The Indigenous Offender Health Web Resource

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Abstract
The offender health web resource is a 'one-stop shop' for people working, studying or interested in the health of Australia's Indigenous offender population. Offender health is an overlooked but important area. The offender population is known to endure a greater health burden compared with the general community, and there is a need to develop greater knowledge in this area. This is particularly so in the case of Indigenous incarceration, where Indigenous people suffer the dual disadvantage of being Indigenous and being incarcerated. The offender health web resource aims to increase understanding in this area by providing access to the latest information on the health of the Indigenous offender population. This article will address the content and purpose of the Indigenous Offender Health Web Resource, with particular attention given to the work of the Indigenous Offender Health Research Capacity Building Group. A very basic overview of the current status of knowledge on offender health will be detailed to illustrate the need for an Offender Health Web Resource. The possible uses of the web resource for correctional staff will then be outlined. Finally a precise summary of the work of the Australian Indigenous HealthInfoNet will be provided to allow readers insight into the wider picture of Indigenous health in Australia.

Introduction
The Indigenous offender health web resource (http://www.offenderhealth.org.au) is a 'one-stop shop' for people working, studying or interested in the health of Australia's Indigenous offender population. The offender population includes those involved in the wider criminal justice system such as ex-prisoners and those on remand. This group is known to endure a greater health burden compared with the general community, and there is a need to develop greater knowledge in this area, particularly in relation to Indigenous incarceration. The offender health web resource aims to increase understanding in this area by providing access to the latest information on the health of the Indigenous offender population. This article provides a comprehensive overview of the Indigenous offender health web resource, including the evidenced need for such a web resource, the content of the web resource and how you, as a correctional practitioner, can benefit from its use.
What is known about Indigenous offender health?

Rates of custody

At June 2009 the Australian prison population was 29,317, 93% of which were men (Australian Bureau of Statistics, 2009a). Despite only comprising under 3% of the total Australian population Indigenous people comprised 25% of the total prison population (Australian Bureau of Statistics, 2009b). Between 2000 and 2009, Indigenous imprisonment rates increased from 1,248 to 1,891 Indigenous prisoners per 100,000 adult Indigenous populations. In contrast, the rate for non-Indigenous prisoners increased from 130 to 136 per 100,000 adult non-Indigenous populations. (Australian Bureau of Statistics, 2009a) Western Australia had the highest rate of Indigenous incarceration (3,329 prisoners per 100,000 population) and the ACT the lowest (759.6 per 100,000) (Australian Bureau of Statistics, 2009a). The over-representation of Indigenous youth in the criminal justice system is even more pronounced than among adults. While only about 5% of young Australians are Indigenous, 54% of youths in juvenile detention are Indigenous (Curnow and Joudo Larsen, 2009).

Deaths in custody

The most recent monitoring report of the National Deaths in Custody Program found that of the 74 deaths that occurred in custody in 2007 (45 in prison custody) nine (12%) were Indigenous (five in prison custody) (Curnow and Joudo Larsen, 2009). This reflects the overall trend of the past 3 decades where during the years 1980 to 2007 Indigenous people accounted for 19% of the 1968 deaths in custody (1,206 in prison custody). In this we see continuity with the findings of the Royal Commission into Aboriginal Deaths in Custody, namely that Indigenous people are no more likely to die in custody than non-Indigenous Australians, rather than Indigenous Australians are significantly over-represented in custody.

General health issues

High levels of physical ill health are consistently found in epidemiological surveys of prisoners (Butler and Milner, 2003). Until recently the lack of a comprehensive monitoring program of the health of prisoners has made nationwide data hard to obtain. The Prisoner Health Information Group led by the Australian Institute of Health and Welfare has been seeking to address this through developing a set of indicators and data collection protocols to allow monitoring of the health of prisoners at a national level. The first report stemming from the work of this group, The health of Australia’s prisoners 2009, confirms previous jurisdictional analyses that in all dimensions of self-assessed health measures, prisoners’ report poorer health outcomes than the general community (Australian Institute of Health and Welfare, 2010; Butler and Milner, 2003; Indig, et al., 2010). This report found some key differences between Indigenous and non-Indigenous prison entrants. Finding that Indigenous entrants reported lower levels of diagnosis and treatment of mental health issues, a higher prevalence of communicable diseases, a higher rate of alcohol consumption at a level at risk of alcohol-related harm, higher rates of cannabis use, and a higher level of self-reported diabetes than non-Indigenous inmates (Australian Institute of Health and Welfare, 2010). Specific information on blood-borne viruses and substance use is provided below as these areas display the greatest discrepancy between Indigenous prisoners, non-Indigenous prisoners and the general public.
Blood-borne viruses
Research into the health of prisoners has consistently found that prisoners have much higher rates of communicable diseases, such as hepatitis C, than the general public (Butler, et al., 1999; Butler, et al., 2004; Miller, Bi and Ryan, 2009; Richters, et al., 2008). *The health of Australia’s prisoners 2009* analysed the findings of the 2007 National Prison Entrants’ Blood-borne Virus and Risk Behaviour Survey, reporting that 43% of Indigenous prison entrants tested positive for hepatitis C antibody, compared to 33% of non-Indigenous prisoners. Similarly, 42% tested positive for the hepatitis B core antibody compared to 17% of non-Indigenous entrants (Australian Institute of Health and Welfare, 2010; Butler and Papanastasiou, 2008). Of particular note is that almost three-quarters (72%) of Indigenous female entrants tested positive for the hepatitis C antibody. In comparison, the national lifetime prevalence rates of both hepatitis C and hepatitis B for the total population is less than 1% (Australian Institute of Health and Welfare, 2010).

Substance Use
Indigenous and non-Indigenous prison entrants reported similar patterns of substance use in the *The health of Australia’s prisoners 2009* survey. Eighty two percent of Indigenous and 80% of non-Indigenous entrants were current tobacco smokers, while 72% of Indigenous and 71% of non-Indigenous entrants had used illicit drugs in the past 12 months. The greatest difference between Indigenous and non-Indigenous entrants was in the self-reported consumption of alcohol at risky levels in the last 12 months, with 65% of Indigenous entrants reporting this, compared to 47% of non-Indigenous entrants. These proportions are much higher than the 2007 National Drug Strategy Household Survey estimation that just over 20% of all Australians consumed alcohol at risky or high risk levels (Australian Institute of Health and Welfare, 2008). Similarly only 13% of the general Australian population reported using illicit drugs, and only 17% reported being a current smoker (Australian Institute of Health and Welfare, 2008).

What is the Indigenous offender health web resource?
The web resource provides easy and free access to information on key areas of Indigenous justice health. The resource is designed to encompass all relevant information regarding Indigenous justice health and is organised around the following eight key topic headings.

1. Reviews: This section includes our overview of Indigenous offender health. This represents the most comprehensive and up-to-date synthesis of information on Indigenous offender health available and is updated at a regular basis. A plain language summary of the review is currently being developed.

2. Policies and strategies: This section provides references, links and information about policies and strategies of relevance to offender health, including general and Indigenous-specific material. Publications related to policies and strategies are also located in this section, including United Nations reports on the fair treatment of prisoners and the overrepresentation of Indigenous people in custody.

3. Programs and projects: This section provides details and links for programs and
projects addressing health and other issues of relevance to the Aboriginal and Torres Strait Islander offender population. For ease of access programs and projects are grouped under four main categories, including: research projects, diversion programs, health service programs in prisons, and post-release interventions.

4. Resources: This section provides information on health promotion resources and guidelines available for people working with the Aboriginal and Torres Strait Islander offender population.

5. Publications: This section provides recent references compiled from our bibliographic database relating to the health of the Aboriginal and Torres Strait Islander offender population. References are divided into general references and references related to certain specific topics, including: substance use, mental health, communicable diseases, deaths in custody, juvenile offenders, women’s health, data collection, sentencing and specific diseases. The references include journal articles, reports, theses, and other literature. Conference presentations are available under a separate heading.

6. Conferences, workshops and events: This section lists upcoming and past (last 6 months) conferences, workshops and events pertinent to Indigenous offender health in Australia.

7. Organisations: This section provides information about, and contact details for, organisations associated with the health of the Aboriginal and Torres Strait Islander offender population.

8. Bibliography: Our searchable bibliographic resource, the Australian Indigenous Health Bibliography is the most comprehensive, up-to-date bibliographic database on Indigenous health, containing over 16,000 references. This database is updated on a daily basis and contains the details of over 700 references specifically of relevance to offender health.

Information found on the offender health web resource is sourced and maintained on a daily basis. This takes the form of regular searches for published and grey (informally published) literature, while the websites of relevant organisations are monitored for any developments of programs and projects. To maintain the accuracy of the information any broken links are detected and fixed on a consistent basis, while a yearly audit of programs and projects is completed to ensure the accuracy of information provided to the user.

Suggestions are welcomed from individuals and organisations of information that should be included on the web resource. To facilitate this, the web resource includes the option to ‘share your information’ which provides the user with a form allowing them to directly send relevant information to the web coordinator. The web resource is quality controlled through user feedback which can be provided through a linked feedback form on the site.
What is the Indigenous Offender Health Research Capacity Building Group?

Overseeing the development and maintenance of the web resource is the Indigenous Offender Health Research Capacity Building Group (IOHR-CBG), comprised of Indigenous and non-Indigenous academics and researchers from New South Wales, Victoria, Queensland, Western Australia and the ACT. The IOHR-CBG received a capacity building grant ($2.3 million over 5 years) from the National Health and Medical Research Council to develop research capacity in Indigenous justice health research. This program of research aims to establish an Australia-wide health and criminal justice research network, and increased research capacity in key health areas affecting this population including blood borne viruses, mental health, substance use, impact of incarceration on Indigenous communities, and models of care for Indigenous offenders. Collaborative research work, secondments to research centres and mentoring will be used to develop the knowledge and skills of a next-generation cohort of young researchers in New South Wales, Queensland, Victoria and the ACT. Their findings will be shared and disseminated to a wider audience through annual symposia and publications in academic journals and other media.

This is an opportunity to create an Australia-wide network for sharing knowledge in this field, and to maintain Australia’s position as a world-leader in the area of offender health research. The intent is that this research will lead to beneficial outcomes, including better health services for Indigenous offenders, and more generally, improved health and wellbeing for those in the communities from which they come, and to which they return. This will inevitably include outcomes for corrections facilities and staff across Australia and it is hoped that the research of the IOHR-CBG can provide an evidence base for corrections policy that can improve the health outcomes of Indigenous offenders in Australian correctional facilities. The offender health web resource will be a first point of contact in making the research of the IOHR-CBG and its outcomes available.

What is the Australian Indigenous HealthInfoNet?

The Indigenous offender health web resource forms part of the Australian Indigenous HealthInfoNet (http://www.healthinfonet.ecu.edu.au). The Australian Indigenous HealthInfoNet is an innovative Internet resource that aims to inform practice and policy in Indigenous health by making research and other knowledge readily accessible. In this way, the HealthInfoNet aims to contribute to ‘closing the gap’ in health between Indigenous and other Australians. The HealthInfoNet embraces the holistic view of health held by Indigenous Australians, providing comprehensive information across physical, mental, community and cultural health topics.

The HealthInfoNet is a ‘one-stop shop’ for people interested in improving the health and wellbeing of Indigenous Australians. It makes published, unpublished and specially-developed material about Aboriginal and Torres Strait Islander health freely accessible to people involved in the area of Indigenous health with the aim of enhancing their knowledge and skills, and improving their practice and/or policy work. For the general community, the knowledge accessible via the HealthInfoNet will improve their understanding of Indigenous health and related areas.

Information-sharing among practitioners, policy-makers and others working to improved
Indigenous health is encouraged, supported and facilitated by the HealthInfoNet’s online ‘yarning places’ (electronic networks) allow people with common interests and purposes to share information, knowledge and experience from different States, Territories, regions and sectors.

How can you use the Indigenous offender health web resource?

The Indigenous offender health web resource is designed for use by people working, studying or interested in the health of Australia’s Indigenous offender population. As correctional staff operating in an Australian jurisdiction it is likely that you will manage Indigenous offenders as part of your job. The Indigenous offender health web resource provides you with the opportunity to develop insight into this population. Having a developed knowledge of the wider health issues facing incarcerated Indigenous offenders will inform your work and offers you the opportunity to contribute to ‘closing-the gap’. The conferences and events section can provide you with information of further professional development opportunities that can build upon the knowledge you develop from the publications section.

The Indigenous offender health web resource can equip you with a knowledge base of successful policies, programs and projects that operate in a correctional context which you may be able to adapt to your particular institution. The web resource can also provide you with the contact details of people developing and implementing these projects and programs. You could use this to foster collaborative efforts targeting Indigenous offender health.

Through the ‘share your information’ option on the web resource you can make the web coordinator aware of any programs, projects, publications or events you may be part of. This will enable your information to be processed and, if appropriate, published on the offender health web resource. Through this function you can promote your work to the wider community.

Conclusion

Finally it is important to remember that when Indigenous offenders leave custodial facilities they return to communities and lives often distinguished by poor health outcomes. The Indigenous offender health web resource, and the wider HealthInfoNet, offers you as custodial staff the chance to gain insight into the broad health context of Indigenous offending. Understanding this can only lead to better service delivery and outcomes, not just for the individual offender, but for their wider community.

References


*Australian and New Zealand Journal of Public Health*;23(4):(377-384)


