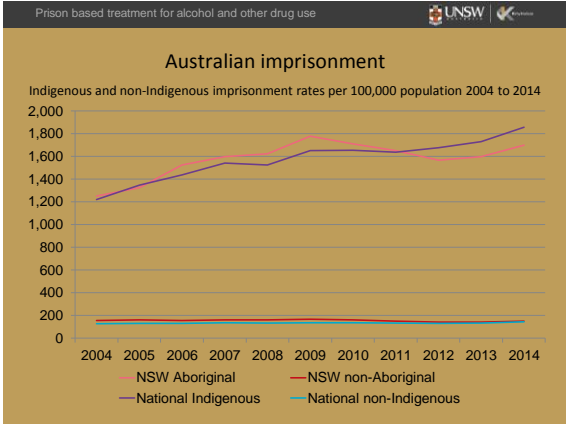




# Prison based treatment for alcohol and other drug use among Aboriginal and non-Aboriginal men

Doctor of Philosophy Candidate  
Michael Doyle | November 2015

Supervisors: Tony Butler, Jill Guthrie, Anthony Shakeshaft

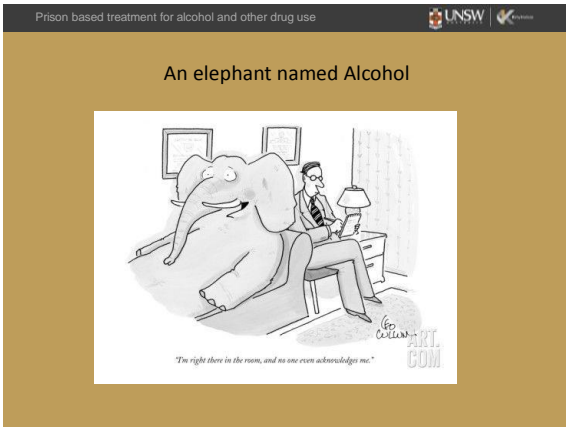


Prison based treatment for alcohol and other drug use

### Prison entrants AoD use NSW

Table 2: Indigenous and non-Indigenous alcohol and daily illicit and licit drug use in the past 4 weeks

Demographic/Health	Low-risk alcohol (n = 94)	Moderate to high-risk alcohol (n = 106)	O.R. (95%CI)	p-value
Aboriginal status	Aboriginal 18 (19.1%) Non-Aboriginal 76 (80.9%)	22(20.8%) 84 (79.2%)	1.0 0.90 (0.45-1.81)	0.78
Age in years	18-24 25 (25.6%) 25-39 52 (55.3%) 40+ 17 (18.1%)	32 (30.2%) 58 (54.7%) 16 (15.1%)	1.0 0.87 (0.48-1.66) 0.75 (0.31-1.74)	0.68 0.48
Daily nicotine use in past 4 weeks	Yes 67 (77.9%) No 19 (22.1%) Missing 8	83 (82.2%) 18 (17.8%) 5	1.0 0.76 (0.37-1.57)	0.47
Daily cannabis use in past 4 weeks	Yes 38 (44.7%) No 47 (55.3%) Missing 9	37 (36.3%) 65 (63.7%) 4	1.0 0.70 (0.39-1.27)	0.24
Daily heroin use in past 4 weeks	Yes 16 (18.8%) No 69 (81.2%) Missing 9	7 (7.1%) 92 (92.3%) 7	1.0 0.33 (0.13-0.84)	0.02
Daily amphetamine use in past 4 weeks	Yes 14 (17.3%) No 67 (82.7%) Missing 13	11 (11.2%) 87 (88.8%) 8	1.0 0.60 (0.26-0.26)	0.25
All illicit drug use daily	Yes 52 (59.1%) No 36 (40.1%) Missing 6	42 (40.8%) 61 (59.2%) 3	1.0 0.48 (0.27-0.85)	0.01



Prison based treatment for alcohol and other drug use

### Objectives, significance & community engagement

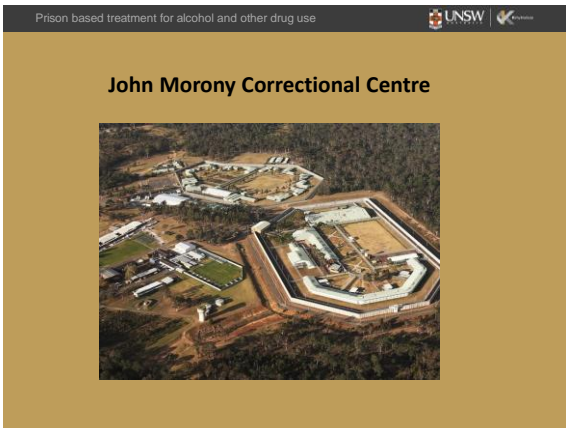
**Objectives:** Greater understanding of the experiences of prison inmates undertaking AoD treatment, with the view to informing enhancement. Provide new knowledge to enhance existing AoD treatment with a focus on cultural (i.e. Aboriginal) aspects of treatment.

**Significance:** Contribute to the literature on AoD treatment in Australian prisons. First published research into treatment program for Aboriginal people in prison in 18 years.

**Benefit/s:** Could lead to improved AoD treatment practises and help reduce future AoD related harm to the individual, their family and the community at large.

**Community engagement:** Project reference group. Members include Aboriginal community controlled organisations, Corrective Services and Justice Health NSW.

**Ethics approval:** Aboriginal Health and Medical Research Council of NSW and Corrective Services NSW.



## Methodology & process

### Grounded theory as described by Strauss and Corbin (1990)

#### Baseline interviews

- All face to face at John Morony Prison
- 31 participants interviewed (total of 6 refusals to take part)
- 2 to 3 interviews per day in batches, between June & September 2014

#### Follow-up interviews (approx. nine months later)

- 14 interviews at John Morony, 12 phone & 2 face to face at other prisons
- 3 participants refused follow-up and 2 had been released
- 2 to 3 interview per day in batches between March to May 2015

#### Data collection & analysis

Audio recordings were externally transcribed and cross checked for accuracy when received back. Extensive field notes taken to contextualise data collection. Coded using the NVivo program with initial codes setup using the interview questions, these codes developed/evolved and themes became apparent.

## Baseline interview results

### Demographics & imprisonment

- Standard for this population; lower socioeconomic, lived with partner or family, over half from single parent families and some had been removed
- 14 Aboriginal (all from NSW) and 17 non-Aboriginal (16 from NSW)
- Previously imprisoned
- Reported positive relationships formed in juvenile detention

### Education & employment

- Low education levels (generally)
- Good environment to improve reading skills
- Aboriginal participants generally had less developed plans for career paths and or education.

## Baseline interview results

### Prison environment

- Aboriginal participants: Not happy to be in prison but happy to see the 'brothers'
- Well no-one would wanna be inside... You know what I mean? But, when I'm inside, it doesn't, doesn't phase me. Like I know a lot of brothers in here and that, you know... I'm always looked after.... Sweet. - (Aboriginal participant)*

### Alcohol & other drug use

- First use of alcohol and cannabis 13-14 years & AoD use normalised
- Some chose drug use rather than alcohol because of parental alcohol use

*Me dad's an alcoholic.... I dib and dab, I'll have a drink on special occasions ... because then me dad being alcoholic won't really drink. I went the other way - went the drugs instead. (non-Aboriginal participant)*

## Baseline interview results

### Previous AoD treatment

- Most participants only got AoD treatment in prison and they only went to AoD services in the community if ordered by the Court or was a parole requirement
- Limited to no information given within the family or it was given by a person who took part in the behaviour they warned them about.

*Yeah. They all tell me that but ... my family all drink. You know what I mean? Like ... it's hard to say no, don't do it ... They used to say to me, when I was little, I was, I was a stubborn little c\*\*t, ... and they used to tell me, "Don't touch alcohol," and, "Don't touch drugs," this, that. When they were drinking, I used to just go and grab what I wanted and just drink it anyway.... You know what I mean? (Aboriginal participant)*

## Baseline interview results

### IDATP (expectations)

- AoD information better coming from a peer than a university or TAFE graduate

*Where ... you get someone that's, that's done a few TAFE courses .... read a few books on .... addiction, and stuff ... them trying to come in ... talk to ya, like it's not, it's like a lot of people, especially people that have been in the game a long time, sit back and go, "Who the f\*\*k's this?"*

- Aboriginal participants expressed a preference for an all Aboriginal group

*Yeah. Like be in a D&A group like yourself which ... a lot of brothers have got problems with drugs. ... You know what I mean? They're more comfortable speaking with a brother.... You know what I mean? Another Aboriginal ... which, at the end of the day, I've opened straight up to ya. ... You know what I mean? ... I don't care where you're from, Western Australia, ... this, this and that. At the end of the day, we're brothers.... You know what I mean? (Aboriginal participant)*

## Follow-up interview

(Preliminary results for participants that remained at IDATP)

### IDATP experience

- Aboriginal participants spoke about the value of hearing about the AoD issues of non-Aboriginal guys. Some, however, maintained a preference for a Aboriginal only group.
- Participants spoke about this being the first time they had ever talked about feelings or considered the feelings of others.
- Almost uniform response when asked about why people drop out.

### Prison experience

- Major changes in NSW – prison numbers increased, causing stress to the inmates and staff
- Need separate space for AoD treatment

## Follow-up interviews

(Preliminary results participants not at IDATP)

### IDATP experience/AoD treatment in prison

- Attended no other AoD program after leaving IDATP
- Issues around being discharged, voluntarily discharge
- Minimising their drug positive urinalysis tests

### Prison experience

- Increased stress at John Morony prior to leaving
- Regional prisons are less effected by stresses of increased numbers in NSW prisons

Final result August 2016  
Any questions?



Michael Doyle  
Phone 02 9385 9259  
Email: [mdoyle@kirby.unsw.edu.au](mailto:mdoyle@kirby.unsw.edu.au)