



OICS Ref: 0538

Hon Alison Xamon  
Select Committee into Alternate Approaches to Reducing Illicit Drug Use and its Effects on  
the Community  
Legislative Council Committee Office  
Office of Western Australia  
Parliament House  
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Dear Ms Xamon

Thank you for the opportunity to provide a submission to your inquiry. While the terms of reference mostly fall outside my jurisdiction, there is no doubt that reducing illicit drug use in the community will have a significant impact on custodial services. Too often people with drug dependence problems end up in prison or youth detention.

I believe that imprisonment and detention should be used as a last resort and that, where possible, people with substance abuse problems should be diverted into treatment and rehabilitation.

When a person does end up in custody, I believe that this should be used as an opportunity to provide programs and other interventions to reduce the chance they will return to custody. 'Warehousing' people is unlikely to lead to good outcomes.

While the focus of your inquiry is 'illicit drug use', I note that alcohol remains one of the most problematic 'drugs' for many people, especially in Aboriginal communities. Other addictions, such as gambling, also present major problems. While I support initiatives in relation to illicit drugs, I hope these other areas will also receive more attention in terms of funding and programs.

#### Drug use by prisoners and the recommendations of the Methamphetamine Action Plan Task Force

The latest report from the Australian Institute of Health and Welfare on the health of Australia's prisoners found that two thirds of people coming into prison had used an illicit drug in the preceding 12 months. The proportion was even higher for people who were less than 25 years old, with 76% of this group reporting using illicit drugs. The most commonly reported illicit drug used was methamphetamine.

The release of the final report of the Methamphetamine Action Plan Taskforce in late 2018 provided a solid foundation for reducing methamphetamine use, and I believe its findings and recommendations are applicable to all illicit drugs.

The report contains a useful section on justice populations, recognising this group as particularly vulnerable to the impact of methamphetamine use. The Taskforce called for everyone in custody to be assessed for substance use and anyone willing to address their alcohol and other drug use to be provided easy access to these services. I agree.

The Taskforce heard that for some people, going to prison made them want to address their alcohol and other drug issues given they were in a controlled environment. This is something that I also often hear from prisoners. Most of them want to address their substance abuse issues and want to spend their time in custody in a useful way.

The Taskforce raised several concerns about the ability of people to access treatment programs in prison. They included:

- Services are not available for people on remand due to the fact their time in custody is often short and of uncertain duration.
- Treatment programs are hard to access even when a person is assessed as needing them (see my further comments below).
- The new alcohol and other drug rehab prison for women (Wandoo Rehabilitation Prison) and the plan for a dedicated rehab unit for men in Casuarina Prison are welcome. However, resources are needed in regional areas as well as the metropolitan area.
- The main prison-based drug treatment program, Pathways, is not meeting the needs of the diverse prison population. It was considered outdated and requiring a level of literacy which many prisoners do not have.

These are all valid concerns, and consistent with our findings in the past few years.

The Taskforce made a series of recommendations for people in the justice system, including:

- improving substance use assessments
- providing appropriate treatment and support
- having a more holistic approach to treatment and support
- expanding through-care services to all prisons and to all prisoners on remand

I support all of these recommendations [Recommendations 37, 38, 39, and 40]. They align with common sense, research evidence, and the findings of my Office over many years.

The Taskforce also recommended that, as a harm reduction strategy, the Department of Health and the Department of Justice should introduce a needle syringe exchange program

into prisons [Recommendation 41]. This Recommendation was rejected by Government, and is most unlikely to be implemented in the foreseeable future. However, other harm reduction mechanisms need to be considered. On a number of occasions, I have urged the Department of Justice to ensure access to cleaning agents for needles and tattooing equipment (see, for example, OICS, *Report of an Announced Inspection of Hakea Prison*, Report No. 102, 2016, paras 4.22-4.23 and Recommendation 12).

### Accessing treatment programs in prison is difficult

The Taskforce noted that prisoners experience lengthy delays in accessing treatment programs in prison, or may not be able to access them at all. This is a problem we have been concerned about for some time.

Unfortunately, the situation has gone from bad to worse as prisoner assessments and program delivery have fallen further behind. In the past, prisons were unable to provide sufficient programs to cover the needs of prisoners after they had been assessed. More recently, programs have been cancelled because of an acute backlog in assessments.

People in custody must be assessed before they are assigned to a treatment program. However, the Department has not kept up with assessments. Often this is because staff who are supposed to be doing assessments are reassigned to other duties. It probably also reflects problems with complexity of the assessment process.

Three years ago, we raised serious concerns about the backlog in 'Individual Management plans' ('IMPs') for prisoners. We called for the backlog to be addressed and for improved program delivery (see, for example, OICS, *Report of an Announced Inspection of Casuarina Prison*, Report No. 110, 2017, sections 7.1 and 7.2 and Recommendations 15 and 16).

Unfortunately, adequate remedial measures were not put in place and the situation has deteriorated. This is a matter we will be discussing again in a report on Hakea Prison which we expect to table in March/April 2019.

On 20 September, we met with the Department to discuss the growing backlog in assessments. The Department outlined a solution which would involve reducing the number of offender programs available, and redirecting staff resources from programs delivery into assessments. This was to continue until the end of 2018 and was expected to clear the backlog of assessments. However, there were delays in getting approval to redirect resources and for staff to be organised and trained in undertaking assessments. As a result, the redirected staff only began undertaking assessments a few weeks before Christmas. This has resulted in only a small number of assessments (approximately 50) being completed. Redirected staff are expected to continue providing some assistance in January, but will commence programs again in February 2019.

Assessments are supposed to be conducted within 28 days of sentencing. By 7 January, 538 assessments were due to be conducted for men in the metropolitan area, 483 of which were past the 28 day requirement.

Most of the prisoners awaiting assessments were at Acacia. Acacia is privately operated and not resourced to undertake assessments. The Department has also taken the view that it should itself be undertaking assessments. Currently, therefore, staff based at Hakea Prison travel to Acacia to do the assessments. This has not addressed the backlog. We are not aware of any future plans to address this backlog. We will be discussing this again in a report on Acacia Prison that we expect to table in Parliament in August 2019.

### Better services are needed for young people in prison

I am particularly concerned that the Department does not have a strategic plan or a sharp operational focus on young prisoners aged 19-25/28 in prison. Drug use prior to entering prison is more prevalent in younger people and, as a group, they tend to present high needs and risks.

From 2012 to April 2017 the Wandoo Reintegration Facility operated as a reintegration facility for young men. It performed well across all key measures and the evidence suggested it was achieving good outcomes (OICS, *Report of an Announced Inspection of Wandoo Reintegration Facility*, Report No. 109, 2017). It offered what was, at the time, the most holistic offender management model in the state. Every resident was assessed during their first three weeks and provided with a reintegration plan. Most of them had substance abuse problems, and their plans contained goals and actions structured around pathways, including substance misuse and employment.

In mid-2017, Wandoo facility was converted to a women's drug and alcohol treatment facility. This is a very positive step for women, and should offer excellent opportunities for younger women to tackle their issues before they become more entrenched. However, it is disappointing that no alternative has been developed for young men.

### Summary

In terms of your broad terms of reference, the methamphetamine task force have been very useful to us, and I'm sure will be very useful to your inquiry. They drew attention to many issues with drugs in the community and the intersection with justice.

Key issues with respect to programs to address drug addiction amongst justice populations include the following:

- greater, and more timely access to treatment programs
- a sharper focus on the needs of young people
- expanding the use of diversion programs so people do not end up in prison

- ensuring sufficient and locally relevant programs in regional as well as metropolitan prisons
- improved through care between prison and the community

Finally, I should inform you that my second five-year contract as the Inspector of Custodial Services will expire on 30 March 2019. As I am not seeking a renewal, a new Inspector will be in place for most of the duration of your Inquiry.

I would like to thank you personally, and all members of the Committee, for your positive engagement with my Office, and with me personally over the last decade. For me, it has been both an honour and a pleasure.

I wish you well in conducting your inquiry and looking forward to seeing a copy when it is complete.

Kind regards

A handwritten signature in black ink, appearing to be 'NM', followed by a long horizontal line extending to the right.

Neil Morgan  
Inspector of Custodial Services

18 January 2019