



Submission on

**The Human Rights Audit of Conditions of
Detention of Women at the Alexander
Maconochie Centre**

June 2013

About ACTCOSS

ACTCOSS acknowledges Canberra has been built on the land of the Ngunnawal people. We pay respects to their Elders and recognise the strength and resilience of Aboriginal and Torres Strait Islander peoples. We celebrate Aboriginal and Torres Strait Islander cultures and ongoing contribution to the ACT community.

The ACT Council of Social Service Inc. (ACTCOSS) is the peak representative body for not-for-profit community organisations, people living with disadvantage and low-income citizens of the Territory.

ACTCOSS is a member of the nationwide COSS network, made up of each of the state and territory Councils and the national body, the Australian Council of Social Service (ACOSS).

ACTCOSS' vision is to live in a fair and equitable community that respects and values diversity and actively encourages collaborations that promote justice, equity and social inclusion.

The membership of the Council includes the majority of community based service providers in the social welfare area, a range of community associations and networks, self-help and consumer groups and interested individuals.

ACTCOSS receives funding from the ACT Government - Community Services Directorate.

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Introduction

ACTCOSS welcomes the opportunity to make a submission to the Human Rights Audit of Conditions of Detention of Women at the AMC ('the Audit').

The Alexander Maconochie Centre (AMC) was designed and built to be Australia's first human-rights prison. As such, the prison is meant to comply with the ACT *Human Rights Act 2004* in both policies and operational procedures, and ensure the human rights of all detainees are protected and exercised.

However, information from previous and current female detainees, and services who work with them, indicate that the needs and rights of female detainees in the AMC are not being met, primarily due to flaws in the original design of the buildings of the prison and the discrepancies of scale in program provision to small numbers of female detainees.

Women in the AMC

The women's section of the AMC was originally designed to hold between 1-16 women. As of 1 December 2012, there were 12 female detainees (as compared with 250 male detainees).¹ Given women are typically on shorter sentences, this makes for a much smaller and fairly transient population of detainees.

A notable characteristic of female detainees in the AMC is the level of previous incarceration. In 2011, 71.5 percent of all prisoners in the AMC had known prior imprisonments compared to the national average of 54.6 percent.² Most worryingly, the highest proportion nationally of female prisoners with a prior imprisonment was in the Australian Capital Territory, at 72 percent.³

1 ACT Justice and Community Safety Directorate, *Criminal Justice Statistical Profile December 2012 Quarter*, ACT, 2012.

2 ABS, *Prisoners in Australia*, 4517.0, 2011, p. 37.

3 *ibid.* p. 42.

Analysis of good practice and current practice

The following table is a literature review of best-practice issues⁴ for working with female detainees, compared against what currently occurs in the women's section of the AMC:⁵

Area	Good practice	Current practice
Knowledge of rights	<p>Detainees have an awareness of their rights, and the capacity to exercise them.⁶</p> <p>Detainees are informed about the provisions under the Act the prison is under, and any applicable rules or information which relates to their treatment and conditions.</p>	<p>Female detainees are unaware of their rights in the AMC, particularly around incentives for good behaviour/participation, for example such as access to day-release.</p> <p>Female detainees are unaware of programs and support systems they can access.</p>
Educational and vocational programs.	<p>Appropriate, consistent and meaningful education programs for all detainees are provided, with a strong focus on building people's literacy and numeracy skills.</p> <p>Programs also need to offer detainees continuity of educational support (i.e. they are supported to finish their studies when they are released).</p>	<p>Women in the AMC have access to educational/vocational programs 2 hours per week, and those on shorter sentences do not have access to study or the Canberra Institute of Technology (CIT). The women are also not able to access computers regularly.</p>
Support for women to maintain relationships with families and dependent children.	<p>Best practice:</p> <ul style="list-style-type: none"> • appropriately designed and maintained family-friendly playground and visitors' areas; • access to parenting programs and/or mother and child support workers; • measures to enable communication with family members, for example Skype; • the option (where practicable) children to stay with their mother for extended periods (for example, on weekends); • connections to family support programs within the community for women to access upon their release, for example local parent 	<p>There is a 'play-pen' in the visitor's/reception area of the AMC, however it is not properly maintained or very 'child friendly'.</p> <p>Female detainees do not have access to parenting-skills classes or programs.</p> <p>Although there is a specific 'cottage' in the women's section of the AMC which was originally designed so female detainees could have their infants with them, as yet this has not been utilised.</p>

4 Information from: L Bartels and A Gaffney, *Good practice in women's prisons: A literature review*, AIC Technical and Background Paper 41, Australian Institute of Criminology, Australia, 2011.

5 Information on current practice was obtained from speaking with women who routinely visit female detainees in the AMC.

6 ACT Human Rights Commission, accessed 12 June 2013, <http://www.hrc.act.gov.au/content.php/content.view/id/309>.

	<p>support group;</p> <ul style="list-style-type: none"> • peer support from other detainees in the same situations; • collaboration with the children's primary caregiver in the community. 	
<p>Treatment of pregnant women, breastfeeding mothers and provisions for women to have their children reside with them at the AMC.</p>	<p>Best practice:</p> <ul style="list-style-type: none"> • appropriate support (both emotional and practical) be offered to women who are due to give birth;⁷ • women be made aware of any policies relating to women's obstetric care, pregnancy, childbirth, miscarriage, breastfeeding and childcare in the AMC; • women have timely and clear information in regards to their pregnancy and what will happen with them, and their baby, in the future. 	<p>The dietary needs of pregnant detainees are met, with women reporting they receive extra food and milk.</p> <p>There are currently no pre- or post- natal care, exercises or classes (for example, lactation classes) available.</p> <p>Pregnant women are not provided with timely information about what will happen to them and their babies after they give birth.</p>
<p>Appropriate health care for women, including mental health care, drug and alcohol services and reproductive health care.</p>	<p>Best practice:</p> <ul style="list-style-type: none"> • the provisions of timely and relevant health screening, for example, breast checks and cervical screening; • the introduction of ultrasound clinics and dedicated drug-free units; • measures to ensure the specific nutritional needs of pregnant and lactating women are met; • the availability of drop-in health services and provision of a broad range of on-site medical services, including general nursing, GP, psychiatry, dental, optical, podiatry, mental health nurse and pharmacotherapy; • health promotion programs, for example, smoking cessation, diabetes prevention and heart health, as well as the provision of information on blood-borne diseases; • efforts to ensure transition for health care into the community and promote liaison with community health care networks. 	<p>Lack of access to appropriate health care seems to be one of the main issues facing female detainees in the AMC. Female detainees often have to wait up to two weeks to see a doctor, and over two weeks to see a dentist or mental health expert. ACTCOSS is unsure whether women have the opportunity to choose to see a female doctor.</p> <p>Women report not having access to reproductive health care or to gender-specific health education (for example on menopause).</p> <p>In addition, women report not having access to Alcohol or Other Drug services, or when they do get access, it is not consistent or intensive.</p>

⁷ ACTCOSS, *Submission on the Alexander Maconochie Centre Review*, Canberra, 2010.

Issues arising from analysis

What has come across very clearly from meeting with former detainees and talking with community sector organisations, and from the gap-analysis of best practice versus current practices, is that female detainees in the AMC:

Experience differential treatment to male detainees through a lack of access, or limited access, to meaningful and adequate programs (educational and recreational); job opportunities; and timely healthcare (particularly female-specific health information and programs).

Do not have an understanding of what their rights are. Information from current detainees is mixed, and indicates that they either don't know what programs or support they can access, or they believe they cannot access them.

Are not provided with adequate opportunities, support or information to have their infants with them, maintain close links with their children, and/or increase their skills as parents thus increasing the risk of negative intergenerational impacts on children as a result of parents being in prison.

Why are there gaps?

The gaps in addressing the needs of female detainees in the AMC come down to two fundamental and interlinked reasons: the *prison was not designed for women*, and there is an economy of scale issue based on the premise that *women are a minority of detainees*.

While the AMC does have some female-specific design features, most notably cottage-style accommodation for women and no female cells, it is still primarily a prison designed to house male detainees. Many of the facilities, such as the library, computers and health centre, are kept in the main part of the prison, which means female detainees do not have easy access to them. If female detainees need to leave the designated women's area of the gaol, they must be escorted by corrective services staff which can often lead to a 'lock down' of other women due to staff shortages.

In addition, the small numbers of female detainees in the AMC undermine economies of scale, and present operational challenges to the provision of tailored programs and support as many programs will not run with low numbers of participants.

Why is it a priority to address these concerns?

ACTCOSS strongly believes that supporting female detainees in the AMC presents a real opportunity for engagement with women who may have poor Social Determinants of Health, and other health issues. Female detainees' needs differ to male detainees' as

- Female detainees are more likely to have more complex physical and mental health issues and requirements;⁸
- Women’s drug use is often more closely related to their offending than for men; and
- Female detainees are more likely to have experienced a history of trauma (including sexual and/or physical abuse) for which they have not accessed treatment or recovery services, which is often linked to their offending.⁹

Addressing poor physical and mental health, substance abuse, and histories of trauma is not only a human rights issue, but increases the chances of rehabilitation and decreases the risk of recidivism. Prison is also an opportune time to address the *social determinants of crime*, such as disengagement with or lack of education; lack of employment; low social skills; and/or conflict within families. In addition, prison is an opportunity to build women’s capacity for self-advocacy, and asserting of rights.

Furthermore, it could be argued that targeted and intensive interventions with a female detainee can have a much larger sphere of influence – reaching their children, family and the broader community. Just as the United Nations notes that educating women provides the single highest return on investment due to the positive impacts this has on their families and communities,¹⁰ from a cost-effectiveness point of view then, the money that is spent on addressing the needs of female detainees results in better, longer-lasting, and further-reaching outcomes.

Priorities for action – recommendations

There are a number of areas where the ACT Government could take action to properly address female detainees’ needs and requirements.

1. In the 2013-14 ACT Budget, the ACT Government committed over \$6 million over 4 years on supporting Corrective Services staff in their operational capacity, and \$3 million for design work for the AMC. In it’s response to the Budget, ACTCOSS noted this funding should translate to greater accessibility to programs and activities for female detainees.¹¹

Recommendation: The ACT Government undertake a cost-benefit analysis of what it would cost to properly meet the needs of female detainees, and then utilise some of the over \$9 million funded in the 2013-14 ACT Budget to meet these costs.

2. A vital component of supporting women in the AMC is the involvement of the community services sector, as many female detainees will already have been

8 L Bartels and A Gaffney, *Good practice in women’s prisons: A literature review*, op. cit.

9 Sisters Inside Inc, *A Campaign to End the Sexual Assault of Women by the State*, South Brisbane, Sisters Inside Inc., 2005.

10 Accessed 12 June 2013, <http://www.unfpa.org/gender/empowerment2.htm>

11 ACTCOSS, *ACT 2013-14 Budget Snapshot*, Canberra, 2013, p.33.

clients of various women's support services and so have relationships with community sector workers. It is these services that will usually play a key role in supporting women when they exit prison. Furthermore, a number of these services play a key role in supporting female detainees to exercise their rights (such as access to justice through legal services; building their capacity to advocate for themselves; supporting family dispute resolution skills).

In 2011 a Women's Advisory Group (WAG) was set up as a way of maintaining links between Corrections and managers of women's services in the community. Meetings were held quarterly in the women's section of the AMC and were an opportunity for women's services to provide high-level strategic advice to Corrective Services on how to best provide a continuity of care for female detainees. These meetings have since ceased.

Recommendation: The Women's Advisory Group (WAG) meetings be reinstated ASAP to ensure independent advice and feedback on female detainees' experiences and needs can be provided.

3. ACTCOSS sees working with women in the AMC to maintain relationships with their children as a key opportunity to reduce recidivism, and address intergenerational disadvantage risks faced by children of women in prison. As many female detainees are the primary (and sometimes sole) carer of children, it is vital that their relationships with their children be maintained and supported whilst they are incarcerated, and after release.

Recommendation: Opportunities to build parenting skills and maintain relationships with children during incarceration are offered to female detainees through the development of targeted support programs.