government establishes non government post release support services for women released from prison throughout Australia.**
- 9. That as part of a women's post release plan the Federal Government ensure that all women exiting prison, and particularly those with children, have suitable accommodation upon their release.**
- 10. That the Minister responsible for Federal Housing establishes a Department of Housing client service team for all women in prison across Australia.**



- 11. That each Attorney General ensure that prior to sentencing a women the courts are provided with reports from relevant Department on the impact of a custodial sentence of a primary care giver on any dependent children of that parent.**