

## The health of Australia's prisoners

# 2009

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## Foreword

An estimated 50,000 people are released from prison each year in Australia. This means that the health of prisoners has a significant impact on the health of the wider community, yet until now very little was known about the health of prisoners nationally. In response to the paucity of national data in the prisoner health area, the Prisoner Health Information Group led by the AIHW has been working for several years to develop a set of indicators and data collection that will allow us to monitor the health of prisoners and their access to services over time.

The health of Australia's prisoners 2009 report represents a major milestone. The report presents information on the health of prisoners at the time of entry to prisons, their use of health services while in prison as well as some information on the prison environment. While the current report is national in scope, we expect jurisdictional data to be available for subsequent reports.

This report confirms some of the research findings that a high proportion of prison entrants have mental health problems, high levels of psychological distress and a history of head injury leading to a loss of consciousness. Rates of hepatitis B and C are significantly higher among prison entrants than the wider community as well as high levels of smoking, alcohol consumption and illicit drug use.

Other findings show that a quarter of prisoners visited a prison health clinic—with most visits being for health checks or to manage specific conditions such as diabetes or mental illness. Over 40% of prisoners in the prison census reported taking some form of prescribed medication.

Aboriginal and Torres Strait Islander prisoners are over-represented within the prison system with 26% of prison entrants being Indigenous. Indigenous prison entrants were found to have higher levels of communicable diseases than their non-Indigenous counterparts but reported lower levels of mental health issues and were less likely than non-Indigenous prisoners to take prescribed medication.

I would like to thank the PHIG for their expert advice and leadership in the development of the prisoner health indicators. Many thanks also to the Australian Health Ministers Advisory Council, who provided funding for this project through the (former) Standing Committee on Aboriginal and Torres Strait Islander Health and the National Advisory Group on Aboriginal and Torres Strait Islander Health Information and Data.

Finally, thanks to the data providers in each jurisdiction who co-ordinated data collection within their states and territories—such a major undertaking would not have been possible without your ongoing support.

#### **Penny Allbon**

Director

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## Symbols

Symbols —

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## Summary

*The health of Australia's prisoners* 2009 is the first report relating to the National Prisoner Health Indicators, which were developed to assist in monitoring the health of prisoners and to inform and evaluate the planning, delivery and quality of prisoner health services.

Most data for this report come from the National Prisoner Health Census (the Census), which was conducted in 87 of the 93 public and private prisons throughout Australia during mid 2009. Data were collected over a one week period on all prison entrants, all prisoners who visited a clinic, all prisoners who were taking prescribed medication while in custody, prison clinic services and staffing levels.

During the Census week, there were over 27,000 prisoners in custody in Australia. Detailed data were collected for 549 prison entrants, over 3,700 prisoners in custody who visited a clinic, and over 4,900 prisoners who were taking prescribed medication. The denominator for the indicators sourced from the clinic and medications data is the total number of prisoners in custody on 30 June 2009 (within the prisons included in the Census). These data were sourced from the Australian Bureau of Statistics data Prisoners in Australia (ABS 2009b). The Census dates were chosen to include 30 June 2009 to ensure that this denominator was as accurate as possible.

Additional data on prison entrants were sourced from the 2007 National Prison Entrants' Bloodborne Virus and Risk Behaviour Survey (NPEBBV&RBS) (Butler & Papanastasiou 2008). This survey included 740 prison entrants from all jurisdictions except the Northern Territory.

The results in this first report form a baseline for national prisoner health in Australia. Trends over time and state/territory comparisons will be available in future reports.

#### Social determinants

Of the 549 prison entrants in the Census:

- 89% were male, the median age was 29 years and 26% were Indigenous
- 75% had completed Year 10 or less schooling, with Indigenous entrants having lower educational attainment than non-Indigenous entrants
- 68% had been previously imprisoned and 24% had previously been in juvenile detention.
  A history of imprisonment, especially juvenile detention, was more common among Indigenous than non-Indigenous entrants.

#### Health conditions and risk behaviours

As shown below, prisoners have significant health issues, with high rates of mental health problems, communicable diseases, alcohol misuse, smoking and illicit drug use.

#### Mental health and head injury

- 37% of prison entrants reported having a mental health disorder at some time and 18% reported that they were currently taking medication for a mental heath related condition.
- A history of self-harm was reported by 18% of prison entrants.
- 43% of prison entrants reported having had a head injury resulting in a loss of consciousness.

#### **Communicable diseases**

 35% of prison entrants tested positive to hepatitis C, 21% tested positive to the hepatitis B antibody and less than 1% tested positive to HIV (Butler & Papanastasiou 2008).

#### Smoking, alcohol and illicit drugs

- 81% of prison entrants were current smokers and 74% smoked daily.
- 52% of prison entrants reported drinking alcohol at levels placing them at risk of alcohol-related harm.
- 71% of prison entrants had used illicit drugs during the 12 months prior to their current incarceration.

#### **Chronic conditions**

- 25% of prison entrants self-reported that they have a current chronic condition—asthma, arthritis, cardiovascular disease (CVD), diabetes or cancer.
- Asthma was the most common chronic condition, affecting 16% of prison entrants.

#### Health service use

- During the Census, over 6,400 prisoners visited a clinic (25% of all prisoners in all jurisdictions except the NT and Tasmania) and over 4,900 prisoners were taking prescribed medication (41% of all prisoners in Qld, WA, SA and ACT).
- Prisoners made an average of 2 visits each to prison clinics during the Census week and were taking an average of 2.3 medications per day.
- The most common problems managed in the prison clinics were health check (19%), diabetes (14%) and mental health issues (12%).
- Based on the medication audit, 31% of prisoners were taking medication for mental health related issues. This is consistent with the proportion of prisoners referred to prison mental health services (31%).
- Prison clinics were staffed at an average of 3 full-time equivalent (FTE) health professionals for every 100 prisoners in custody.
- Most primary health care in prison was provided by nurses (71%), with just under one-fifth (18%) of clinic visits being with a medical practitioner.
- Clinic visits for drug and alcohol or mental health related issues were most likely to be initiated by staff (70%), whereas clinic visits for chronic conditions and related conditions were most likely to be initiated by the prisoner (65%).

#### Aboriginal and Torres Strait Islander prisoners

- There were 141 Aboriginal and Torres Strait Islander prison entrants during Census week (26% of prison entrants).
- Indigenous prison entrants had lower levels of mental health issues than non-Indigenous prisoners. Of Indigenous prison entrants, 26% reported mental health issues, compared with 41% of non-Indigenous prison entrants. Nine per cent of Indigenous prison entrants reported that they were currently taking medication for mental health related conditions, compared with 20% of non-Indigenous prison entrants.
- The prevalence of communicable diseases was higher among Indigenous prison entrants than non-Indigenous prison entrants. For hepatitis C, 43% of Indigenous prison entrants tested positive, compared with 33% for non-Indigenous entrants, and for hepatitis B, the figures were 42% and 17% respectively.
- Sixty-five per cent of Indigenous entrants consumed alcohol at levels which placed them at risk of alcohol-related harm, compared with 47% of non-Indigenous prison entrants. Around 80% of Indigenous and non-Indigenous prison entrants were current smokers, and around 71% of Indigenous and non-Indigenous prison entrants had used illicit drugs in the last 12 months.
- The type of illicit drug used varied between Indigenous and non-Indigenous entrants. Indigenous entrants were more likely than non-Indigenous entrants to have used cannabis (59% and 50%), while non-Indigenous entrants were more likely than Indigenous entrants to have used meth/amphetamines (33% and 21%), heroin (21% and 15%) and ecstasy (21% and 9%).
- The proportion of Indigenous and non-Indigenous prison entrants currently with a chronic condition were similar. Indigenous prison entrants were more likely to currently have diabetes than non-Indigenous prison entrants (4% compared with 2%).
- During Census week, the same proportion of Indigenous and non-Indigenous prisoners visited a clinic. The types of problems managed were also similar.
- A greater proportion of non-Indigenous prisoners were taking medication. However, Indigenous prisoners were more likely to take diabetic medication than non-Indigenous prisoners (5% compared with 2%).

#### Deaths in custody

 According to the National Deaths in Custody Monitoring Program, during 2007 there were 45 deaths in prison custody, 5 of whom were Indigenous. This is a rate of 0.8 per 1,000 Indigenous prisoners and 2.0 per 1,000 non-Indigenous prisoners. Most of these deaths (32) were due to natural causes.

#### Conclusions

The health of prisoners is poorer than people in the general community in a number of areas including certain chronic conditions, communicable diseases, mental health and alcohol and drug use.

This first national report provides a baseline for monitoring these indicators of the health of Australia's prisoners, to inform policy making and service delivery.