INCARCERATION OF ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLE POLICY

This Policy Statement should be read in conjunction with the Public Health Association of Australia’s Aboriginal and Torres Strait Islander Health policies.

_The Public Health Association of Australia recognises that:_

1. Aboriginal and Torres Strait Islander persons comprise 2.4% of the Australian population, but make up 25% of the Australian prisoner population. This is a rate of 1,891 per 100,000 of the Aboriginal and Torres Strait Islander adult population imprisoned at any time, compared with the overall Australian incarceration rate of 136 per 100,000 of the adult population. Aboriginal and Torres Strait Islanders are fourteen times more likely to be incarcerated than a non-Aboriginal and Torres Strait Islander citizen.¹

2. Three percent of the adult Aboriginal and Torres Strait Islander population are imprisoned in any one year compared with 0.3% of the non-Aboriginal and Torres Strait Islander population.²

3. An Aboriginal or Torres Strait Islander youth is 19 times more likely than a non-Aboriginal and Torres Strait Islander person to be detained in a juvenile facility.³

4. Contact with the Juvenile Justice system is a strong indicator of incarceration as an adult. 86% of Aboriginal and Torres Strait Islander juvenile offenders enter the adult correction system, compared with 75% of non-Aboriginal and Torres Strait Islander juvenile offenders, with 65% serving prison terms compared with 41% of non-Aboriginal and Torres Strait Islander juveniles. Further, 91% of juvenile offenders who had been subject to a care and protection order progressed to the adult prison system.³

5. About 25% of all incarcerated women in Australia are Aboriginal and Torres Strait Islander individuals.⁴ The rate of incarceration of Aboriginal and Torres Strait Islander women has doubled in the past ten years.⁴

6. In 2007, 5 Aboriginal and Torres Strait Islander people died while in custody in Australian correctional facilities.⁵

7. Community Controlled Aboriginal Health Services support mainstream health services in providing health care for Aboriginal and Torres Strait Islanders, both while in the community and in custody.
The Public Health Association of Australia notes that:

8. The effects of prison on the Aboriginal and Torres Strait Islander population exacerbate the already poor health of Aboriginal and Torres Strait Islander peoples. Health statistics of Aboriginal and Torres Strait Islander prisoners are appalling – the rates of smoking, alcohol misuse and dependence, illicit drug use and dependence, and violence and abuse are higher than the national rates for the Aboriginal and Torres Strait Islander community in general. Similarly, the rates of infectious and chronic diseases, poor oral health and poor mental health are high. This is of particular concern with juveniles in custody.³

9. Alcohol is major determining factor in the high rates of incarceration of Aboriginal people. Current alcohol laws across jurisdictions disproportionately affect Aboriginal people, especially in rural areas.

10. There is no national or uniform approach to assess or meet the health care needs of the Aboriginal and Torres Strait Islander prisoner population.³

11. Custodial requirements presently take precedence over health care and community contact needs of Aboriginal and Torres Strait Islander prisoners.⁶

12. Incarceration is an expensive process which further disadvantages socially isolated people. The cost of incarceration is $276 per day to house an adult prisoner.⁴ This would suggest that investment on interventions to prevent imprisonment and could provide immense social and financial returns.

The Public Health Association of Australia makes the following recommendations:

13. The PHAA calls on all jurisdictions to make imprisonment the punishment of last resort for Aboriginal and Torres Strait Islander people. Jurisdictions must set specific annual reduction targets for the number of Aboriginal and Torres Strait Islander people incarcerated.

14. The PHAA calls for an increase in community health measures and funding of Community Controlled Aboriginal Health Services to address primary health, mental health and substance dependence problems in the community ensuring that those with mental health and/or substance dependence problems are offered effective treatment options including residential treatment, as an alternative to incarceration.

15. The PHAA calls on all jurisdictions including the Australian Government to adopt practices consistent with the United Nations 1990 General Assembly Resolution on the Basic Principles for the Treatment of Prisoners. Article 9 states: “Prisoners shall have access to the health services available in the country without discrimination on the grounds of their legal situation.”⁷

16. The PHAA calls for prisoners to have access to Medicare and the Pharmaceutical Benefits Scheme, including all safety-net entitlements.
17. When incarceration is mandated, Aboriginal and Torres Strait Islander prisoners should be housed as close to their family / community of residence as possible.


19. The current rate of Aboriginal and Torres Strait Islander incarceration is deplorable and the PHAA believes that the underlying social determinants, which contribute to this situation, must be addressed as a matter of urgency. The PHAA calls on all jurisdictions to develop:
   - early intervention programs, which identify and address social and health behaviours likely to lead to contact with the criminal justice system; this is particularly important in the areas of mental health, substance use and dependence, and violence;
   - evidence-based education and vocational programs targeting disaffected youth; and
   - culturally appropriate and effective alternatives to incarceration such as court diversion programs, Circle Sentencing, youth and adult drug courts and magistrates’ referrals into treatment, to be actively implemented.

20. Aboriginal and Torres Strait Islander prisoners should be given the possibility of accessing Community Controlled Aboriginal Health Services. This is critical to a smooth transition of health care from within prisons to external health care services (and if the individual returns to custody).

21. The PHAA calls on all jurisdictions to examine the concept of Justice Reinvestment as a concept for reducing Indigenous incarceration.

The Public Health Association of Australia resolves to:

22. Develop and run a Justice Health Symposium/Conference in which Aboriginal and Torres Strait Islander incarceration issues will be one of the key themes.

23. Invite Aboriginal and Torres Strait Islander participation in the development of the Symposium.

24. Ensure that advocacy for a significant and sustained decrease in Aboriginal and Torres Strait Islander incarceration is a key focus and outcome of the Symposium.

For further information on PHAA’s key policy directions and advocacy messages in relation to Justice Health, refer to the 2009 Justice Health in Australia Conference Resolutions paper, available on the PHAA website at:
ADOPTED 2006, REVISED AND RE-ENDORSED IN 2007 AND 2010
First passed as an Interim Policy by the Board of the PHAA at the Board Meeting held on 27 November 2006, and subsequently passed at the PHAA AGM in 2007. Revised and re-endorsed as part of the 2010 policy revision process.

References:


