

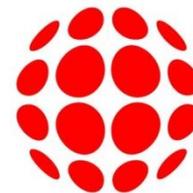
'SET UP TO FAIL': TRANSITION EXPERIENCES OF PRISONERS WHO INJECT DRUGS

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Conflict of interest

- Nothing to declare

Background

- In June 2018, 42,974 adults were imprisoned in Australia
 - 46% of prison entrants have a history of injecting drug use (2016)
 - Elevated rates of recidivism and re-incarceration among people who inject drugs (PWID)
- **AIM:** To explore the post-release transition experiences of PWID (released within previous 12 months)

Binswanger et al., 2009; Larney et al., 2012; Reekie et al., 2014; Butler & Simpson, 2017; Stahler et al., 2013

Methods

- Recruitment from SuperMIX cohort study (n=1,303)
- Eligibility for qualitative study:
 - 18+ years
 - History of injecting drug use
 - Recent history of incarceration (>3 months)
 - Released from custody <12 months (any security classification)
- Semi-structured interviews (09/2018 – 08/2019)
- Participant reimbursement (AUD 40)
- Inductive thematic analysis of interview transcripts



Who did we interview? (n=42)

- 34 males, 8 females
- Median age: 38.7 years (range 26-53)
- 7 identified as Aboriginal or Torres Strait Islander
- 3 overseas-born
- Accommodation
 - ‘stable’ (n=16)
 - ‘stable but vulnerable’ (n=13)
 - ‘transient/homeless’ (n=13)
- Almost all unemployed, 4 looking for work
- 38 with ongoing injecting drug use

Repeated re-incarceration as the norm

'A revolving door I call it. Revolve out revolve back in.... I actually thought growing up going in and out of institutions was the norm.' [Dave*, 36 years]

'I would do an 18-month jail sentence, I wouldn't last 12 weeks, I would go back in maybe for another 2 years and yeah maybe 4 to 8 weeks, I'd go in for 3 years and yeah, it was ongoing like that for 13 years...' [Daniel*, 36 years]

- Participants had learnt to expect eventual return to custody

**all names are pseudonyms*

Released to homelessness

'I know a lot of guys, you know, if they haven't organised accommodation while they are inside, they get out, guaranteed they are either going to OD (overdose) or they are going to go back in, in 2 weeks. You are set up to fail.' [John, 41]

- Insufficient supports and inadequate accommodation
 - Tied to return to drug use

'This young girl that I was friends with, she was in there for drug use and stuff, and she was saying how she's sick of that life. She wants to get away from it....She goes, "They're going to give me a hotel room for one night and then what am I going to do? I have to go back to my friends because I've got nowhere else to stay, and they're all using drugs." So, she's like, "I'll try not to use, but I don't think it's going to work." She's 26 and she's already been in I think four times, always released to homelessness.' [Jacqui, 36]

Paper trails hinder service access

‘Yeah, last time I got arrested it looked like I walked out of the place, so I got a flag next to my name, so it’s made it hard to get a room again....especially when they have got contracts and leases stating that you’ve been black listed if you don’t comply or let them know. If you’ve been locked up, it’s pretty hard to ring everyone you know, “oh I’ve been locked up.”’ [Sam, 31]

- Difficulties accessing supports due to historic records

‘At the moment, no one is helpful. Doesn’t matter who I ring or where I go, I got a bad name everywhere, because I had something years ago, you know what I mean.’ [Peter, 36]

Left to fend for themselves

'When I got released, I was on the suboxone and I thought everything was going to be fine in regards to me going straight to my chemist and picking up my dose and I've gone there and nothing was sent through...I felt like I was just left to fend for myself and [what] a vulnerable place to be in, especially when you get out of jail, because you are a relying on these organisations ...but they weren't there when I needed them the most and it caused me to relapse.' [Seth, 52]

- Continuity of care not always guaranteed
- System failures led participants to lose faith
- Reduced motivation to engage with services

Barriers to health and wellbeing

- Time in limbo / uncertainty

'I can't sort of address [hep C] until Court is out of the way, because I don't know where I'm going to be for 3 months... it's put me off pursuing it for the time being.' [Simon, 48]

- High-threshold, non-adaptive services

*'Sometimes I think, I'd rather be back in jail. At least I wouldn't have any problems with the methadone and I'd get fed every day. It's just, I'm used to being institutionalised. ... it would help if these so-called workers would answer their phone and not just, if you don't have a phone, you know what I mean, **"we'll ring you back within 3 working hours"** like how does that help me?'* [Mark, 40]

Differential experiences of service delivery

*[My old CCO worker] tried to work with me rather than against me, as if, “**Oh my gosh! You’ve been in jail. You’ve done this horrible crime, yeah, there’s no rehabilitation, you’re already stuffed,**” sort of thing. That was how I felt. So, I was like every appointment I just didn’t really want to go. My heart would be racing and I was like palpitating and I would feel sick thinking about going because I knew I was going to get a rundown of just how crap my life was and it’s like I already know that, like that’s in my head a lot. [Alisha, 33]*

- Non-stigmatising, inclusive approach facilitates engagement

‘I’ve been on CCOs before and always failed them...The difference this time was, even the staff, the corrections staff, down to the magistrate, I can’t explain the level of empathy and effort they put into me is just huge. Yeah, it has been life changing.’ [Joe, 45]

Transition experiences of PWID

- Recidivism/re-incarceration as the norm
 - PWIDs’ “transition period” includes both entry into and exit from custodial settings
- Systemic barriers and social exclusion processes prevail
 - Non-adaptive service delivery
 - Shared experiences of being “set up to fail” and “left to fend for themselves”
- Supports exist but are not equitably accessible
 - Non-stigmatising, inclusive approach to service delivery needed

And so where does this leave us?

- The reality for many prisoners who inject drugs is that the prison-to-community transition period includes both prison exit and re-entry
- There are insufficient supports available to PWID, and systemic barriers to service access exist – leaving participants feeling disenfranchised and disengaged
- Throughout this “vicious cycle”, PWID are experiencing social exclusion processes and are at risk of associated harms, including homelessness and overdose
- Impacts on health seeking and overall wellbeing
- **Need for a holistic, people-centred approach**

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