# 'From Exclusion to Inclusion'

A report on the role of the local community in the rehabilitation and reintegration of prisoners.

## from Exclusion to Inclusion

The issue of building a correctional facility in the ACT has existed for over 20 years now. To date five major reports as well as the recommendations of two recent standing committees have favoured the construction of a correctional facility to accommodate ACT prisoners. The prevailing belief is that the ACT ought to face up to its full correctional responsibilities including the administration of full-time custodial sentences that are imposed by the court system.

The construction of a correctional facility for sentenced prisoners in the ACT would enable prisoners to maintain and/or initiate those relationships that can provide the context and motivation for successful re-integration into the community and insulation from further offending. The current arrangement, which places the care of prisoners outside of the control of the ACT, perpetuates a discontinuity of service that is unsatisfactory from both a social and correctional perspective.

It is difficult to capture in precise terms the impact of a correctional facility that is developed within a community context. No one piece of research can provide an answer to this. However, investigating the diverse aspects of the prison system and its practices can advance the rationale for the construction of a facility in the ACT. These aspects and practices can be enhanced by an integrated system that connects the prison to the community within one jurisdiction.

Conversely, the same aspects and practices are undermined where separation exists. It compromises the rehabilitative opportunities that a custodial sentence can provide. This not only represents the potential loss of opportunities to impact on the criminal lifestyle of the offender, but also represents a price that can continue to be paid by the community when prisoners return to the ACT, having served sentences in a custodial system beyond its governance.

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<sup>&</sup>lt;sup>1</sup> ACT Corrections Review Committee, (1992) **Paying the Price: A Review of Adult Corrective Services and Juvenile Justice in the ACT**, CanberraACT Prison Community Panel (2000) **An ACT Prison – "Getting it Right": Report of the ACT Prison Community Panel**, December 2000

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# **Prisoners and the Current System**

A range of sentencing options and court orders have developed within the criminal justice system of the ACT. This, to some degree, has come about because of, and to compensate for, the absence of a facility for custodial sentences. Sentencing practice in the ACT has long demonstrated that the use of full-time custodial sentences are a last resort.

The alternatives to a custodial sentence include monetary penalties, community-based probationary orders with or without a period of conditional supervision, community service orders, periodic detention orders and home detention. A sentence can include combinations of these options. There are also a number of diversionary options to encourage the treatment of drug and alcohol issues, where these are contributing factors to offending.

During the preparation of pre-sentence reports all sentencing options are canvassed with the offender, regardless of the severity of the offence. The alternatives to a custodial sentence are explored in conjunction with treatment pathways to address the risk of further offending.

Currently, of all the Australian states and territories, the ACT has the lowest rate of imprisonment.<sup>2</sup> However, unlike other states and territories, a person sentenced to a term of imprisonment in the ACT is sent to serve this period in the NSW prison system. Once transferred to the NSW system, the ACT ceases to exercise any control over the progress or outcomes for that person.

Whilst a pre-sentence report may set out a pathway to address factors that contribute to the offending behaviour of the prisoner, there is no knowledge of the extent to which the report contributes to sentence planning. Furthermore there is no indication of the prisoner's progress through the sentence, the extent of their participation in rehabilitative programs, or even where the sentence is being served.

The transition from prison to the community, which in this case often means the return of the offender to the ACT, represents a further weakness of the current system. Pre-release plans are poorly coordinated with no process for communication or consultation between NSW prison-based staff and ACT community- based staff. These plans are central in determining the transitional needs of prisoners as they reintegrate into the community.

Pre-release plans address such issues as accommodation, family and community supports, employment, additional treatment requirements for issues related to alcohol and drugs and possible mental and physical health treatment regimes. They can also provide some indication as to the attitudinal state of the prisoner. While reports sometimes accompany prisoners, this lacks consistency and does not allow for pre-planning. Delays in meeting needs and establishing

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<sup>&</sup>lt;sup>2</sup> Australian Bureau of Statistics, (2001) **Prisoners in Australia: Imprisonment Rates at 30 June 2001.** Common wealth of Australia

services can be critical in the successful transition of the prisoner and the prevention of risk-taking behaviour.

# **Prisoners and the Ecosystem Perspective**

This paper assumes a holistic understanding and approach to prisoners, their offending behaviour, the factors that contribute towards this behaviour and the strengths and resources to be harnessed in working towards restoration and rehabilitation. The ecological perspective (also described as person-in-situation or person-in-environment) informs this understanding.

The dynamic interactions that occur between individuals, their families, communities and systems suggest an interdependence that is critical to an understanding of individual identity and role. The individual cannot be understood without consideration or reference to the conditions and circumstances of their lives and the cultural and historical context that is an essential part of their existence. In other words the person and the environment exist in a relationship of mutual influence. Compton & Gallaway state that "our individual lives are shaped by the choices we make in response to the environmental opportunities presented to us. By our choices and activities, we in turn shape the environment." (1999:37)

A problem can often emerge where there is "an unfavourable fit" between person's coping skills and the demands of the environment. (Compton & Gallaway, 1999:34; Young & Smith, 2000) The descriptions of these problems can illuminate the lack of personal, interpersonal and political power to influence how one is able to live in the environment. Equally the person may feel powerless to counteract the misuses of power or inequalities that exist within the environment. The life circumstances of marginalised groups such as prisoners cannot be fully understood without reference to experiences shaped by poverty, educational and vocational disadvantage, race and gender. (Young & Smith, 2000)

Problematic situations cannot be alleviated in exclusive attempts to influence change in either the individual or the environment. Instead, both can be viewed as having strengths and deficits. Change efforts are directed towards a combination of understanding the impact of the environment on personal problems, increasing the skills and influence of the person to cope with the environment, reducing, alleviating or eliminating environmental stressors and increasing available supports within the environment. Interventions on behalf of and in collaboration with the individual are focused "on rehabilitative efforts to enhance adaptive exchanges." (Young & Smith, 2000) Freeman states that this,

...simultaneous focus on the individual and the environment concentrates on power issues. This ecological system focus implies that all people should have minimal levels of power to control their lives and to gain access to resources necessary for exercising that control. (2001:49)

The ecological perspective is also helpful in understanding the problems associated with transporting ACT sentenced prisoners to correctional facilities in

another jurisdiction. Speaking in the context of "a systems approach to reducing criminality", Alan Piper, the Director General of the Ministry of Justice in Western Australia, stated that the criminal justice system can be understood as a network of interdependent components working together to accomplish an agreed upon aim. ("Reducing Criminality: Best Practice and Partnerships" Conference, 2000) A greater level of interdependence demands a greater need for communication, cooperation and overall management between components. The failure to recognise this impacts upon and contributes to the failure of the system.

The criminal justice system in the ACT has embraced and developed new and innovative strategies to prevent crime, prosecute, adjudicate and sentence offenders and redirect offenders towards more law-abiding lifestyles. However, with the absence of a prison one part of the overall strategy is missing. In the eyes of some, this absence may be preferable given the failure of prisons to contribute to favourable outcomes for offenders or the communities they return to. Alternatively, the absence may represent a systemic weakness that continues to undermine the overall criminal justice effort.

The ACT has the unique opportunity to plan, construct and deliver a prison service that models high standards of integration from prison to community and between prison and community. It completes the 'missing link' in the criminal justice system. Prison services and programs can be developed in a way that is complementary to and dovetails with existing community resources. Equally important, the same community resources can be enhanced and developed in ways that are more responsive to the rehabilitative needs of offenders.

# **Prisoners and Throughcare**

Being the sentence of last resort, imprisonment is regarded as punishment in itself. The time spent in the prison system is focused on opportunities to motivate and prepare the prisoner for re-integration into the community. Transition between prison and community is enabled through the provision of a transparent regime that involves treatment, programs and services. The successful rehabilitation of the offender is enhanced by a purposeful prison routine and the planning of services that will contributes to the individual's re-integration. Practice in this context emphasises the principle of throughcare.

Throughcare, as a principle and mode of practice, is a relatively recent development in the criminal justice system. Although implicit in the literature pertaining to the prison and community continuum, the actual term first appeared in British penal philosophy and policies. McAllister, Bottomley & Liebling (1992:1-46) provide the fullest account of its development. It origins lie within the professional debates around aftercare, the responsibility and practice of providing some form of assistance to prisoners upon completion of a sentence.

Initially the provision of post-prison aftercare was the domain of voluntary aid societies. However, with the increasingly important role of the social work profession and the emergence of social casework within the criminal justice setting it became a contested idea. The role and scope of the probation service in the preparation of the prisoner for release from prison and subsequent support post-release was equally the subject of debate. It was recognised that being released from prison not only required material aid, but also needed attitudes and skills for negotiating environmental factors.

In recognising that the needs of the released offender broadened beyond that of material assistance, the funding of aftercare was questioned as were the roles and responsibility of agencies with a stake in the process including the prison, the probation service and the voluntary aid societies. Inevitably, this broader understanding of aftercare focused attention on the link between the prison and the community.

This emerging view led to the recognition of a responsibility to facilitate a bond between the prisoner and family members, to provide support and assistance to families of prisoners and to link the prisoner and established supports to community agencies upon release. The dynamic role of integrating the work of the prison with that of the community sector expanded the understanding of aftercare.

Aftercare, to be fully effective, must be integrated with the work of the penal institutions in which the offender serves his sentence, and must be conceived as a continuing process throughout his sentence and for as long as necessary after his release. (Home Office, 1963 as cited in McAllister, Bottomley & Liebling, 1992: 9)

The expansion was also accompanied by an increasing professionalisation of the responsibility to meet this challenge. The question of whether prison-based or community based caseworkers or workers who spanned both sectors were best placed to perform the function of providing an aftercare service continued to be contested. However, the function assumed tasks of individual case planning that commenced and continued throughout the sentencing period, linking the prisoner to outside supports and planning for resettlement and re-integration.

The prison sentence became a period in which factors to assist and support the prisoner upon release could be addressed. The inadequacy of the principle of aftercare was apparent with the understanding of the integral relationship of time in prison as preparation for resuming life in the community. In this context, penal policy dialogue began to conceive the idea of throughcare. A Midlands study in 1970 stated.

No apology is made for the use of this word 'though-care' which is known already to have a minority of adherents within the Service. The phrase 'after-care' has so many limitations implicit in its connotation — suggesting as it can do that only at a given point in time certain responsibilities fall due. Through-care suggests continuity of concern, an ideal which is the essence of the project (cited in McAllister, Bottomley & Liebling, 1992:17)

Inherent within this shift is the view that to be fully realised, aftercare had to be integrated with the work of the prison. Throughcare officially entered Home Office policy documents in 1982. (1992:40) Its rationale included four interrelated aspects:

- A custodial sentence did not occur in isolation but had to be viewed in the context of what preceded and what would follow it;
- Even while an offender was in custody, links with the outside community would need to be maintained and developed, possibly by several agencies;
- A custodial sentence can lead to changes in the person's attitude or circumstances which required the joint action of the prison and other services;
- The person's progress while in custody should be the concern of both the institution and the service that was concerned with his position in the outside community. (1992:41)

Throughcare is concerned to ameliorate the deleterious impact of imprisonment through the emphasis on a planned rehabilitative pathway developed with the active participation of the prisoner (including family and significant social supports), staff of the custodial facility and community supervision agencies. This emphasis recognised that the transition from prison to community and the cessation of offending is best served when the person is engaged through a working continuum between custody and supervision, a continuum that comes into effect when the person enters the corrective system.

Throughcare encompasses the development of interventions directed towards release. Expressed in a sentence plan, these interventions are established so that the prisoner's opportunities for successfully integrating back into society are maximised. Throughcare in practice, is concerned not only with the progress and development of the person through the custodial sentence, but is also focused on the linkages between prison and community.

These linkages presume in the first place, an ongoing liaison between the custodial facility and the probation service. This ensures that the needs of the offender, particularly those that contribute to offending, are identified. Programs and services are then developed and established to meet these needs. These needs are communicated across the prison and community sector so that appropriate underlying issues continue to be addressed. This is particularly critical during the early stage of transition from prison to community.

Linkages also extend to other agencies outside of the correctional service. Given the complexity of criminal offending, planning responses to individual offenders may involve the provision of a range of services to address personal, social and family issues. Throughcare promotes partnerships but demands the coordination of this response with roles and responsibilities clearly articulated. This suggests the requirement for inter-agency liaison and planning.

A developed system of throughcare therefore, underpins the ongoing membership of the prisoner as part of a community. Through a range of treatment services, educative and therapeutic programs and meaningful employment, it addresses factors that are likely to undermine the restoration of this membership.

Where prisoners become the responsibility of another jurisdiction, the development of a seamless service based on principles of throughcare remains elusive. For some offenders release from prison has its own motivations. For others, the lack of employment, accommodation, access to health services and lack of a community support network soon become barriers to re-integration and heighten the risk of recidivism.

# **Prisoners and Case Management**

Case management has emerged in the 1990's as one of the major processes used by correctional services to oversee and manage the progress of offenders through the system. It's introduction, particularly within the prison system, signals a shift away from a purely custodial/punishment orientation to more rehabilitative goals aimed at the successful reintegration of the offender back into the community.

Like throughcare, case management has its origins in social casework and the profession of social work. Formal documentation of the process commenced in the 1970's with the increasing shift from institutional care to community-based care. (Gursansky & Camilleri, 2001; Healy, 1999; Rubin, 1992) According to Gursansky and Camilleri, (2001) the trend, most noticeable in the delivery of services to people with a mental illness, was influenced by a number of factors, including:

- advances in medical technology that led to the significant reduction in and control over the severity of symptoms of previously incapacitating conditions;
- attention drawn by human rights activists to the incidence of abuse and deprivation that were inherent in institutional settings;
- identification by families of similar concerns about standards of care and in particular, the presumption of incapacity;
- collective arguments by consumers, families and advocates for alternative approaches to care that minimised isolation and marginalisation from the wider community, greater recognition of capacity, and services that supported independence.

Options for care in the community were seen as both preferable and achievable. Contributing to this shift in thinking were the increasing costs associated with the provision of social care through large state-managed institutions. New management styles with an emphasis on economic rationalisation forced the reevaluation of social services. Priorities focused on reducing government expenditure through increased efficiencies.

Case management is now the accepted process of service delivery in a number of practice settings, such as employment services, workplace rehabilitation services, disability services and programs, mental health services, child protection services, family services, drug and alcohol services, supported accommodation, school environments, aged care and acute health care.

The concept of case management is the subject of many definitions, depending on its policy and service contexts and modes of practice. It varies in usage according to its administrative function, clinical function or combination of both. Its introduction also varies from initiating system-wide change to making little impact on organisations at all. (Ozanne, 1996:153) Gursanky and Camilleri (2001) highlight some of the common emphases in definitions:

- assessment of individual need:
- coordination of services required to meet an individualised case plan;
- delivery of cost-effective services;
- mobilisation of resources from a range of services suggesting a collaborative arrangement involving multiple providers;
- formation of a relationship between case manager and 'client', "the use of the case manager as a model of healthy behaviour and as a potential object for identification"; and active intervention in the client's daily life "to structure a mutually tolerant environment." (Raif & Shore, cited by Gursanky and Camilleri, 2001)

Rubin (1992:5) provides a useful summary of a case management approach to service delivery. He states that it,

...attempts to ensure that clients with complex, multiple problems and disabilities receive all the services they need in a timely and appropriate fashion. It is a boundary-spanning approach in that, instead of providing a specific direct service, it utilises case managers who link the client to the maze of direct service providers. These case managers are expected to assume ultimate responsibility for seeing that the service delivery system is responsive to all the needs of each client....Although the emphasis in case management is on linkage, case mangers in theory do whatever it takes – whether brokerage, advocacy or resource development – to ensure that all client needs are met; they may even provide a missing service themselves.

Case management seeks to accomplish a number of objectives. Firstly, it seeks continuity of care at any given point or over time (eg moving from institution to the community). Secondly, it ensures responsivity of services to the full range of people's needs as they change over the course of service utilisation. Thirdly, it provides support to gain services and breakdown barriers to accessibility that is associated with eligibility criteria, regulations, policies and procedures. Finally, it oversees the provision of services to match client's identified needs without duplication of such services. (Rubin, 1992:7; see also Weil, 1985:35

Case management in correctional services grew with the increasing use of community sentencing orders and the numbers of prisoners returning to the community. Enos & Southern (1996:1) state that "the ultimate motivation for correctional case management may be considered deinstitutionalisation from prison to community settings." But its adoption also recognised that offenders often experience a complex range of biopsychosocial issues that contribute to their offending behaviour.

Case management is now a major approach across a number of correctional service jurisdictions. Definitions point to its central purpose and processes.

The NSW Department of Corrective Services defines it as:

...a collaborative, multi-disciplinary process which assesses, plans, implements, coordinates, monitors and evaluates options and services to meet an individual's needs. Case management is the process which links all the elements involved in an inmates management. It unifies procedures and personnel to balance departmental resources and an inmate's needs. (Inmate Case Management Policy, 1998)

The South Australian Department of Corrections defines it as:

The individualised and planned management of offenders based on assessed need, implementation of case plans and progress reviews (SA DCS Strategic Services document, 1998)

In Queensland Corrections it is defined as,

...a process to address the individual needs of a prisoner by translating the sentence plan into specific intervention and management strategies and assigning responsibilities for the implementation of these strategies (Queensland Corrective Services Commission, 1995)

ACT Corrective Services suggests that in a correctional environment it is,

...the systematic process by which identified needs and strengths of offenders are matched with selected services and resources in corrections. (Procedure CMP6, 5/1/99)

Correctional Services of Canada (Commissioner's Directive, No 700, 1/10/1990) emphasises that case management is the process,

To help offenders become lawabiding citizens by recognizing them as individuals and actively encouraging them to deal with or solve their personal and social problems and to make the fullest use of their positive potential.

Case management therefore,

shall be based on an ever-increasing knowledge of the offender which can best be achieved through regular and meaningful interaction

in which.

The offender shall be an active and integral participant in the management of the case.

The case management process also incorporates people within the institution and the community who have meaningful interactions with the offender. Finally it involves a team approach that moves across the institution and the community.

In its report, Case Management in New South Wales Correctional Centres, the Independent Commission Against Corruption (ICAC) states,

The introduction of case management has probably had more of an impact on the role of the officer and their relationship with inmates than any other policy decision. Instead of having little interaction with inmates, as was previously the case, under case management, an officer is now expected to communicate regularly with a small number of inmates for whom he or she has responsibility as a case officer. (1999:14)

The shift, as the report highlights, has not been without problems. These stem from the new culture that encourages communication, responsibility and a focus on rehabilitation coming up against aspects of the 'old culture' and its reliance on order, routine and discipline.

The most significant potential of case management in the criminal justice sector is its capacity to strengthen links between the custodial and community setting in order to advance resettlement and reduce recidivism. The greatest challenge lies in providing the continuity of service "to bridge the critical span between release from custody and independent living in the community." (Healy, 1999:5-6) This is apparent for example, when considering the necessity for follow-up services for the continuing treatment and support for issues such as those related to mental health and substance abuse.

The above highlights missed opportunities created through the current separation of the prison from the community. It also highlights how the cultural issues related to a system with a long and often troubled history compromise the rehabilitative pathway of ACT prisoners. Whilst case management exists, its application is haphazard and dependent on a combination of resource availability and the attitudes of management, staff and prisoners. Where the case management process may exist for ACT prisoners, its use as a process to guide and direct progress towards release and resettlement is non-existent.

Being the only jurisdiction in Australia without a pre-existing prison system and resultant systemic culture, significant opportunities are created. With thoughtful prison design, program development and evaluation, community consultation and accredited staff training, the ACT is in a position to address the shortcomings and failures that exist in prison systems of longer standing.

From a case management perspective, the discontinuity that is perpetuated by the current system would cease. Case management processes within a correctional facility can be developed to fit with existing community case management practices. Or equally, revised practices, informed by what is known about the experience of transition from prison to community, can be put in place to maximise opportunities for successful transition.

# The Prisoner and the Family

It is important from the outset to establish that the prison population is heterogeneous. The ties that a prisoner may have can vary according to gender, marital status, race, ethnicity, religion, history and attitudes to offending, length of sentence, and so on. Furthermore, whilst family and community ties may be significant for some prisoners, they can also be detrimental for others. In cases it may be necessary to discourage ties or prevent ties for reasons of family and safety.

In maintaining a system that places prisoners in geographically isolated facilities under the jurisdiction of another state, the ACT misses opportunities to provide and promote support for the maintenance of family relationships. Key (cited in Bower & Alessandrini, 2000:9) explains that the family is the basis of values and the most important social experiences, yet:

...most correctional facilities still maintain an attitude that destroys and tears apart the inmate's family structure. By locating prisons in hard to reach isolated ares; limiting contact visits with family members and giving little concern to inmate family needs, the one structure that could possibly restore that person to our society is destroyed

The study of Biles and Cuddihy (1984) represents the only attempt to ascertain the impact of the jurisdictional and geographical separation on prisoners and their families.

Not surprisingly, prisoners reported that the cost and distance of travel made it difficult for family members to visit. (Biles & Cuddihy, 1984:14) Equally, the families of prisoners reported that time, costs and distance of travel prevented them from maintaining more frequent or regular contact by visiting. (Ibid, p. 24) The authors point out that whilst their study found contact through correspondence and telephone to be reasonable, the level of dissatisfaction with visiting is suggestive of "the greater personal significance for both prisoners and family members" that is attached to face-to-face visiting (Ibid, p. 29)

When surveyed about their views on the possible establishment of a prison in the ACT both prisoners (Ibid. p. 17) and family members (Ibid, p. 25) were supportive mostly on the grounds that it would facilitate visiting and the maintenance of contact. Costs, including telephone costs, would be cheaper, travelling times would be reduced and a wider range of personal ties would be easier to maintain.

In general, the research concerning the promotion and maintenance of social and community ties during periods of incarceration is neither abundant nor comprehensive. It would appear from the literature that data about the families of arrested adults is not collected and it is noted that correctional institutions even fail to request such information. (Seymour, 1998; VACRO, 2000) This suggests

that penal policy has largely failed to consider what impact the absence of family and community ties has on prisoners.

Two particularly noticeable gaps in the research are firstly, the role and significance of family and community ties to young adult males who make up the bulk of prison populations and secondly, the impact of incarceration on men who are fathers and their children. (Jeffries, Menghraj & Hairston, 2001; King, 1993)

However, it is an area of research that is attracting increasing interest. This is driven largely by the realisation that the promotion of family and social ties can have a positive impact on risk factors that can lead to further offending. It also offers some possibility of interrupting intergenerational cycles of offending. (Bower & Alessandri, 2000; Carpentier, 1995; Jeffries, Menghraj & Hairston, 2001; National Crime Prevention, 1999) The development of policies, services and programs to strengthen and enhance such ties is also increasing.

The NSW Standing Committee on Law & Justice states, (2000:146)

Most prisoners have families and many have children. Any serious attempt at reducing recidivism must consider the importance of preserving links between parents and children. This is not only to reduce the chances of the prisoner reoffending: it is to prevent the cycle of offending being repeated in the life of the child.

The immediate and long-term effects of incarceration on families can be devastating. In general terms, the family outside shares the punishment of the prisoner. (Gordon, 1999; Larman & Aungles, 1991) The family must reshape its roles, rules, routines, communication patterns, relationships, exchanges with the environment and even worldview. (Gordon; Howard, 2000; Young & Smith, 2000) Incarceration creates economic, emotional and interpersonal problems such that "the entire family system suffers when a family member is incarcerated." (King, 1993:145)

At a time when family support is most crucial, there is often excessive stress on family relationships. The family can experience further breakdown if it is not able to make the adjustment to these changed circumstances. (Young & Smith, 2000)

Holt & Miller (1972), who have carried out one of the few comprehensive studies of the importance of families ties in a general prison population, suggest that:

The central finding of this research is the discovery of a strong and consistently positive relationship between parole success and the maintenance of strong family ties while in prison. The reliability of this finding is substantiated by the results of other research undertakings...The positive relationship between the strength of social ties and success on parole has held up for 45 years of releases across very diverse offender populations and in different localities. It is doubtful

if there is any other research finding in the field of corrections which can approximate this record.

Compared to 50% of the "no contact" inmates who completed their first year on parole without being re-arrested, 70% of those with three visitors throughout their period of incarceration completed the same period of time "arrest-free". Those who were considered "loners" were six times more likely to return to prison during the first year.

As Klein, Geannina & Bahr (1999) assert, family ties don't necessarily guarantee post-release success, but the absence of these increases the likelihood of failure. The research noted that family relationships were consistently highlighted by the prisoners as a factor in their success or failure to adjust after release.

From their research, Holt and Miller (1972) reported that social ties were more significant to the reduction of recidivism than the amount of funds provided upon release, the type of residence to go to or employment prospects. These needs could be met, supplemented or realised if positive social ties were in place. Ditchfield (1994) also cites the research of Ohlin, and that of Glaser, that both conclude the correlation between the maintenance of "active family interest" while in prison and successful parole. Haines concludes:

Possibly one of the most significant findings to come out of the research on after-care is the importance of a released prisoner's family and wider social networks for his subsequent resettlement in the community. It is often through these pre-existing links with the wider community that released prisoners: find accommodation...find work, obtain short-term financial aid and (less tangibly, but of crucial importance) receive the kind of social support which enables them to re-establish themselves on release. (cited by Ditchfield, 1994)

So, "along with substance abuse, education and job skills, having a family to return to is one of the most important factors in a prisoner's successful re-entry" into community life. (Howard, 2000) The quality of the social environment to which the offender returns therefore, can either enhance or undermine any positive gains made through completed programs within the correctional system. (Ditchfield, 1994)

Whilst family support for prisoners remains a complex issue, Carr (1995) contends that the family is the primary delivery point for personal growth and change. He states that, "even where family relationships are unhealthy, it is better to see the relationships as dynamic factors to be worked with than as chains to be broken."

According to research cited by Landreth & Lobaugh (1998) healthy family functioning once the prisoner is released is most immediately promoted by the maintenance of strong family ties during imprisonment. It has therefore been

asserted that the "the inmate's family be viewed as the prime treatment agent" who are potentially "a major correctional technique". (Holt & Miller, 1972)

This suggests that value be given to policies, procedures and programs that assist prisoners to maintain and strengthen family and community ties during the incarceration period. Paolucci, Violato & Schofield (1998) conclude from existing research that action is justified to strengthen family interaction. Opportunities that promote positive offender/family interactions may contribute to repairing, maintaining and strengthening family relationships. Initiatives in this direction can:

- reduce disciplinary problems within the system;
- represent a protective factor against the norms and behaviours of more hardened sectors of the prison population. Gordon (1999) suggests that it can reduce the influence of negative sub-cultural values and norms, promote improved social control measures and ultimately lessen community risk;
- capitalise on the high motivation that exists at this time to preserve marital and family relationships;
- have the potential to be rehabilitative;
- increase probability that families will reunite following release;
- lead to positive post-release success.
   (Klein, Geannina & Bahr 1999; Light, 1993; Stanley & Byrne, 2000)

The prisoner's movement through the criminal justice system has the potential to be supported and enhanced where families are part of the decision-making process and have the opportunity to support the prisoner effectively. Johnson, Selber & Lauderdale, (1998) state that work through social networks with families and children as well as communities of prisoners is emerging as a site for possible rehabilitative alternatives. They argue,

Intervention through natural support systems for offenders is supportable in terms of practical and humanitarian reasons, as well as in terms of the potential for developing positive behaviours in the family system. These networks can develop a comprehensive social fabric that supports families with multiple needs, especially those with children. Using such supports can lower rates of recidivism, prevent intergenerational patterns of incarceration and, ultimately, lower costs to taxpayers.

It is important to underline that the issues of family support are complex. For example, Holt & Miller (1972) found that the "matriarchal nature of the African-American family" was borne out in the fact that prisoners had relatively little contact with fathers. By contrast, the close ties within the Mexican-American community resulted in not only a higher percentage of parents, but siblings visiting as well. Prisoners who were married were more likely to maintain other relationships however, they did note the tendency for marital relationships to deteriorate over time.

This will be the subject of further reflection, but Klein, Geannina & Bahr, (1999) note that female prisoners tend to be cut off from or sever ties with family of origin due to the association with deprivation and abuse. This contrasted to the more resilient bonds between the male prisoner and family, including mothers, grandmothers and partners.

The Director of the NSW Bureau of Crime Statistics and Research in a submission to the NSW Standing Committee on Social Issues (1997:96) states,

Although the literature of controlling and reducing recidivism is dismal, the little literature that there is suggests that maintaining community ties is absolutely essential – maintaining the bond between prisoner and his (sic) family, that is their parent and/or children. Efforts to strengthen or retain those bonds are probably central to any attempt to try to reduce recidivism.

At the very least it is worthwhile remembering that the vast majority of offenders who serve custodial sentences return to the community. The effective protection and promotion of community safety "requires that every effort be made to insure that inmates are able to make a transition to the free world."

If inmates are fortunate enough to have a family to return to, the family can be a stabilising force to assist them in finding shelter, to help them find a job, and to offer transitional support. Intact families can provide services for both the inmate and the released offender that can not be replicated by any government agency. (Florida House of Representatives Justice Council, 2000)

It is clearly in the interests of the prisoner, the family, the prison and society that relationships can survive the prison sentence. (Light, 1993) In the construction and administration of a custodial facility, the ACT has the opportunity to overcome the geographical barrier that currently undermines and weakens family and community ties.

#### Prisoners and their children

The lack of research in this area has already been noted. Often there is no system charged with collecting data about this population It is unclear how many prisoners have children, where the children are, how they are cared for or the extent to which the population is affected. (Gabel, 1995; Larman, 1991; Larman, 2000; Seymour, 1998; Young & Smith, 2000) It is claimed that this neglect is the result of a criminal justice system that centres entirely on 'justice' and 'individual responsibility' (Larman & Aungles, 1991)

## Hounslow et. al. assert that:

The dearth of information is not accidental. It is both convenient and necessary, because those who uphold the prevailing legal and penal ideology simply cannot afford to consider what happens to prisoners' children. Any recognition of their plight strikes at the very notions of "justice", "innocence" and "guilt" upon which this ideology is founded. (cited in NSW Standing Committee on Social Issues, 1997:7)

Children are the "unseen victims" of offending and represent one of the "most atrisk" populations in society. (Larman, 2000; Reed & Reed, 1997; VACRO, 2000; Young & Smith, 2000) As Hounslow et. al. reflect,

Child punishment is often the other side of the coin to parental imprisonment. This is one of those shadowy corners of the criminal justice system seldom spotlighted. In our society, prisoners are marginalised; their spouses and adult friends isolated and hidden; while their children – to all intents and purposes – are invisible. (cited in NSW Standing Committee on Social Issues, 1997:7)

Larman & Aungles (1991) suggest that major structural factors exacerbate "the hidden punishment" for children including:

- the geographical isolation and access issues often associated with correctional facilities (Block & Potthast, 1998; Katz, 1998; Reed & Reed, 1997; Seymour, 1998; VACRO, 2000)
- the lack of provisions for parents and their children to have 'normal' family conversations in correctional facilities (VACRO, 2000)
- the perception of children as security risks and nuisances rather than as people with rights of their own and in need of special care in what is essentially the traumatic environment of correctional facilities
- the procedures and rules within correctional facilities that create uncertainties about the contact between prisoners and their children (VACRO, 2000)
- the increased economic insecurity of the family, particularly added to when family has to take on major costs of travelling, maintaining contact, moving to be closer to prison, provide goods to the prisoner (Block & Potthast, 1998; Reed & Reed, 1997;

 the socioeconomic status and racial origin which are factors that differentially expose children to risk of having a parent imprisoned, or having a parent imprisoned for longer periods in more segregated and punitive circumstances.

Attachment and object relations theory predict that separation by imprisonment would likely lead to psychological sequelae, including family friction and negative psychological and social outcomes. (Johnson & Waldfogel, 2002; Suarez, et. al. 2001) It is important to note that not all separations will have the same impact. Johnson & Waldfogel, (2002) for example, assert that the impact on children will according to whether it is the mother or father that is incarcerated, whether the child remains with a natural parent or is placed in a substitute care arrangement, and so on.

This impact is further subject to the presence or absence of other risk factors in the child's environment including socioeconomic status, accommodation, mental health issues, substance abuse and experience of or exposure to abuse. Seymour (1998) also offers a number of variables that may determine the extent to which children will be affected. These include the age at which the parent-child separation occurred, the length of separation, the child's continuity or familiarity of care arrangements, the strength of the parent-child relationship, the availability of family or community support, the gender of imprisoned parent and the location and quality of prison.

As Johnson and Waldfogel (2002:8) suggest, "not all children will respond similarly in the face of parental and environmental risk" but the risk factors "that were present in children's lives before the parent went to prison may continue to influence how well they function during a parent's incarceration." This further points to the dynamic nature of the relationship between individual development and the social and environmental context. An appreciation of resilience also implies different outcomes in the face of adversity.

It can be a frightening and confusing time for children when a parent is imprisoned. (Larman, 2000) Children find it difficult to make sense of and can experience negative consequences. (Seymour, 1998) Likened to the impact of divorce, abandonment or death of a parent, the "separation trauma" of imprisonment foreshadows the risks of experiencing similar reactions that any enforced and traumatic separation from a parent creates. (Breen, 1995; Gabel, 1995; Larman & Aungles, 1991; King, 1993; NIJ, 1995; Young & Smith, 2000) These reactions can then be exacerbated by social stigma. (Block & Potthast, 1998; Gabel, 1995; Young & Smith, 2000)

In general terms, the literature has highlighted with considerable consistency, the profound effect of parental imprisonment on children. These include:

 a broad range of emotions that include confusion, fear, anxiety, anger, resentment, grief, sadness, loneliness, shame and guilt; (Bilchik, Seymour & Kreisher, 2001; Block & Potthast, 1998; Greene, et. al. 2000; Katz, 1998;

- Larman, 1990; Larman & Aungles, 1991; NIJ, 1995; Reed & Reed, 1997; Seymour, 1998; VACRO, 2000)
- teased at school; (Young & Smith, 2000)
- regressive behaviour; (Larman, 1990; VACRO, 2000)
- defiance of authority; (Larman, 1990;
- enuresis: (Larman, 1990; Larman & Aungles, 1991; VACRO, 2000)
- the experience of symptoms consistent with PTSD, including withdrawal, hyper-alertness, sleep-disturbances, guilt, impaired memory and concentration; (Breen, 1995; Larman, 1990; Larman & Aungles, 1991; NIJ, 1995; Reed & Reed, 1997; Young & Smith, 2000)
- impacts on the developmental stages of children. (VACRO, 2000) Disruption to the attachment bond between mother and child has been found to be particularly deleterious between the ages of 6 months and 4 years. (Stanley & Byrne, 2000) Teenagers were seen to be especially vulnerable with one study noting a significant number of teenage girls (13-14 years) who became pregnant within a few months of their mother's incarceration. (NIJ, 1995; Young & Smith, 2000) Antisocial behaviour has been observed in boys aged between 6 and 13 whose fathers had been imprisoned, with 11 to 13 year olds being the most vulnerable group; (Breen, 1995; Gabel, 1995)
- experiences of severe depression, feelings of abandonment, shame, suicidal feelings, worry about the incarcerated parent; (Bilchik, Seymour & Kreisher, 2001; Reed & Reed, 1997; VACRO, 2000; Young & Smith, 2000)
- low self-esteem, emotional withdrawal from friends and family; (Bilchik, Seymour & Kreisher, 2001; Breen, 1995; Gabel, 1995; Katz, 1998; Larman & Aungles, 1991; Seymour, 1998; Stanley & Byrne, 2000; VACRO, 2000)
- feelings may contribute to problems with eating, sleeping, physical health and academic performance and other school-related difficulties; (Bilchik, Seymour & Kreisher, 2001; Block & Potthast, 1998; Breen, 1995; Greene, et. al. 2000; Larman & Aungles, 1991; NIJ, 1995; Seymour, 1998; Stanley & Byrne, 2000; VACRO, 2000; Young & Smith, 2000)
- behavioural issues; (Breen, 1995; Gabel, 1995) including, aggressive behaviour at home; (Greene, et. al. 2000; Katz, 1998; Larman, 1990; Larman & Aungles, 1991; Reed & Reed, 1997; Stanley & Byrne, 2000)
- drug and alcohol issues; (Bilchik, Seymour & Kreisher, 2001; Katz, 1998; Reed & Reed, 1997;
- placement with new caregivers or in substitute care that can also involve separation from siblings. (Block & Potthast, 1998; Larman, 1990; Reed & Reed, 1997; Seymour, 1998) The VACRO study (2000) also highlighted the potential for multiple placements, forced relocations, care outside of the child's normal community and the loss of the family home.

Many children of prisoners may experience the very criminogenic risk factors that contributed to the imprisonment of their parent. There is increasing evidence for a strong correlation between parental incarceration and future criminal behaviour. (Bilchik, Seymour & Kreisher, 2001; Gabel, 1995; Greene, et. al., 2000; Katz, 1998; National Centre on Fathers and Families, 1998; NIJ, 1995; Reed & Reed, 1997; VACRO, 2000; Young & Smith, 2000) The VACRO report (2000) suggests that, based on the family history of their parents, the children of prisoners are more likely than children in the general community to be

imprisoned themselves or develop negative perceptions of the justice system. Bilchik, Seymour & Kreisher, (2001) refer to studies which estimate that children of imprisoned parents are six times more likely than their peers to engage in criminal activities and experience time in custody.

It is important to note that some children may be relieved of physical and emotional stress through parental imprisonment, but generally allowing children to maintain contact is an important aspect of "the conditions for growth" for children. (Larman & Aungles, 1991) Family ties can give some hope for breaking the apparent connection between parent and youth criminality. In order to mitigate against the impact of parent-child separation that is created by imprisonment, a number of steps and responses can be developed.

Of most importance and relevance in the context of this research is eliminating the geographical barrier to visitation. Reed & Reed (1997) cite a study that establishes distance as one of the major factors that prevent children from having contact with an imprisoned parent. Further studies report similar conclusions. (Seymour, 1998; VACRO, 2000) Whilst prisons by their nature isolate people from their families, locating a prison in the ACT would represent a significant step in the reduction of this isolation.

Face-to-face contact, in addition to contact through letters and phone calls contribute to the emotional health and well-being of children and assists them to feel reassured through maintaining a bond, particularly one that is inclusive of physical contact. (Larman, 2000)

Katz (1998) believes that regular visiting, as soon as possible after the commencement of a prison term allows children to discuss their emotional reactions to the separation. Parents are able to work out feelings of separation and loss and be better able to help children with these issues with both parents and children able to see each other realistically.

This view is also supported by Johnston who believes that early visitation allays some of the more extreme fears that children may hold about prison conditions. It dispels fantasies that they may develop about their parents in their prolonged absence. It reduces feelings of abandonment among as well as the anger and guilt that tend to accompany such feelings. Furthermore, it counteracts, by seeing other children and families at prison visiting centres in similar circumstances, some of the alienation that children experience. Finally, it quells the separation anxiety that children can experience.

As Breen (1995) states, visits "are a positive, supportive activity that help the incarcerated parent, the family, the institution and, ultimately society as a whole." It has the potential to motivate parents in their "recovery and rehabilitation efforts" and increases the likelihood that families can be successfully reunited upon release. (Bilchik, Seymour & Kreisher, 2001)

Light (1993) advances the argument for families to be considered within a victim-oriented system of criminal justice. Rather than being seen solely in the

interests of the offender, the needs of families, and in particular children, should be considered in their own right. (see also Loy, 2000) This would open the way for policies and practices that protect the relationships between children and their parents. Furthermore, it would encourage the development of programs that strengthen parenting skills and contribute to an enhanced quality of life for children.

The location of a custodial facility for sentenced prisoners in the ACT would benefit parents and their children by eliminating the geographical barrier that currently inhibits contact. ACT Corrective Services have the opportunity to further underline the importance of this bond between children and their parents by having in place policies, procedures and facilities to promote this contact. Furthermore, this opportunity can include initiatives that could contribute to the strengthening and/or reparation of bonds between children and parents that result from the criminal lifestyle.

# **Mothers in prison**

The incarceration of women and the impact on children, families, carers and the prisoner is a growing area of interest within criminal justice and social welfare literature. (Stanley & Byrne, 2000) The increasing population of women prisoners has in part prompted this. Australian statistics alone report that the number of women incarcerated in Australian prisons has almost doubled since 1991. (Cameron, 2001)

Women's pathway to crime is different to that of men in distinct ways. Women who become offenders often experience a range of gender unique environmental, situational, political, cultural and social factors, as well as physiological and psychological factors. (Austin et. al. 1992:3) Although both may share similar factors related to family, socio-economic background, education, employment, drug and alcohol use and health, it is the particular confluence of factors that ultimately creates a different context to the criminal behaviour of women.

## These factors include:

- childhood physical and sexual abuse that often predicates an entry into abusive relationships that continues to feature throughout their lives; (Byrne & Howells, 2000; Lewis, 2000; U.S. Bureau of Justice Statistics, 1999)
- the experience of significant levels of trauma and related psychological issues; (Byrne & Howells, 2000:2-3, Girshick 97/98:4, Loucks & Zamble, 1994:3-6, Suter & Byrne, 2000:8-9)
- the experience of high levels of mental health symptomatology including anxiety and depression; (Byrne & Howells, 2000; Keaveny & Zauszniewski, 1999)
- high rates of substance abuse and addiction; (U.S. Bureau of Justice Statistics, 1999 Byrne & Howells, 2000; Girshick, 1997; Lewis, 2000; U.S. Bureau of Justice Statistics, 1999)
- being young, single heads of households and the primary caregivers for dependent children (Lewis, 2000; Suter & Byrne, 2000; U.S. Bureau of Justice Statistics, 1999)
- the experience of educational and employment disadvantage and consequent financial disadvantage and poverty;
- ostracism for seeming to deviate from prescribed gender role expectations (Girshick, 1997; Dodge and Pogrebin, 2001)

Mothers, as a population within prisons, are not a homogenous group. Living arrangements and parenting can range from neglectful or absent to warm and nurturing. (Block & Potthast, 1998; Young & Smith, 2000) However, imprisonment itself is not the evidence of a mother's lack of desire or ability to perform her parental duties. (Loy, 2000)

Dodge and Pogrebin (2001) report that for many women the punishment of a prison sentence is compounded by separation from their children. As already

inferred, women are often the sole means of family support prior to imprisonment. Separation represents "the harshest single aspect of being imprisoned" and children are the primary concern of mothers during their time in custody.

Mothers are concerned that their relationship will have disintegrated by completion of incarceration period or that they may even lose custody of their children. (Block & Potthast, 1998; Dodge & Pogrebin, 2001) Given the potential impact that incarceration of a parent has on children "it appears entirely valid that an incarcerated mother would experience considerable difficulty and distress concerning her child's welfare and changes to their relationship." (Stanley & Byrne, 2000) The degree to which the loss is experienced has implications for both the mother's mental health and the psychological well being and emotional development of the child.

Mothers in prison experience anger, anxiety, sadness, depression, shame, guilt, decreased self-esteem and a sense of loss when separated from their children. They worry about their children's health, behaviour and emotional state and schooling issues. They are concerned about how their families are coping financially. They feel the lack of day-to-day involvement in their children's lives, fear that their children would not know them and are concerned about reestablishing relationships, especially as their children may grow closer to others. They worry about the negative messages their children may be getting from others. Finally, they are concerned with the potential power and influence that caregivers might have on their children. (Dodge & Pogrebin, 2001; Kingi, 2000; Stanley & Byrne, 2000; Young & Smith, 2000)

The literature reports that mothers experience obstacles in maintaining relationships with their children. These included the isolated locations of facilities, security issues, inappropriate visiting hours, unwillingness of caregivers to support visits(Bloom & Covington, 1998; Dodge & Pogrebin, 2001; Katz, 1998; Reed & Reed, 1997)

For mothers of dependent children, the duration of a prison sentence can also represent insight into circumstances and conditions that have promoted a period of turmoil where attachments have been under strain. In some cases where prior attachment is missing, prison provides an opportunity for mothers to establish a relationship. (Block & Potthast, 1998)

Imprisonment therefore, has the potential to be the time "when in a controlled, monitored environment, mothers can be offered education, understanding, and skills to better equip them for the important responsibilities of motherhood." (Benjamin, 1991) Block & Potthast (1998) report many women as saying that "prison saved them, that their relationships with their children were jeopardised long before they came to prison, and that they have been able to understand themselves and improve their relationships with their children while in prison."

As most mothers intend to reunite with their children upon release "the importance of strengthening and improving family interactions during

incarceration" is underscored (Young & Smith, 2000) This is particularly important where relationships have not been so positive.

Lilburn (2000) states that the "entry of women who have dependent children into the criminal justice system should be taken as an indicator of a range of potential crises – at the personal, the familial and the systemic level." It is an indicator to be considered in planning appropriate services and responses to this group, especially as it may involve a range of agencies with differing and conflicting philosophies. Collaborative strategies, for example, between the criminal justice system and the welfare system in working with mothers in prison and their children can serve the interests of both systems. Furthermore, it has the potential to reduce stress and protect familial bonds.

A number of responses and practices can contribute towards the alleviation of issues that arise with women who are parents and are involved in the criminal justice system. Additionally these would strengthen family ties and prepare women to resume their parental roles upon release. (Young & Smith, 2000) These, according to Reed & Reed, (1997) include:

- developing correctional practices that allow increased communication or contact between incarcerated mothers and their children through extended visitation programs in child-oriented environments so that visits are a more positive experience for children;
- specialised services such as mother-infant and mother-child programs that involve partnerships between correctional facilities and community agencies.

The current plight of ACT mothers who are imprisoned in NSW highlights the marginalisation they experience in the criminal justice system. Although a small population, compared to men, they serve their sentences furthest from their community. Given the emphasis on approaches that stress relational connection to family, community and local resources and services, the disadvantaged circumstances they often come from are compounded by a custodial sentence.

The construction of a prison in the ACT represents an opportunity to reverse this disadvantage. It would support ACT Corrective Services in developing more equitable policies, programs and services for mothers in prison. Consistent with the principles of a gender-responsive approach, these would encourage flexible visitation practices, support mothers in strengthening bonds with children and emphasise partnerships with a range of services to establish supportive for mothers returning to their families and communities.

# Fathers in prison

Hairston (1998) reports though that the number of fathers in prison is large, with the majority being fathers of dependent children. However, the position and role they occupy within families and the families themselves, do not correspond to the more typically espoused models of fatherhood and family life. The research that has been completed in relation to this population in prisons is hindered by small sample sizes, inadequate comparison groups and does not usually include longitudinal studies. (Howard, 2000)

The fact that little is known about fathers and the impact of imprisonment on this role suggests that they are "forgotten". (Hairston, 1998; Howard, 2000; Landreth & Lobaugh, 1998) This again is confirmed by a widespread failure to collect the data that indicates fatherhood. (Hairston, 1998; Landreth & Lobaugh, 1998) A general assumption is that imprisoned men do not care and will not assume responsibility for their families and children. Imprisonment is presumed to confirm a view that fathers who are caught up in the criminal justice system are poor fathers. (Benjamin, 1991; Hairston, 1998, Mendez, 2000)

It is however, important to ascertain whether or not imprisoned fathers can become responsible for their children while they are incarcerated. Despite imprisonment, the overwhelming majority of men continues to feel an important part of the family and wanted to improve their relationships with their children. (Mendez, 2000) Furthermore, social attitudes are increasingly reflecting the need to promote and support aspirations for "responsible fatherhood" as a protective factor within families and communities. (Jeffries, Menghraj, & Hairston, 2001; Mendez, 2000)

There are several reasons why it is important to include imprisoned fathers in efforts to improve and enhance the well being of children and families. These include the numbers of children affected by imprisonment, the knowledge and understanding of the role of fathers in child development, the negative impact of parental separation and absence on children and the importance of regular parent-child contact in sustaining meaningful relationships during periods of separation. (Hairston, 1998)

Some studies have examined the experiences of the imprisoned father. Lanier (1995) reports that imprisoned fathers face legal issues that include visitation and access rights. They are often not consulted by welfare services who may be involved in the lives of their children. The presumption is made that contact with an incarcerated parent is not in the best interests of the child. (Hairston, 1988; Lanier, 1995) Fathers are also at risk of having no communication with their children because of a decision by the children's caregiver.

The attempts by fathers in prison to maintain meaningful relationships with their children are frustrated by the lack of conducive and appropriate visiting conditions for children. Lanier (1995) notes the uncomfortable nature of visiting

rooms, the lack of activities to engage children and the oppressive procedures and practices that are maintained for security reasons.

Many fathers experience high levels of depression and anxiety. Being separated from their children brings about feelings of loss, powerlessness and sadness. Other emotional reactions include loneliness, isolation, guilt, anger and despair. (Gordon, 1999; Hairston, 1998; Howard, 2000; Lanier, 1995;) Guilt is often experienced around the inability to provide for family needs, the disruption that their imprisonment is causing and the potential contribution it is making to problems experienced by children at home, in the community or at school. (Howard, 2000; King, 1993; Lanier, 1995) With a decreased role in their children's lives, they can carry a sense of failure about their parenting. Gordon (1999) suggests that these responses and reactions can lead to more serious psychological issues such as paranoia and suicidality.

Imprisoned fathers are concerned about being forgotten by their children or being replaced by someone else. (Lanier, 1995; also cited in New South Wales Parliament, Legislative Council Standing Committee on Social Issues, 1997) They worry that their children will cease to have contact with them and create difficulties in re-establishing connections upon release. They fear that their children will think that their father has abandoned them and consequently lose respect for them. Given the strain on relationships as partners assume greater responsibility and additional roles, an added concern is that the relationship with their parental partner could change and result in isolation from their children. (Gordon, 1999; Lanier, 1995)

King (1993) argues that this strain can precipitate the creation of emotional barriers by prisoners towards family members that contribute to already existing psychological and emotional tension. Men are dependent on families to meet many needs whilst in custody, including those for money, clothing and personal items. It can be difficult to meet these needs within financially tight circumstances but the failure to meet them can exacerbate feelings of abandonment. A coping strategy in the face of these strong emotions is to create further barriers as a means "to reduce the pain and anguish" (King, 1993:149) Marriages are known to breakdown as a result of imprisonment. (Holt & Miller, 1972)

The maintenance of parent-child bonds during imprisonment in the case of fathers is dependent not only on individual preferences but also on corrections policy. (Hairston, 1998) Such policies often fail to directly address or reflect the special needs of paternal contact with children and the need for frequent contact in, at times, a complex family network. This is despite policy guidelines intended to strengthen family ties and enhance relationships between imprisoned fathers and their children.

Where fathers may have neglected their parenting roles and responsibilities in the past, the duration of a prison sentence represents an opportunity to work towards becoming responsible fathers in the future through participation in parenting skills programs. Gordon (1999) states that the disciplinary records of participants in family reunion programs improved compared to non-participants.

Such programs support and promote family visits and assist to develop and maintain ties. Other gains that flow from this participation, including employment and the experience of a positive parole, contribute to a lower likelihood of recidivism. (Gordon, 1999)

Healy (as cited by Howard, 2000) points out that.

Although the prison environment is often destructive to family relationships, it can also provide a window of opportunity for change. National and international research indicates parents in prison are often motivated to use this period to reflect on their relationships with their children to improve their capacity to parent.

Wellesley (1999) offers one example of an initiative in a Tasmanian facility to support fathers in establishing, developing and enhancing contact with their children. It emerged from the positive response to a parenting program that was offered in the facility. The initiative involved cross agency support with a family and community service department. Many of the fathers involved had lost contact with children. The program, as well as supporting contact with children, involved education and strengths-based skill development in effective relationships, fathering from prison, expectations of fathering, ages and stages of development and play, difficult parenting issues and issues around establishing relationships post-release.

Additional issues that were addressed included: (Wellesley, 1999:11)

- tracing children for recontact,
- access visits for children where mothers did not want contact with fathers, support and protection for mothers where violence has been an issue in the family,
- prisoner support and counselling in family issues
- negotiating corrective services system for family members
- linking and facilitating communication between family members and prison staff
- family mediation regarding access visits
- communication and clarification between partners
- support with family reintegration and home visits to assist with post-release

Wellesley reports a number of positive outcomes from the initiative including: (1999:12):

- increased or resumed contact with children
- improved interactions with children and partners (Carpentier, 1995)
- more readiness to be involved in family mediation
- improved knowledge of child development and age appropriate behaviour
- increased desire to be involved in decisions that affect their children
- greater awareness of impact of violence or drug/alcohol use of adults on children and more motivated to address these issues (Carpentier, 1995)

- greater awareness of difficulties of family members with subsequent increased involvement in courses/work to earn income
- peer support in relation to parenting issues
- referrals to community agencies and improved communication with such agencies
- upgrading of prison facilities to meet needs of families, especially children.

A significant part of the program's success has been the partnerships that were developed with community groups and agencies and subsequent valuable networks for prisoners, and their families. This again highlights the opportunity for ACT Corrective Services, other government agencies and community services within the current context.

The construction of a facility in the ACT would allow ACT Government to address a number of needs that confront fathers in prison. Policies, procedures and facilities could be put in place to complement the improved access that would follow from the closer geographical location. Programs could be developed to support and strengthen the relationships between fathers and their children. Finally social and community services involved in the welfare of children and families could be developed to ensure continuity of support for fathers as they reintegrate with families and children in particular.

# The Prisoner and Drug and Alcohol Treatment

Illicit drug use is one of the most important factors impacting upon offending behaviour and remains the single largest factor impacting on the lives of offenders. Whilst knowledge about the relationship between illicit drug use and criminal behaviour remains a significant gap, (Makkai, 1998:1) there does appear to be a strong correlation between drug use, criminal activity and reoffending. Compared to non-using offenders, crime rates are higher amongst offenders who are drug dependent and as the extent of drug use increases, the frequency and severity of crime escalates. (Burrows, et. al., 2001; Forensic & Applied Psychology Group, 1999:63; Harrison, 2001)

Criminal justice policy has sought to respond to this issue in a number of ways. These include leniency towards minor drug offences, diversion to the health system through the use of community based court orders and finally, the use of more punitive measures such as imprisonment in cases of supply and trafficking, to both punish and act as deterrence. (Makkai, 1998:1) The criminal justice response however, has largely failed to impact on illicit drug use and has had at best, modest impact on the operation of illicit drug markets and the availability of drugs. (Spohn, et al. 2001)

Offenders with substance abuse issues are over-represented in the correctional population. Lemieux (1998) cites research that draws a number of conclusions. One third of prisoners were under the influence of drugs when they committed their offences. Most female arrestees test positive for one or more drugs and criminal offending by females is generally associated with drug use. Finally, the typical parole violator is described as a "young, unmarried, minority-group member with a history of substance abuse and prior convictions who neither sought nor obtained employment following arrest and who did not participate in an educational or vocational program while incarcerated". (Lemieux, 1998)

Lemieux (1998) states that although "considerable tension continues to exist between the custodial and rehabilitative perspectives of imprisonment, there is a growing movement toward correction-based efforts to ensure that offenders who have substance abuse issues are successfully reintegrated upon release. In the face of the 'recycling' of the same drug-using offenders through the system, there is speculation that if treatment can reduce drug use then a corresponding reduction in crime will follow.

Some encouraging evidence supports this belief. Firstly, those who participate in some form of treatment do better than those who drop out of treatment, are involuntarily discharged or do not enter into treatment at all. (Martin & Inciardi, 1997) Secondly, if treatment is of sufficient intensity and duration it can successfully reduce drug use and recidivism. (Belenko & Peugh, 1998; Leukefeld & Tims, 1988, Makkai, 1998; Martin & Inciardi, 1997; Young & Belenko, 2002) Thirdly, legally coerced clients do as well as, or better than voluntary clients in treatment. (Belenko & Peugh, 1998; Harrison, 2001; Makkai,

1998) Finally, drug abuse treatment can be cost-effective in terms of crime reduction, health care costs reductions and service utilisation (Harrison, 2001;

As Swartz (1996) summarises,

The highly structured, controlled environment of jails can exert a tremendous influence over offenders motivations to seek treatment and their commitments to stay in treatment. Moreover, offenders who are legally coerced into drug treatment are just as successful in recovery as those who enter treatment voluntarily, and they often remain in treatment programs longer.

Imprisonment can act to limit the supply of drugs and therefore lead to withdrawal for some that use drugs. (Harrison, 2001) However, those who were addicted to drugs eventually return to the community and quickly resume drug addicted and criminal lifestyles. Hiller, Knight & Simpson, (1999) point out that relapse to drug use and crime is more likely to occur in the first 90 days after discharge. Therefore.

Unless the treatment they receive in prison for their addiction is maintained on their return to the community, the chances are that they will relapse and begin offending again to support their drug use. Failure to access appropriate support services in the community can result in offenders returning to prison time and time again, as the cycle of offending is perpetuated. (Burrows, Clarke, Davison, Tarling & Webb., 2001:1)

Treatment programs should be developed according to need and risk, targeting those at greatest risk of relapse and further offending. A range of responses is required including screening and assessment services, drug education, group counselling, 12-step or fellowship approaches, methadone maintenance, unit-based group education and counselling and therapeutic communities. Drug treatment that is comprehensive and multi-phased is more likely to result in better outcomes including a reduction in rearrest rates and recidivism. Swartz, et. al. 1996:

Lemieux, (1998) suggested that social support was important to self-efficacy for those who entered into treatment for substance abuse. Participants who sustain regular contact with family and significant others report high levels of perceived social support, expect to maintain stable living arrangements upon release and have higher expectations of remaining abstinent following treatment. Whilst the study has limitations and does not investigate how efficacy expectations translate to actual post-release outcomes, it does point to the importance of social support for post-release success and suggests the value of assessing, developing and enhancing social supports as a potential rehabilitative tool.

A system of throughcare includes pre-release and post-release strategies that are developed within a socio-ecological framework. Throughcare research

according to Burrows, et. al. (2001:4) is still in its infancy, but the evidence to date shows encouraging results. Prisoners who received 12-15 months treatment during sentence and an additional 6 months drug treatment and job training on release were less likely to be re-arrested 18 months later than those who had only received treatment whilst in prison. (Inciardi, et. al., 1997; see also Knight, et. al., 1999)

An effective aftercare program can play a valuable "re-integrative role by providing a supportive environment and services to offenders at risk of relapse as they work in the community." (Hiller, 1999) Barriers to aftercare include its voluntary basis and the reluctance of community-based drug and alcohol treatment services working within a different philosophical framework to provide the assertive treatment. Furthermore community based providers can be reluctant to work with certain groups of offenders. (Farabee, Prendergast, Cartier & Wexler. 1999)

The increasing emphasis on providing a continuum of service recognises that the problem of drug addiction involves working with and treating the whole person. People with substance abuse issues often experience a range of personal, psychological, emotional and social issues as well. These can include trauma and abuse, poor accommodation, poverty, lack of employment and job related skills, educational disadvantage, isolation, issues in negotiating daily living and problematic communication skills. As Harrison (2001) elaborates,

Ideally, drug treatment involves habilitation in the sense that other service needs of the individual are recognised and addressed. Drug treatment rarely involves a single philosophy but rather includes a variety of techniques, interventions, and strategies within different treatment approaches. Treatment is targeted toward identifying and improving functioning of the individual on multiple levels.

Strategies not only deal with maintenance of drug or alcohol related goals and relapse prevention plans, but also address issues related to employment, accommodation, income, family and social support networks.

Like many jurisdictions, issues of alcohol and substance abuse are prevalent amongst the offender population of the ACT. Whilst the criminal justice system has sought diversionary sentencing strategies and community-based options that include conditions for drug treatment, significant numbers of those serving custodial sentences have ongoing drug and alcohol issues. In constructing a prison, the ACT has the opportunity to consider the evidence for effective prison-based treatment and plan programs accordingly.

Most importantly, the ACT would have the opportunity to plan this within the context of its own drug strategy, *From Harm to Hope*. The strategy emphasises partnerships between government and non-government agencies and links to committed community groups and individuals. The capacity to develop partnerships and linkages will assist in the development of prison-based

treatment options. It will also assist in the provision of aftercare services that not only support the maintenance of treatment gains, but also support the offender in addressing wider needs that contribute to alcohol and substance abuse issues. The location of a correctional facility for sentenced prisoners will contribute to the development of throughcare planning, an essential component of effective alcohol and drug treatment. The current system of sending ACT prisoners to NSW is actively prohibitive of any such community involvement.

#### The Prisoner and Health Treatment

Issues of physical and mental illness disproportionately burden prison populations. This should not be surprising given that many prisoners have led risky lifestyles and were disadvantaged before imprisonment. (Gnau, 2001:3) Gnau states that although the prison environment changes an individual's lifestyle and can eliminate some health risks, other health risks are not eliminated and some are increased. (2001:3) These include smoking, blood-borne and communicable diseases. Dalton is also cited as pointing out that the threat of violence that exists in prisons causes death and physical injury, in addition to psychological and emotional stress. (Gnau, 2001:3)

Levy, in an editorial in the British Medical Journal, (cited by Western Australia Ombudsman, 2000:34) asserts that,

Prison is a regulated but not a closed system, simply because of the numbers of people who enter, leave, and re-enter custodial institutions. So health problems in prison move between the two sides of the wall, in a seemingly chaotic manner.

Access to the prison health service may be the first opportunity prisoners have to receive quality medical care. A correctional service has the opportunity to provide prevention and treatment interventions to a population that is often under-served in health care settings. In the process of responding to such health needs and educating prisoners about health care, a correctional service may also be actively addressing underlying risk factors that contribute to further offending. (Conklin, Lincoln & Flanigan, 1998) Furthermore, the period of imprisonment could offer opportunities to improve the health of prisoners and at least minimise the risk of poorer health to the community.

A report by the New South Wales Chief Health Officer (Public Health Division, 2002: 155-160) noted that,

The health needs of prisoners differ from those of the general community because of the unique characteristics of the prisoner population. Most studies have found prisoner populations to be at an increased risk for a range of health problems including blood-borne communicable diseases, sexually transmissible infections, tuberculosis and mental health problems. Some of these health problems, such as viral hepatitis and HIV infection, can be attributed to lifestyle factors, such as injecting drug use and sexual activity, whereas others, for example tuberculosis, can arise from the living conditions within prison.

Critical in the health care of prisoners with chronic illnesses is discharge planning, community linkages and continuity of care from prison to community following release. This incorporates ongoing provisions of prescribed

medications, continuing medical care, treatment and support in adhering to required therapies.

Continuity of care may also need to focus on wider psychological, social and environmental factors. Overall, this pattern of care is best facilitated through case management that continues from the custodial setting to the community. Case management increases the chances of adherence to comprehensive health care management.

Hammett, Roberts and Kennedy (2001) make the point that "one very rough measure of the depth of discharge planning and community linkages is whether inmates are simply referred to community-based services or are actually provided with specific appointments to receive services in the community." Referrals in themselves can vary from giving the person a list of community health services to establishing appointments with specific agencies.

Continuity of care is also enhanced where there are established links between correctional health care services and community hospital and medical services.

Health care in prisons should promote the health of prisoners; identify their needs and deliver treatment or refer to other specialist services as appropriate, It should also continue any care started in the community contributing to a seamless service and facilitating throughcare on release. (Department of Health, 2002)

Skolnick, (1998) reports a model of care that encompasses the partnership between Hampden County Correctional Centre and the Massachusetts Department of Public Health. The model incorporates a health-based case management process that commences prior to release so that prisoners leave the prison with health care and other required services established. In addition to the provision of medical care, case management also addresses housing needs, vocational training, family reintegration and other needs.

A two year follow-up study of 162 HIV positive prisoners released from Hampden showed a 46% recidivism rate compared with the rate of 72% for the general prison population. This reduction is attributable to the holistic care that is provided through case management. The study also highlighted that in 1996, 57% of the people released had kept at least three health care appointments in the community. One year later this had increased to 70%.

The success of this program is attributed to the health policies and practices within the prison, the close collaboration with community health centres and community-based agencies and the adoption of a public health model of correctional health care. (Hammett, Roberts & Kennedy, 2001) The program ensures that health needs are identified within the prison and treatment plans are established. Transition to the community and links to services are developed during the pre-release phase.

The current arrangement of sending ACT prisoners to NSW prisons represents very obvious and significant barriers to the development of effective discharge planning, community linkages and continuity of care. As Frank (1999) insists,

Prison health care providers and counsellors must work to become familiar with community resources in the area the inmate will be released. This will require that prison administration and health care providers develop linkages with support services as well clinical care providers in the community.

Where screening and health treatment may exist for ACT prisoners, it is not developed or planned with the knowledge of health services in the ACT community. Formal discussions or partnerships with health services do not develop. Furthermore, establishing treatment plans pre-release can prove to be a difficult process across agencies in different jurisdictions. The exchange of relevant information that is critical to treatment continuity is difficult and unlikely. Finally, crucial delays in overseeing the transition from prison to community can mean costly interruptions to treatment regimes and follow-up care.

These factors compromise what Hammett, Roberts and Kennedy (2001) term as adherence to treatment. They cite the findings of a study of prisoners who received antiretroviral treatment for HIV infection whilst in prison but returned to prison with higher viral loads than did controls who remained imprisoned. Incomplete treatment or cessation of treatment can lead to relapse, treatment resistance and potentially, the transmission of disease or infection.

A range of factors can contribute to the breakdown of treatment upon release. This can include the resumption of the risky lifestyle with its implications for the person, the wider community and its treatment resources. An important step in counteracting this impact is a strong relationship between the prison service and the probation and parole service. Through this pre-release planning can be coordinated and resourced.

As is often suggested most prisoners do not stay in prison for long periods.

If the health problems they had upon entering prison are not resolved, or if they return to their communities with additional health problems, communities will find themselves paying remedial health care costs for those who can not afford medical care. When infectious conditions are involved, poor health is not necessarily confined to the individual, but may spread in the community. In this case, prison health care directly impacts the public's health. Finding ways to improve ... health status ... will produce benefits beyond the prison walls. (Young, 1998)

In "Setting the Agenda" (1998), the Minister for Health & Community Care at the time stated that the ACT is committed to increasing the healthy life expectancy for all people through the promotion of health equity and the provision of adequate and high quality health care. The document asserts that an important

part of this agenda is "to continually create and improve physical and social environments and expand community resources to mutually support each other in performing the functions of life and develop their maximum potential." Planning and providing a seamless service of integrated and coordinated care. Assuming the full responsibility for those who serve custodial sentences is an opportunity to respond to the health needs of this population in our community and contribute to the overall health of the ACT community.

### The Prisoner and Mental Health Treatment

The over-representation of people with a serious mental illness in the prison system is leading to a growing recognition this population is becoming criminalised. (Lurigio, et. al., 2000; Lurigio, 2001; Morris, et. al. 1997;) This has been attributed to a number of factors. (Edens, Peters & Hills, 1997; Lurigio, 2001) A policy of deinstitutionalisation has resulted in a shift to community-based care. The treatment options available to services involved in the care of people with a serious mental illness have been restricted. Finally, the limited eligibility criterion of services often denies service to those with a dual diagnosis or complex issues. This is despite the fact that "co-occurring disorders" such as substance abuse, exist with the experience of mental illness.

Veysey, Steadman, Morrissey & Johnsen state that,

Persons with mental illnesses who come into contact with the criminal justice system are a particularly vulnerable group. Combined with the stress and stigma associated with their mental disabilities, the burden of their arrest and charges can exacerbate the isolation and distrust that are often associated with their mental illnesses. In addition, persons with mental illnesses in jails face multiple problems; most commonly health problems, substance abuse and homelessness. (1997:384)

Delivery of mental health services within prisons and subsequent planning of services for release must often overcome a number of obstacles. These include the competing societal concerns for public safety and effective mental health treatment, rigidity within services/settings, interagency conflict arising from program auspice, limited experience of staff and differing values of rehabilitation and punishment. (Veysey, Steadman, Morrissey & Johnsen, 1997; Walsh & Bricourt, 1997)

People with a serious mental illness whose crimes warrant a custodial sentence have a right to access appropriate mental health services. Comprehensive prison mental health care needs to include processes to identify mental health problems and requirements of care, crisis intervention services for those in immediate danger to self or others and structured treatment and rehabilitative services that encompass individualised case plans. Furthermore, services must be prepared to address co-occurring disorders in a holistic manner.

Essential to prison-based mental health services is the capacity to plan continuity of care. Plans and associated programs assist prisoners to move through various facilities within the prison system and from the prison system to the community. (Walsh & Bricourt, 1997) The reduction of post-prison violations and reoffending is dependent in part on the quality of aftercare services. (Lurigio, 2001) This in turn, is dependent upon the successful referral or transfer of people with a serious mental illness to community corrections and other relevant community agencies.

Lurigio, Fallon & Dincin (2000) describe a continuous system of care for people with a serious mental illness that includes explicit linkages between prison-based and community-based mental health services. Staff who are common to both agencies are preferably involved in this. It can be achieved through a variety of models including (Veysey, Steadman, Morrissey & Johnsen, 1997):

- contracting of local mental health services to provide services to the prison;
- employment of prison-based mental health staff with formal links to the community mental health provider enabling the transition of people to the community;
- employment of prison-based mental health staff who make direct referrals to the community, linkages to services facilitated by a counsellor/case manager.

Successful transition and aftercare relies on communication and collaboration between prison and community services. This is best facilitated through an assertive case management strategy that commences prior to release. Veysey, Steadman, Morrissey & Johnsen (1997) make the point that the prison must be situated and understood within the context of an organisational environment if the identification and treatment of people with a serious mental illness is to be successful. The ACT has the opportunity to develop a service within a prison that responds to the needs of the offender with a mental illness and takes account of community systems to ensure continuity of care.

Good discharge planning attempts to engage released individuals into programs that will help them remain in the community. When planning for more effective jail mental health services, it is important to realise that the best programs start planning for discharge during the early stages of the detainee's incarceration and have specific follow-up procedures in place to ensure that any linkage provided upon release is maintained. In the long run, making the effort to provide comprehensive discharge planning benefits not only the detainee but the jail and the community as well. (Morris, Steadman & Veysey, 1997)

A study by Jacoby & Kozie-Peak (1997) reveals that offenders with a mental illness who enjoyed social support within prison and following release benefited from a higher quality of life in the community. Social Support is defined as "the perceived or actual instrumental and/or expressive provisions supplied by the community, social networks, and confiding partners". (Lin, Dean & Ensel, as cited by Jacoby & Kozie-Peak, 1997:483)

Surprisingly, the study revealed no significant relationship between post-release social support and recidivism or re-hospitalisation. However, the authors suggest two strategies to build and maintain social support networks during the custodial sentence. Firstly, family and friends of the prisoner ought to be encouraged and enabled to correspond with and visit the prisoner, and to participate in planning for post-release housing, employment, and coordination with community mental health programs. Secondly, community-based, formal and informal support networks ought to be developed for released prisoners to

encourage follow-up contact with mental health services, support continuity of treatment regimes and to provide education and assistance to the person and family. (Jacoby & Kozie-Peak, 1997:499)

Prisoners with mental health issues, a significant part of the prison population, have much to gain from a health-based treatment system that spans both prison and community. Currently in the ACT, the criminal justice system continues to develop responses that preclude custodial sentences for people with a mental illness. However, when the imposition of a custodial sentence is demanded, prisoners with a mental illness are disadvantaged. Not only do they serve these sentences in another jurisdiction, the critical issue of continuity from prison to community is compromised. Furthermore, the positive social and community ties that may exist for prisoners with a mental illness are interrupted. This can add to the stress of imprisonment and exacerbate mental health issues.

The ACT is committed to the provision of a comprehensive, integrated, cross-Territory public mental health service. (ACT Department of Health and Community Care, (2002: 20) The construction of a prison with the development of mental health treatment services and programs fits with this aspiration. Such services and programs can be established with pathways to community mental health services and linkages to agencies that can assist the process of reintegration. Once again, full control of the prisoner's progress through the criminal justice system would seem to be to the advantage of the individuals with a mental illness and the ACT community that can potentially feel safer for more certain treatment services.

## The Prisoner and Education

Most prisoners have had highly disrupted experiences of school and partly for this reason, leave with very few qualifications and low basic skills. While education programs on their own are no guarantee of success, the lack of educational qualifications can be an important barrier to legitimate success in the community. (Stojkovic & Lovell, 1997)

Education programs can lead to academic improvement, particularly in the area of functional literacy. As well as increasing the skills for daily living this can also increase employability. This level of education may also be needed to participate in other rehabilitative programs. Education programs can also contribute to the acquisition of the social skills, interpersonal skills and reasoning skills that underpin pro-social behaviour. (Lilly, 1996) Participation in such programs can also reduce problem behaviours within the institution through the provision of constructive activity and their capacity to promote and reinforce positive behaviour. (Lilly, 1996; Wilson, Gallagher & MacKenzie, 2000)

Education programs then, act as an agent for change within individuals and in the prison system. They are seen as more "overtly transformative" as they increase knowledge and cognitive skills. (Lilly, 1996) They have the capacity to counteract the negative impact of a prison regime and reduce the stigma associated with having a criminal record. They contribute to the development of social relationships and assist in dealing with the anger, frustration and aggression that develops within the correctional institution. (Quinn, 1999; Ryan, 1991; Stevens, 1998; Wilson, Gallagher & MacKenzie, 2000; Stojkovic & Lovell, 1997)

Citing research by Hares, Snarr (1996:174) asserts that participation in educational programs while in prison is linked to a subsequent reduction in post-release recidivism. He continues,

In general, this relationship between educational participation and recidivism was found to exist regardless of prior criminal activity, preprison education attainment level, pre-prison employment and post-prison employment. Such findings indicate that education is crime prevention across a broad spectrum.

Exactly how and why they work and whom they work best for is not clear (Duguid & Pawson, 1998; Ryan, 1996) The study by Duguid & Pawsin (1998) concludes that prison education programs clearly work, but the degree of effectiveness differs widely across various groups. However, what is more significant is the degree to which the lives of individuals were transformed as a result of participation.

Further research is needed to identify with certainty how such programs impact on offenders. Quinn (1999:280) however, highlights one study that concludes achievement in such programs to be similar between those who attend

education programs to earn privileges or early release and those who attend for reasons of self-improvement through learning.

It is apparent from the literature that the education programs provided in correctional facilities are often developed in partnership with traditional providers of educational services, such as universities and further education institutions. These services work in conjunction with the criminal justice system to develop programs and opportunities to study or they provide adjunct programs and services to supplement prison-based programs. The advent of information technology has also increase educational opportunities for prisoners where supportive regimes are in place to encourage exploitation of this medium for such purposes.

In constructing a prison in the ACT, the Territory would be in a position to develop the motivation and incentives to encourage access to education services. It would be in a position to develop partnerships with local education providers to develop prison-based programs that include pathways and services to support further educational opportunities post-release.

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In a study by Canadian Correctional Services (1991a), prisoners reported that the skills they developed through participation in education programs assisted to increase control in day-to-day life, search for employment, deal with family issues and develop relationships with others. Participation in such programs can also reduce problem behaviours within the institution through the provision of constructive activity and their capacity to promote and reinforce positive behaviour. (Lilly, 1996; Wilson, Gallagher & MacKenzie, 2000)

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Although vocational training will be considered in the following section, Ryan (1996) summarises a number of studies that suggests education and vocational training programs have a positive impact on the reintegration of offenders. An overview of the conclusions of these studies include:

- higher employment rates and fewer rearrest rates as a result of participation in some form of academic training, vocational training or combination of both
- lower recidivism rates among participants in education programs than nonparticipants
- rates of post-release employment were dependent on the degree of interagency and community involvement in programs, the characteristics of the prisoner, the type of instructional methodology, procedures for course development and implementation, intake and release procedures and types of support services
- length of employment post-release reveals a correlation to grades achieved as a result of participating in education programs (see also Stevens, 1998)

How, why and on whom education programs work is still not clear. (Duguid & Pawson, 1998; Ryan, 1996) The study by Duguid & Pawsin (1998) concludes that prison education programs clearly work, but the degree of effectiveness differs widely across various groups. However, what is most significant is the degree to which the lives of individuals were transformed as a result of participation.

Further research is needed to identify with certainty how programs impact on offenders. Quinn (1999:280) however, highlights one study that concludes achievement in such programs to be similar between those who attend education programs to earn privileges or early release and those who attend for reasons of self-improvement through learning. A Canadian study suggests basic education programs impact more positively on higher risk offenders. (Correctional Service Canada, 1991a)

It is apparent from the literature that the education programs provided in correctional facilities are often developed in partnership with traditional providers of educational services, such as universities and further education institutions. These services work in conjunction with the criminal justice system to develop programs and opportunities to study or they provide adjunct programs and services to supplement prison-based programs. The advent of information technology has also increase educational opportunities for prisoners where supportive regimes are in place to encourage exploitation of this medium for such purposes.

In constructing a prison in the ACT, the Territory would be in a position to develop the motivation and incentives to encourage access to education services. It would be in a position to develop partnerships with local education providers to develop prison-based programs that include pathways and services to support further educational opportunities post-release.

# The Prisoner and Vocational Training

Involvement in the criminal justice system is influenced by a number of factors, a significant one being the lack of an economic base from which to operate. The links between unemployment, poverty and crime are complex however, individuals who are at the lower end of the socio-economic scale are more likely to participate in crime and as crime leads to arrest and imprisonment, this in turn reduces employment prospects. (Weatherburn, 2001:5)

The lack of employment can contribute to an offender's continued criminal activity. Furthermore, Motiuck (1996) states that the greater the deficit in employment skills, the more risk there is of re-offending. Houston (2001:1) states,

Offenders contend with many similar barriers to obtaining and maintaining employment as do other chronically underemployed people, such as limited childcare, health care and transportation. However, the very nature of their offender status brings additional challenges, including the social stigma associated with criminal history, reporting requirements.... These complex circumstances have the potential to limit initial employment, threaten sustained employment, and endanger successful community transition.

Employment is a way out of the poverty trap that many offenders, particularly those caught in the ongoing cycle of offending find themselves in. With less developed vocational skills though, they are disadvantaged in a competitive job market. Therefore, they experience difficulty in gaining meaningful employment and have had few opportunities to maintain extended periods of employment. On this basis it is argued that the prison sentence represents an opportunity to offer programs that will improve work-related skills. Henson (1990) suggests one way to keep people out of prison is to equip them with skills and opportunities that make re-offending less attractive.

In a limited survey of NSW parolees vocational training was viewed as useful. Those surveyed reported increased confidence to obtain a job and assistance with communicating more effectively. (Correctional Services Canada, 1991b)<sup>3</sup> Learning skills that lead to employment opportunities or assist in bridging the gap between the correctional institution and the community were considered the most useful courses to participate in. Courses in outside facilities and work-release schemes were valued most as they offered experience and mediated the transition from imprisonment to the community.

The survey however, failed to note any marked change in the quality or type of work that individuals were employed in following release. In others words they continued to do the type of work following release that they did prior to release.

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<sup>&</sup>lt;sup>3</sup> Adapted from Gorta, A & Panaretos, H. (1990) "Parolee perspectives on prison education and work programs", **Australian and New Zealand Journal of Criminology**, 23: 1-14

Given that the sample had some bias towards individuals who might be expected to have greater motivation to seek employment, it is not surprising that those surveyed would have liked more information about local employment and economic factors and the impact these might have on gaining employment. They also would have liked to know more about dealing with the barriers that arose with having a criminal record.

As with education programs, participation in prison industry and vocational or trade training was correlated with less reports of misconduct. (Fabiano, LaPlante & Loza, 1996; Quinn, 1999; Saylor & Gaes, 1996) These programs also provide an avenue for vocational exploration and the development of job retention skills. (Harley, 1996)

Wilson, Gallagher and MacKenzie (2000) found that participants in vocational and educational programs "are employed at a higher rate and recidivate at a lower rate than non-participants in programs." These authors found that both areas of programming are likely to be of benefit but as yet, the research has not effectively established how and why or for whom it is effective. (Duguid & Pawson, 1998; Ryan, 1996) Further research in this area would mean improved program design and more effective targeting of the programs.

Gillis, Robinson & Porporino (1996) suggest that prisoners be provided with opportunities to develop generic skills that are considered important in the workplace. These skills include cooperating with fellow workers and a work supervisor, problem solving, showing initiative, working independently and dealing with authority. They believe these skills can be developed within life skills and rehabilitative programs that focus on transforming attitudes, for example, cognitive skills-based change programs. They argue though, that some form of prison-based employment provides concrete experience in the application of these skills. This is considered important if the skills learnt are to be successfully transferred.

Saylor & Gaes (1996) studied the post-release employment outcome for 7,000 Canadian offenders who had participated in vocational instruction programs, prison industry or apprenticeship training. It is noted that prisoners are initially released to the structured setting of a halfway house. They found that program participants were more likely to have found and maintained employment within twelve months of release than those who had not. Participants were also less likely to be re-arrested or have their conditional release revoked. Overall, program participants were, on average, earning more income than non-participants who had found work.

The study concludes that prison employment in an industrial work setting and vocational or apprenticeship training can have an effect on short and long-term recidivism rate. It notes that this is particularly the case for men. It is worth noting that this study does not consider how the programs have this effect, on whom they have an effect or why this effect might occur.

Henson (1990) highlights the importance of developing vocational programs and opportunities that take account of the business, industry and labour context of the local community. He recommends that prison program providers develop links to the local labour, industry and business sectors in order to develop initiatives and programs.

These links should also be extended to community-based programs that focus on job skills development. This presents the opportunity to develop continuity between prison and community-based programs. The fact that these programs have an awareness of and can facilitate access to other social and welfare related services is a further advantage. This is consistent with the research of Wilson, Gallagher & MacKenzie, (2000) which suggests that "programs with successful outcomes have multiple components, follow-up programming, and focus on skills relevant to the current job market."

Including local employers in a consultative capacity to advise and direct on vocational training also establishes links and networks that can open up avenues for employment opportunities. At the very least, it will enhance knowledge of local labour market skill requirements so programs can be tailored to meet such needs. (Henson, 1990)

Quinn (1999) is critical of labelling any type of work done by prisoners as vocational training. (see also Stojkovic & Lovell, 1997) He argues that menial or routine tasks carried out as part of daily routines do not train individuals in more complex work routines and processes. He makes the point that vocational training programs should replicate work patterns and the equipment required in the workplace. Training can therefore, focus on the combination of positive work habits as well as specific skills.

Henson (1990) extends this to recommend the involvement of local employers in preparing prisoners for work. Links to the local business and industry sector can inform what programs could be beneficial what content is necessary. Of particular benefit are partnerships between local industries and the correctional institution where training skills participants in what is required to fill vacant labour market positions. Partnerships can also establish pathways to employment opportunities. Finally, they are potentially educative of employers and the wider community about the barriers that exist for prisoners attempting to change their lifestyles following imprisonment.

Work-release for prisoners to engage in work placements is essential. These schemes "provide meaningful and productive work opportunities for offenders, maintain and strengthen links with community organisations, and permit staff to assess offender credibility with an eye toward future release". (Haskell, 1996)

The development of or referral to adjunct support services, programs and networks that place individuals in employment, education and training as well as provide support for the range of issues that may arise for individuals with problematic employment history, is essential. These services, often through a

case management process, contribute towards the breakdown of barriers that prevent offenders from competing in the labour market.

Houston (2001) states that if employment is to become a "protective or resiliency factor against future criminal activity" employment must be maintained over a period of time. Job retention for individuals who face multiple barriers and obstacles in gaining employment, is improved when there is one-to-one support, job placements are based on need and the combination of skill level and interest. Additionally, it must be realised that retention is influenced by factors beyond actual employment. (Houston & Moore, 2001) The case management process is particularly useful to this purpose. Houston (2001) says that using case management improves job retention by:

- creating a long-term relationship between staff and offenders that allow for identification of offender personal and family issues;
- making alternative sources of ongoing support available to offenders;
- establishing referral systems and improving access to community resources that address commonly encountered job retention obstacles, such as substance abuse;
- expecting offender responsibility and accountability;
- modifying employment programs to respond to unmet offender need.

One example of such a service is Victoria's Second Chance Business Register (Henson, 1990) which maintains a database of businesses offering employment to individuals caught in the criminal justice setting. It increases employer awareness of the needs of this group and enlists their support in rehabilitation and restoration efforts, It links employers with referring agency staff seeking to place individuals in the workforce and finally, works with referral agencies to help motivate individuals to take and retain employment opportunities.

The organisation is established to serve offenders who have a criminal record, are actively seeking work and prefer to be honest about their history. In addition to the support in finding employment, offenders have access to a support worker for three months after placement.

Prison industries that enhance the employment prospects of prisoners tend to be those that are developed as commercial ventures, providing needed goods and services and employing prisoners at award wages with expectations of a commensurate work ethic and performance. Wages can then be used to offset prison costs as well as saving money for release. Such industries offer the opportunity for the development of skills in a normal work environment that is recognised in a wider labour market. (Henson, 1990) In an era of increasing rates of imprisonment and its associated costs, the privatisation of prisons and debate about the status and rights of prisoners as employees of the prison industry is contentious. (see for example White, 1999)

One such industry of note is the Karnet Training Project in Western Australia. (Chavez, 2000) It is not known if all of the above factors are in place but, offenders have the opportunity to complete recognised vocational qualifications

and pre-employment courses. They are also able to gain workplace experience in the meat processing industry. The Project is a joint initiative involving the Ministry of Justice, the Western Australian Department of Training and Employment, Australian Quarantine Service (a registered training organisation accredited to provide training to the meat processing industry) and Bedford Workforce, a job network service provider. The project emphasises the provision of vocational qualifications and 'throughcare' employment assistance.

Harley (1996) draws particular attention to the needs of prisoners with disabilities, particularly those who have mental health issues, drug and alcohol issues and learning disabilities. She argues that this population is not receiving "the vocational rehabilitation service" that they require. This oversight represents a failure to focus on transition planning and subsequently compounds the "revolving door effect" of recidivism.

Greater collaboration is required between correctional, educational and vocational systems to implement successful transition programs. These programs incorporate an intensive one-to-one approach to access required services and facilitate referrals. This means that during the period of imprisonment an initial vocational assessment is carried out to determine strengths and needs. This is used to plan the services to be delivered whilst in prison and those that are required post-release. Harley (2001) asserts that vocational rehabilitation must commence early in the prisoner's sentence to provide skills including social skills, work behaviour and job skills.

A major hurdle for released offenders in returning to the ACT is finding employment or engaging in programs towards employment. This includes those who may have relatively stable work histories prior to imprisonment. The stigma of imprisonment and a criminal history is difficult to overcome. Although offenders currently serving time in NSW may engage in vocational programs and learn useful work skills, this occurs without reference to the local economy.

In constructing a prison, the ACT would have the opportunity to develop a system that motivates and rewards participation in vocational training. It could develop training that is responsive to the local context. This can be enhanced through the exploration and establishment of links to the local employment sector including business, industry and employment networks. A local prison would also be in a position to develop pathways to local employment opportunities and be able to establish valuable work placement experiences.

### The Prisoner and Institutionalisation and Life Skills

Life skills describes those skills that enable the person to communicate thoughts and feelings effectively, to form and maintain healthy relationships, to create and live on a budget, and to deal with stress and anger. (Quinn, 1999:287) Such skills, according to the Social Exclusion Unit (2000:86) are particularly important to the offender given the prejudice and barriers they will face in accessing employment, benefits, housing, and other services.

The development of life skills can be undermined or compromised by a number of factors including family breakdown and weakened family links, educational opportunities, mental health issues and relationship breakdown. (2000:87)

These factors are further complicated when drug and alcohol abuse results in the development of a chaotic lifestyle. Problems can then occur with managing the essential aspects and practicalities of daily life. Individuals may even miss opportunities to access services that they are entitled to receive.

Given the factors that influence offending behaviour, the development of life skills for many offenders has been compromised. Prison can further impact significantly upon the individual's capacity and skills to survive and maintain an acceptable quality of life within the mainstream community. The Social Exclusion Unit suggests that the institutionalising effects of prison hinders the development of life skills and can damage what confidence and sense of responsibility individuals have already developed. It acts against the promotion of life skills. (2000:86)

Prison however, can provide opportunities to improve life skills. Such opportunities include social skills training, parenting skills training, temporary release programs to attend work and the promotion of practices that encourage prisoners to take as much responsibility and control for their lives as possible.

Community-based corrections also plays an important role in counteracting the impact of institutionalisation. In addition to overseeing compliance with court orders, this service is tasked with the provision of post-release support in such issues as access to housing, social security benefits, employment and training and health services. Usually this service utilises a case management approach to facilitate and coordinate the range of services needed by offenders returning to the community. The probation and parole officer is also often required to provide counselling and support to offenders as they negotiate the issues of rejoining families, establishing positive peer groups and handling the daily pressures of life.

The task of monitoring compliance with orders at times compromises more collaborative efforts to address issues related to the offender's quality of life. In the operation of a custodial facility, the ACT has the opportunity to commence the collaborative process between community-based corrections, custodial

corrections and the offender prior to release. This will enhance case management processes and promote better linkages to community services and resources for the offender on release. Where outcomes aid resettlement for the offender and encourage a pro social lifestyle then motivation to comply with restrictions and conditions can be enhanced.

Positive community links and the involvement of the community in the life of the prison mitigates against the negative impact of institutionalisation. Voluntary organisations and individuals provide valuable services to prisoners and assistance with practical issues especially at the time of resettlement. These can include religious services, recreation, education, social services and pre-release training.

The current system in the ACT does not allow for the development of this sector. Stalder (1999:310) reflects that volunteers can supplement the provision of services to meet correctional goals. Additionally, volunteers

... provide service, not just to enrich that which is already provided. Community support to the released offender is frequently the only support available. Involvement begins at the institution with education in a pre-release setting about how to access services. The involvement continues after release, with volunteers serving as mentors and providing guidance and support.

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