

Achieving the Goals

KEY STRATEGIES AND NEW INITIATIVES

Supply Control Goal

Strengthening efforts to keep drugs out of Victoria's prisons.

The best way to eliminate the harm caused by drugs in prisons is to stop them getting into prisons in the first place. The new Strategy strengthens measures used to keep drugs and alcohol out of prisons by introducing new workplace practices, additional resources and state-of-the-art technology.

Performance Objectives

The controlling supply goal includes the following objectives:

- prisoners using drugs and/or alcohol in prisons are detected;
- people attempting to traffick drugs into prisons are apprehended; and
- drugs and related equipment concealed in goods, property, produce or vehicles are located and intercepted.

Key Strategies and Services

As prisons have become better at detecting drugs, the methods used by those trying to bring drugs into prisons have also become more sophisticated. To meet this challenge, improved standards, co-ordination of initiatives, and analysis of intelligence will be used.

Intelligence operations

Intelligence operations are in place at each prison location, collecting and co-ordinating information to improve the management of prisons across Victoria.

Each prison has specific prison collators or intelligence officers who monitor people involved in prison drug activities. These officers gather and record most of the information used to detect drug trafficking activities.

Prison managers and prison security and intelligence services also liaise and share intelligence with Victoria Police.

Security and Emergency Services Group

The Security and Emergency Services Group (SESG) is a group of highly trained prison officers who perform a range of specialised security and emergency response services across all prison locations.

Services include systematic search and intelligence functions, emergency support, and the searching for and seizing of drugs based on information received from intelligence operations.

Drug detector dogs

Drug detector dogs have proven to be a most effective deterrent to people considering bringing drugs into prisons and in detecting drugs on visitors and prisoners.

Drug detector dog and handler teams, known as the 'Dog Squad', are located across SESG locations and provide many of the resources for searching and security duties in Victoria's prisons. In addition, some prisons (including private prison operators) have their own drug detector dog teams. Drug detector dog teams are used for searching the perimeter of prisons, car parks, visit and service areas and prisoner accommodation.

There are two types of dogs used:

- GP (general purpose) dogs are trained to detect heroin, cannabis and amphetamines, displaying an aggressive response to any scent indicating the existence of drugs.
- PADD (passive alert drug detector) dog teams are often used, although not exclusively, in search processes at visit centres, gatehouses and other areas where there are members of the public and/or prisoners. PADD dogs, on detecting the presence of drugs, are trained to sit passively next to and look at any person or thing containing drugs.

Searching visitors and prisoners

Visitors and other people entering prisons are generally responsible for bringing drugs and drug-related equipment or paraphernalia on to prison property. Searching visitors is therefore an important way to limit supply and reduce prison drug activity.

In searching prisoners and visitors, individual civil rights must be balanced against the goals and objectives of the Strategy. This means that the level of intrusiveness of search procedures should be related to the probability of detecting drugs.

The Office of the Correctional Services Commissioner has a firm policy that visitors found on prison property with drugs or drug-related equipment will be banned from further visiting rights for a minimum 12-month period. Furthermore, people caught by prison authorities with drugs or drug-related equipment are referred to Victoria Police and face the possibility of criminal charges.



New Initiatives

Increased drug detector dog capacity

Efforts to intercept and deter drug trafficking into prisons will be boosted significantly by an increased presence of existing PADD dog teams in public spaces such as contact visit areas at all prisons across Victoria.

In addition, new PADD dog teams will be established at Fulham Correctional Centre and Port Phillip Prison.

Expanded barrier control and search efforts

The Office of the Correctional Services Commissioner will continue to trial, in partnership with prison operators, new ways to stop drugs entering prisons.

This will include the introduction of new statewide standards for barrier control, cell searches and personal searching, all of which will be monitored on a periodic basis so that these initiatives are effective and based on best practice standards.

Shared intelligence

Improved methods of sharing and co-ordinating information and intelligence about prison drug activity will be introduced in a joint effort by the Office of the Correctional Services Commissioner, prison operators, the SESG and Victoria Police. This will ensure that the information received by various stakeholders is shared and the responses to such information is consistent.

Visitor signage

Additional signage and information will be introduced at Victoria's prisons stating clearly that bringing drugs and alcohol into prisons is a serious offence and will be reported to Victoria Police. It will also alert visitors to the serious security and health risks caused by trafficking and associated drug activity in prison and the consequences visitors will face if caught bringing drugs into prisons.

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KEY STRATEGIES AND NEW INITIATIVES

Detection and Deterrence Goal

Detecting and deterring drug use and drug trafficking within Victoria's prisons.

While increased measures will aim to stop drugs entering prisons, the new Strategy recognises that a range of initiatives is required to detect drugs and alcohol that do manage to enter prisons. In addition, new initiatives aim to deter prisoners from using drugs by increasing efforts to detect drug use and introducing effective management options for those caught with drugs.

Performance Objectives

Detecting and deterring drug activity in prisons will ensure that:

- prisoners who traffick drugs in prison are identified and dealt with appropriately;
- prisoners who use drugs in prison are identified and managed appropriately;
- prisoners are deterred from using drugs because of the likelihood of being detected and penalised; and
- prisoners are provided with incentives to remain drug-free.

Key Strategies and Services

The primary focus of the detection and deterrence goal centres on urine drug testing, the Identified Drug User (IDU) Program, searching activities and a range of intelligence operations.

Urine drug testing

In accordance with the Corrections Act 1986 (s. 29A), urine drug testing has been the principal means of detecting drug use in Victoria's prisons since 1992. This has been a continuous program and has resulted in Victoria's prisons undertaking the highest level of drug testing of any of Australia's eight prison systems. Testing for alcohol and other drugs in Victoria's prisons is benchmarked to create statewide diligence across the system.

Random urine drug testing occurs within the prison system on a regular basis and each prison is required to undertake a specific number of tests. The purpose of this testing is to ensure that prisoners are aware that if they use drugs it is likely that this use will be detected and they will have to face the consequences.



Currently, a number of levels of urine drug testing operate in Victoria's prisons. These are audited and monitored by the Office of the Correctional Services Commissioner and include:

- random general testing involves 1.25% of the prisoner population being tested each week. This level of drug testing ensures that drug use is detected within Victoria's prison system. Prison operators are presented with a list of prisoners, which is randomly generated by the Office of the Correctional Services Commissioner, and who are required to produce a drug test sample;
- random Identified Drug User testing involves 5% of the IDU prisoner population being tested each week. This ensures that prisoners who have been caught using drugs in prison are more frequently targeted for drug testing and are therefore deterred from relapsing into further drug use;
- targeted testing involves prisoners who are suspected of engaging in, or have recently engaged in, prison drug-related activity being targeted by prison officers for testing. This provides a way to act on prison intelligence information and the observations of prison staff about possible drug use; and
- Office of the Correctional Services Commissioner testing involves independent, random drug testing of prisoners across the prison system. Every prison is subject to this testing regime at least once per year. Those prisons with populations exceeding 200 prisoners are subject to 150 prisoners undergoing testing; while prisons with populations of less than 200 are subject to 50% of prisoners being tested. Independent auditors attend the testing to ensure the correct processes are adhered to.

Urine drug testing will be further increased in the new Strategy, with the introduction of the Drug-Free Incentive Program, as part of the revised IDU Program.

Identified Drug User Program

The IDU Program is a set of procedures that have for over one decade aimed to maintain the good order of prisons, manage prisoners appropriately and responsibly, reduce prisoner demand for drugs and alcohol, and address drug abuse issues in prison.

The IDU Program achieves these aims by applying appropriate management measures against those prisoners who are caught using drugs. This includes the management measure requiring the exclusion of identified drug users from the contact visit program for a specified period.

The original IDU Program favoured the use of sanctions instead of incentives to change drug-using behaviour. The revised IDU Program will, for the first time, incorporate incentives and differential management measures to encourage prisoners to cease or reduce drug use while in prison.

The IDU Program seeks specifically to reduce harmful and dangerous drug activity in prisons (eg. transmission of blood-borne viruses, overdose, violent behaviour) and, as a result, should make prisons safer for prison staff and prisoners.

Among a range of available printed information materials, the Office of the Correctional Services Commissioner's *Identified Drug User Program* policy document provides further detail about the program.

Prison searches

As a primary method of deterrence, prison officers often conduct searches at all prisons to find drugs or drug-taking equipment. Where necessary, the SESG provides additional support in the searching operations.

Drugs entering Victoria's prisons are generally concealed on persons and in property. In order to combat this, searches are conducted on visitors and in visit areas and prisoners are strip-searched and their property, mail and cells routinely inspected.

New Initiatives

Incentive-driven Identified Drug User Program

The IDU Program has been revised following extensive review and broad consultation. Many procedures in the new IDU Program have not been altered, others have been revised to varying degrees, and some have been abolished.

The IDU Program describes the process that all prisons in Victoria must follow to manage prisoners who commit prison-related drug offences. This includes:

- describing and categorising offences involving drugs;
- applying management measures to prisoners who are charged with prison drug-related offences;
- prescribing different management measures for different drug offences;

- conducting the IDU Review process for prisoners who are identified as drug users;
- providing incentives for drug-free behaviour in prison;
- conducting drug testing to detect drug use; and
- managing prisoners who do not comply with the urine drug testing program.

In recognition that contact visits are the major avenue for drugs to enter prisons, the principal deterrent measure applied to prisoners caught using drugs is losing their contact visits for a specified period of time. Other management measures, such as limited access to the residential visit program, requirement to wear visit overalls and restricted classification options, will remain the same.

Drug-Free Incentive Program

The Drug-Free Incentive Program (DFIP) allows certain eligible prisoners caught using drugs to voluntarily consent to undertake specified numbers of urine drug tests in return for reducing their management time without contact visits.

The DFIP attempts to address the many difficulties experienced by prisoners who engage in prison drug activity. It recognises the relapsing nature of chronic drug abuse and provides a prompt intervention measure and incentives that seek to shift drug use patterns through the following two key features:

- incentives for prisoners who demonstrate drug-free behaviour (i.e. return of contact visits); and
- different management measures for cannabis-related drug offences (not including trafficking).

IDU Review Process

Once a prisoner is identified as a drug user, the prison-based drug and alcohol treatment provider will conduct an IDU Review with the prisoner within five days.

At the review, the prisoner's drug activity will be discussed as will the prisoner's motivation to either stop or reduce drug-taking levels. Prisoners will be informed about the risks of drug-taking, how to reduce the harm caused by drugs to both themselves and others, and may be referred to relevant treatment and/or harm reduction programs.

An IDU Review Plan is then developed, which describes the process that will be followed to assist the prisoner to stop or reduce using drugs.

The IDU Review is integral to the revised IDU Program and must be undertaken if a prisoner is to be admitted to the incentive program. The review process provides a quick response to a prison drug incident and capitalises on a prisoner's motivation to change following lapse or relapse into drug use. It also ensures a consistent system-wide response to identified drug users and related activity in prisons.

Cannabis and Different Management Measures

There is considerable debate concerning cannabis use in prisons. Although cannabis use is illegal, carries personal health risks, and creates problems by being a traffickable commodity within the prison system, there have been proposals in recent years to treat cannabis use by prisoners (but not trafficking) differently from the use of other drugs. This recognises that cannabis does not lead to the risk of overdose or transmission of blood-borne viruses that are associated with injecting drug use.

Based upon public health standards, the new IDU Program categorises drug activity according to differential management levels to reflect the variances in harm associated with different categories of drugs. The Strategy seeks to implement the principles of harm minimisation into operational practice. The following reasons form the basis for trialing differential management measures for cannabis in Victoria's prisons:

- as cannabis stays in the body much longer than other drugs, cannabis users face a significantly greater chance of being detected through urine drug testing;
- if the management measures for cannabis use are the same as for other substances (eg. lengthy exclusion from the contact visit program), some cannabis users may decide to use more harmful drugs that are detected less easily, but which have much greater risks of leading to overdose and/or transmission of blood-borne viruses;
- for prison staff, the increased prevalence of injecting drug use leads to heightened levels of prison tension and violence, higher risks of needlestick injuries, and greater likelihood of contracting blood-borne viruses such as HIV and Hepatitis C; and
- use of other non-injectable drugs, such as alcohol and non-prescribed medication, may lead to aggressive behaviour which may threaten the good order and security of the prison, prison staff and prisoners.

Achieving the Goals

KEY STRATEGIES AND NEW INITIATIVES

Treatment Goal

Providing effective treatment opportunities and harm reduction initiatives.

Often time in prison can represent 'time-out' from the stresses and impulses which contribute to drug abuse and criminal activity. This can provide an opportunity for drug users to seek treatment and establish drug-free lives.

Treatment for drug abuse must often address a complex array of personal issues and behaviour. The challenge is to provide accessible and meaningful treatment programs which are supported by all levels of prison staff.

The new Strategy acknowledges the wide range of factors that contribute to drug dependency. The Strategy's treatment goal focuses on providing more intensive treatment opportunities, reducing offending behaviour, and minimising the harm caused by drugs. The Strategy endorses treatment that accommodates the diverse needs of prisoners and which provides a means of reducing or stopping a prisoner's drug use. A key objective is to help prisoners establish drug-free lifestyles that benefit not only the individual but also society as a whole.

Under the new Strategy, the intensity and type of treatment available to prisoners will be related to their individual needs and a number of initiatives will try to increase their motivation to participate. Prisoners who are at high-risk of re-offending and drug-related harm will have access to a broad range of intensive treatment options. These will promote the development of personal self-help and coping skills to help them live drug-free lives and reduce the harm caused by drug use.

Programs which aim to reduce re-offending will typically include targeting of attitudes and values, as well as behaviours which rationalise drug use and crime as acceptable behaviours. Treatment will emphasise prisoners taking responsibility for their personal actions and offending behaviour and living as positive members of our society.



Performance Objectives

The treatment goal has the following objectives:

- decreased demand for drugs in prisons, resulting in fewer drug-related incidents and improved health;
- prisoners participate in a range of targeted programs to challenge their drug use and related offending;
- prisoners with acute health needs are treated appropriately; and
- prison drug treatment is linked with post-release drug services in the community so that changes in a prisoner's behaviour are maintained following their release from custody.

Key Strategies and Services

Prison-based drug and alcohol treatment services have been developed to respond directly to the needs of individual prisoners in relation to their drug abuse, as well as other general health and well-being needs. A range of treatment interventions and services are becoming increasingly available in Victoria's prisons and include: prisoner health services, offending behaviour programs, individual counselling, mutual self-help groups and peer support, drug substitution therapy, and transitional support.

Prison health services

Health services in prison deliver treatment to prisoners based on individual needs and play an important role in assisting prisoners with acute health needs, particularly those with drug-related dependence or behavioural problems.

Prison health services are closely involved in the ongoing treatment, health, and mental health issues that affect prisoners as a result of drug use. These services enable prisons to better assess, treat and monitor prisoners and reduce much of the potential harm that could be caused by drug use.

Psycho-social programs

A broad range of programs are available to help prisoners develop better coping mechanisms and reduce drug-related harm. These programs cover issues like relationships, alternatives to violence, social skills, parenting, stress management, coping with depression, anger management, relapse prevention, and other skills.

Some drug-specific individual counselling is available to support prisoners and this counselling provides further opportunities for prisoners to be referred to relevant programs.

In addition, intensive and therapeutic-based drug treatment programs are available at Bendigo Prison, Dame Phyllis Frost Centre and Fulham Correctional Centre to provide treatment that is directly focussed on a prisoner's personal needs and drug abuse issues. These programs play an important role in reducing re-offending and benefitting both the community as well as the individual prisoners involved.

Treatment resources and programs

The Strategy recognises that various groups within Victoria's prisons have particular needs and that, where possible, these needs should be addressed when planning new programs and reviewing existing ones.

It recognises that it is important to regularly assess the various treatment options available, so that the most effective range of options can be provided and mechanisms have been established to achieve this ongoing evaluation and planning.

The Strategy also acknowledges the importance of consistent prisoner assessment, delivering programs that meet the individual needs of prisoners and in maximising the knowledge, competencies and opportunities acquired by prisoners. This level of program involvement is necessary if prisoners are to change their drug use, both in prison and after release.

Methadone maintenance program

The methadone program has been available in a limited capacity in Victoria's prisons since the late 1980s, where prisoners with sentences of more than six months are gradually withdrawn from methadone (unless there is an additional condition such as pregnancy or if the individual is a remanded offender).

Methadone is highly effective in the treatment of heroin dependence and has a higher success rate than any other form of therapy.¹ Methadone treatment has also been shown to reduce the transmission of blood-borne viruses.² In providing methadone treatment in prisons, however, additional supervision is required to ensure that prisoners receiving the methadone do not pass it on to others.

Peer education and self-help support

Peer education and self-help support can be an effective way to changing drug-related behaviour. Many prisoners have problems developing trusting relationships which can provide them with much needed support and understanding.

Prisoners who have already made significant personal changes are powerful examples of the possibility of change and hope. They know the pitfalls which can result in re-offending and can also provide a bridge to treatment staff for further help and support.

The recent success of this kind of support is demonstrated by the increasing number of prisons that have recognised the importance of developing peer support and mutual self-help services for prisoners. A number of prisons now offer training programs to prisoners to become peer educators. These prisoners in turn provide education and support to other prisoners on issues such as reducing the harm caused by drugs and participation in alcohol and other drug programs.

Transitional support

The transition from prison to the community is a time of potential danger and uncertainty for those prisoners who have undergone treatment for drug problems while in custody. The post-release period is also the most critical test of any new behaviours and strategies that the ex-prisoner has learnt while imprisoned. During this time, ex-prisoners must contend with situations and problems which can often lead to drug use. These problems can be further compounded by the difficulty of re-establishing suitable accommodation, finding employment, building personal relationships, and becoming part of the community again.

A systematic approach to transitional support for prisoners with drug problems is critical, particularly if the investment made in prison treatment services is to be realised. As part of the emphasis on transitional support, all prison operators in Victoria offer pre-release preparation courses and programs to prisoners, in particular the Community Integration Program. Additional prison-based programs are provided at all prisons to help prisoners re-integrate into the community on release from prison. These programs cover issues such as accommodation, social security and family re-unification, and provide contacts with community agencies.

Transitional release programs for prisoners who have undergone prison-based drug treatment can help to consolidate the success a prisoner has achieved in treatment and have a major impact on post-release drug use, offending and social functioning.

The Community Offenders Advice and Treatment Service (COATS) is responsible for providing pre-release assessments of prisoners to refer them to appropriate community-based drug and alcohol services following release. COATS assesses prisoners eligible for Adult Parole Board orders and Combined Custody and Treatment Orders, as well as the 'Step Out' program for those prisoners who are released directly to the community and who are not subject to these particular orders.

New Initiatives

Prisoners' treatment needs will be met through the increased integration of existing and expanding treatment services, intensive programs and harm reduction initiatives. Mechanisms will be implemented across the prison system to assist us to develop innovative, best practice treatment services at each prison that are regularly reviewed to meet emerging needs and changing community standards and attitudes.

IDU Review process

The new IDU Review process, part of the IDU Program, enables active targeting of treatment based on individual prisoner needs. The IDU Program requires every IDU prisoner to be reviewed by the prison-based drug and alcohol treatment provider. The purpose of this review is to assess the issues surrounding a prisoner's drug activity in prison, provide information on how they can reduce the harm caused by their drug use, and develop a plan that refers them to relevant treatment.

Targeting of treatment resources

This initiative acknowledges the varied needs of the prisoner population. Targeting of resources will help prisons to develop and implement treatment programs and harm reduction initiatives that address the needs of their particular prisoner populations and so have a greater likelihood of successful outcomes.

Various specialised programs will be developed to accommodate the special needs of specific prisoner target groups. These are:

- women prisoners;
- indigenous prisoners;
- prisoners with special or particular needs; and
- young adult offenders.

Offending behaviour programs

Prisoners with chronic histories of drug abuse and related re-offending are most likely to show positive change after participating in intensive programs that focus on reducing offending behaviour. Such programs are being expanded in Victoria's prison system through the Reducing Re-offending Framework (see pages 31–32). This Framework will increase the opportunities for prisoners to participate in intensive therapy while in custody.

The increased number of intensive treatment programs delivered by drug and alcohol treatment providers across the prison system will be closely aligned with the objectives of the new Framework. These objectives are consistent with current best practice and also recognise the specific function of each prison:

- prisons whose main function is to receive prisoners and/or hold them on remand will continue to provide a range of short-term harm reduction programs;
- many prisons that hold prisoners for the bulk of their sentence will have increased resources to assess and identify the risk and needs of prisoners with drug problems. This will encourage appropriate referrals to programs such as harm reduction, relapse prevention, risk of re-offending, other offending behaviour initiatives and/or individual counselling;
- more intensive programs (of 40 hours) and intensive residential programs (100+ hours) will be available for prisoners who are assessed as being at high-risk of drug-related re-offending; and
- minimum-security prisons, which mainly function as exit or release prisons, will provide programs that focus on harm reduction and which better prepare prisoners for release, such as strategies to prevent relapse.

Expansion of substitution therapy programs

The expansion of substitution therapy programs in prisons (eg. methadone, buprenorphine and naltrexone treatments) is a Victorian Government initiative which forms an integral part of the new Strategy's treatment goal.

Three target groups will benefit from an expanded substitution therapy program in Victoria's prisons:

- individuals entering prison who are registered on a community methadone or buprenorphine program will be able to continue treatment irrespective of sentence length;
- prisoners identified at high-risk of drug-related harm will have the opportunity to start either methadone or buprenorphine therapy during their imprisonment; and
- prisoners identified at high-risk of post-release drug-related harm (particularly opiate-related overdose) will have the opportunity to start on either methadone or buprenorphine treatment prior to their release from custody.

To support the expanded substitution therapy program, additional prison health services will be implemented together with the development of clinical guidelines and processes for prisoners to continue treatment post-release. The expanded substitution therapy program will be carefully monitored and rigorously evaluated.

Peer education, self-help and family support

Peer education, self-help and family support groups in the community have been developed to meet the needs of people with a wide range of problems. Generally, these groups have evolved from the need to address problematic drug use.

As a means of further improving prison treatment support initiatives, funds have been allocated to establish a statewide program for peer education incorporating self-help and family support. This program will address a range of drug issues. Drug support groups within prisons will provide more opportunities for mutual aid, care and assistance, and the means to pursue personal change within prisons.

Transitional support

The new Strategy promotes a pro-active approach to transitional planning and acknowledges these processes as important components of effective prisoner management. In recognising the range of post-release needs of prisoners, Victoria's prisons will concentrate on establishing a number of possible exit pathways that reflect the different needs and sentence lengths of prisoners.

The Strategy views drug treatment and associated post-release support in the community, such as income and family support, family re-unification, education, employment, and health, as key components of effective transitional support. Continued investigation into initiatives for transitional support will further improve this kind of support to prisoners.

Current transitional support initiatives include: pre-release information kits, the existing Community Integration Program, delivery of a specialist housing support and brokerage program, and employment assistance programs. The Bridging the Gap Initiative and the introduction of community transitional units will continue to expand their transitional support services.

Bridging the Gap Initiative

The Bridging the Gap Initiative, launched in 2000 and funded by the Victorian Government Drug Initiative, is a collection of pilot post-release programs delivered by five community sector agencies. These agencies engage with prisoners one to three months prior to release and then following their release from custody.

Many released prisoners fail to make an effective transition back into the community and this is a critical factor in re-offending. Pre- and post-release services provided through Bridging the Gap recognise the vulnerability of high-risk and high-need offenders exiting prison and provide intensive transitional support to aid the transition of these prisoners back into the community.

Target groups for the Bridging the Gap Initiative are:

- long-term male prisoners (and their families) over 25 years of age and serving more than three-year sentences (Victorian Association for the Care and Resettlement of Offenders);
- women exiting prison (Melbourne City Mission);
- young adult prisoners aged between 17 and 25 years (Jesuit Social Services);

- older male prisoners with few family or social supports and older male prisoners with mental health or disability issues (Australian Community Support Organisation); and
- prisoners of Vietnamese, Cambodian or Laotian origin or prisoners who reside in the south-east region of Melbourne after exiting custody (Westernport Drug and Alcohol Service).

Community Transitional Units

The establishment of community transitional units (CTUs) is one of several key projects funded by the Victorian Government. The initiative aims to improve rehabilitation outcomes for prisoners and reduce re-offending by providing employment, accommodation and life skills programs that are essential for a successful transition back into the community.

Key objectives for this initiative are to create strong community networks and partnerships to assist participants to take control of their lives by learning and applying self-management strategies, gradually resulting in unsupervised day participation in community work, training and personal development activities and services.

Minimum-security prisoners (in the last two to 18 months of their sentence), who do not pose a risk to the community, prison staff or other prisoners and who are committed to a drug-free lifestyle, will be allowed to participate in the program.

Staff training

The extent to which the treatment goal achieves its objectives will be directly influenced by the level of staff involvement and competency. In addition, the way treatment is viewed and supported by prison staff will affect the motivation of prisoners to engage in rehabilitation, treatment and harm reduction programs.

The Strategy will encourage staff training and professional development in values and principles, case management and risk and needs assessment, which are all connected to the Strategy's treatment goal. These training activities will develop skills that prison staff can use to improve their management of prisoners.

1 National Evaluation of Pharmacotherapies for Opioid Dependence, 2001.

2 K. Dolan, Surveillance and Prevention of Hepatitis C Infection in Australian Prisons: A Discussion Paper, Technical Report No. 95, National Drug and Alcohol Research Centre, Sydney, May 2000.

Achieving the Goals

KEY STRATEGIES AND NEW INITIATIVES

Health and Safety Goal

Reducing health and safety risks to prison staff, prisoners and society associated with prison drug activity.

The new Strategy aims to reduce the health and safety risks caused by drugs.

Every prison will run increased numbers of harm reduction programs that inform prisoners of the problems caused by drug use and how they reduce harm to both themselves and others. For example, education and support will be available to prisoners about blood-borne viruses such as HIV and Hepatitis C, to increase their own well-being as well as preventing the infection of others.

More training will be available to prison staff on reducing the harm caused by drug use. A number of initiatives will be trialed to introduce better health and safety practices to make their jobs safer, such as the use of new protective equipment in searches.

Various research projects have been initiated which will provide more information on drug and alcohol abuse and the results will enable us to better plan what services are needed to manage drug use even more effectively in the future.

Performance Objectives

The health and safety goal includes the following objectives:

- prisoners are provided with practical information about the risks of drug and alcohol abuse and the harm that can be caused by drugs;
- prisoners are motivated to change their behaviour both in prison and on release in order to reduce or eliminate drug-related harm (eg. prisoners are better prepared to prevent drug overdose, attempted suicide, and the mental and physical health problems associated with drug-taking);
- prisoners with drug-related illnesses are educated and supported to achieve the best quality of life possible and prevent transmitting infection to others;
- prison staff are trained in and use appropriate occupational health and safety practices to reduce or eliminate harm associated with prisoners' drug activities (eg. the number of workplace injuries and incidents among prison staff is reduced); and

- prison staff are informed about drugs and alcohol-related prison activity, as well as being trained in overdose awareness, first-aid and conflict resolution strategies to enable decisive action when necessary.

Key Strategies and Services

A number of activities are undertaken in prisons to ensure that staff and prisoners are protected from the potential health concerns resulting from drug and/or alcohol abuse. These include prisoner programs, occupational health and safety procedures, and staff training.

Occupational health and safety procedures

All prisons have occupational health and safety procedures that aim to prevent problems associated with drug activity, such as needlestick injuries and the transmission of blood-borne viruses.

Staff training and professional development

Staff training and professional development initiatives aim to improve the values, behaviour and skills of prison personnel, by providing information and frameworks for best practice.

Many prisons have provided, or are in the process of providing, health and safety information and training sessions for prison staff to inform them about the effects of alcohol and other drugs and how to minimise the harm caused by drugs. This will improve the ability of prison staff to identify and manage prisoners who use drugs.

New Initiatives

The Victorian Government is committed to investigating the prevalence of health and safety problems in prisons in order to provide better responses to these serious issues.

The health and safety goal will be achieved through a number of new initiatives, including expanded intensive treatment and offending behaviour programs, increased harm reduction programs, and improved strategies to stop drugs getting into prison, detect drugs in prison and deter prisoners from using drugs. These initiatives will be conducted through the revised IDU program.

Harm reduction programs

Evidence-based best practice shows that prison-related and release-related programs that look at how to reduce the harms caused by drugs, as well as relapse and its prevention, are more likely to succeed.

The revised range of drug programs to be delivered in Victoria's prisons includes an expansion of programs dedicated to educating prisoners about prison and release-related harm associated with drug use. These programs inform prisoners about the effects of different drug types, short- and long-term consequences of drug-taking, and issues concerning overdose and other harm associated with unsafe injecting practices.

Needs-based planning studies

A number of studies will be undertaken in Victoria's prisons to better understand prisoner needs, such as factors relating to health problems in the prison environment and how these can be improved. These studies will identify areas of concern and where services and programs should be developed or improved. They include:

- a survey of prisoners' health, which will help define health problems and will include an extensive array of physical and mental health factors related to the effects of drugs. The results will help prison managers to better plan health management initiatives. The degree of dual problems among prisoners, particularly drug abuse problems paired with suicidal behaviour, will be an important outcome of this study;
- a research project, undertaken by the Macfarlane Burnett Institute of Medical Research, will ascertain the prevalence of Hepatitis C infection across Victoria's prison system. This will assist in establishing baseline information about prevalence, which will be used to allocate resources for the support and treatment of prisoners with Hepatitis C;
- a harm reduction audit, conducted by the Turning Point Alcohol and Drug Centre, will establish the extent of individual and collective harmful behaviour among the prisoner population. This will enable specific targeting of harm reduction initiatives across Victoria's prisons; and
- a pilot study, undertaken by the Eastern Alcohol and Drug Service, will link women prisoners with appropriate health services upon release to ensure that women's health needs are being met.

Staff training

Training for prison staff is fundamental in order to build a best practice corrections workforce. To develop awareness of the principles behind prison drug treatment and improve understanding of critical issues, staff training and professional development will cover workplace practices, professional ethics, values and behaviours, and attitudes as they relate to the management of prisoners who are identified as drug users.

Three drug training initiatives for prison staff will focus on increasing their understanding and awareness of harm minimisation, overdose and Hepatitis C:

- training to minimise the harm caused by drugs will focus on increasing staff understanding of relevant workplace practices, while also challenging attitudes and behaviours that run counter to this principle;
- heroin overdose workshops, conducted by VIVAIDS, will increase awareness of overdose, overdose risk factors, and overdose management and response strategies. (In addition, the recruitment and training of peer educators who will provide information to relevant stakeholders and networks about drug overdose will promote greater awareness about this issue among prison staff); and
- a training and education project, conducted in Victoria's prisons by the Hepatitis C Council of Australia, will provide practical information about hepatitis infection for prison officers and prisoners. This training will increase awareness about hepatitis within prisons and how to reduce the harm caused by this disease.

Occupational health and safety procedures

The use of innovative occupational health and safety techniques will be trialed to reduce drug-related harm to prison staff, particularly that resulting from search activities. The Office of the Correctional Services Commissioner will monitor the trial introduction of new equipment and clothing to be used by prison officers when conducting cell and area searches.

Communication strategies

Effective and integrated communication strategies and information initiatives will be developed to provide increased information sharing and an improved level of understanding about drug use and drug-related harm.