Justice Reinvestment - - SANDAS Position Paper No.1

What is Justice Reinvestment?

The term Justice Reinvestment (JR) was coined in 2003 by the US-based Open Society Institute, in response to concerns about the growing prison population, and its associated corrections, health and social costs. The evidence questioning the effectiveness of the prison and remand systems in addressing community safety and wellbeing are accumulating. There appears to be a need to challenge our institutionalised thinking and to look at new directions.

JR aims to reduce the money spent on "hard end" correctional services, and instead reinvests that money in strategies, programs and services that decrease crime and strengthen communities. Such community-based programs and services work to address the underlying causes of crime in high risk areas and population groups.

Reducing the growth in prison populations could include measures such as: increasing the rates of parole, probation and community service orders, (rather than straight prison sentences), increasing drug and mental health treatments for prisoners and those on parole or probation, education programs for prisoners and appropriate housing programs for prisoners once released.

JR uses demographic mapping, to best identify the communities that would benefit from targeted investment in programs for prevention, early intervention, rehabilitation. Instead of investing in more patrols, and more police on the ground in areas considered high-risk, JR directs money into the communities where the offenders come from, in order to break the cycles of crime that are often inter-generational. Programs and services on poverty, education, housing, health care and public amenities are generally the focus. Community safety is enhanced by engaging potential offenders in such programs.

Justice Reinvestment in Australia

The Australian Bureau of Statistics reports that between 2002 and 2012, Australia's prison population increased by 31 per cent to around 30 000 people.[1] While indigenous adults

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1 http://www.ausstats.abs.gov.au/ausstats/subscriber.nsf/0/ADB317600AB68902CA257ACB00136DC0/$File/45170_2012.pdf

constitute only 2.5 per cent of the population, more than 26 per cent of the prison population identify as indigenous.[2]

The figures are more disturbing when analysing the prison rates for indigenous youth, where two in every five young people are under justice supervision and are 24 more times more likely to be imprisoned.

With an estimated $3 billion spent on Australia's prison system every year and no real results in reducing the number of offenders, JR offers a new approach to communities with high rates of offending, to invest in programs that will reduce criminal behaviour as well as the rate of reoffending and re-incarceration.

A landmark report from the National Indigenous Drug and Alcohol Committee (NIDAC), found that $111 000 can be saved per year, per indigenous offender, by diverting offenders into treatments instead of prisons.[3]

While government investment in prisons nationwide has increased over the past two years, a number of indigenous specific drug rehabilitation services have either been wound back or closed. Research tells us that high re-offending rates and incarceration are associated with poor health outcomes for prisoners, including a relatively higher risk of mortality post-release. This is worse for indigenous Australians than for non-indigenous Australians.

This economic analysis also shows that when indigenous offenders are treated in the community, rather than prisons, they experience lower mortality rates and better health-related outcomes. These non-financial benefits have been estimated at $92 759 per offender.[4]

Three recent national inquires have recommended that a system of JR be trialled in Australia. The Australian Human Rights Commission's 2009 "Social Justice Report" argued that the implementation of JR could address the over-representation of Indigenous Australians in the criminal justice system.[5] A Senate Inquiry into "Access to Justice" in 2010 recommended that all governments recognise the potential benefits of justice reinvestment, and develop and fund a pilot program for the criminal justice system.[6]

While the evidence supporting the implementation of JR is widespread and growing, to date, no government has adopted such a policy. In NSW, the Justice Reinvestment Campaign for Aboriginal Young People launched in May 2012, is by far the most advanced in the country. The group presented the NSW Government with a detailed plan in October 2012, to commit to an agreed number of metropolitan and regional communities where justice reinvestment could be trialled and evaluated. [7]

Identifying and mapping the communities in need is an approach that should be trialled across the country, so the true benefits can be evaluated.

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[2] "An Economic Analysis for Aboriginal and Torres Strait Islander Offenders: Prisoners vs Residential Treatment" Australian Council On Drugs, Deloitte Access Economic 2013.
[3] Ibid.
[4] Ibid p.63
[5] http://humanrights.gov.au/social_justice/sj_report/sjreport09/chap2.html
[6] http://www.aph.gov.au/Parliamentary_Business/Committees/Senate_Committees?url=legcon_ctte/completed_inquiries/2008-10/access_to_justice/report/b04.htm
[7] http://justicereinvestmentnow.net.au/

Justice Reinvestment in practice: A US case study[8]

In the United States, 1 in every 100 adults is incarcerated, with two-thirds returning to jail once released. To keep up with the numbers in prisons, the US correction budget has amassed to more than $60 billion per year – a 300 per cent increase over the last twenty years.

Since it was first developed in 2003, JR has been adopted in ten US States – Arizona, Oregon, Connecticut, Kansas, Michigan, Nevada, Pennsylvania, Rhode Island, Texas, Vermont and Wisconsin.

Following bipartisan agreement to pursue JR, Texas became the first state to commence detailed mapping of the prison population, which found that more than half of the prison population came from only five suburban areas. Analysis of the mapping also found, that a combination of decreased funding for community-based substance use and mental health services had played a major role in the increasing prison population.

Once the data had been collected, and comprehensive consultations were held, the State of Texas introduced a raft of strategies aimed at reducing the prison population. Such measures included, new AOD treatment places in both prisons and for offenders returning to the community; improved probation and parole services and nurse-family partnerships. Investing in more community-based programs instead of purely in the correctional system has resulted in more than $444 million in savings each year.

Two years following the implementation of JR, the Texas prison population stopped growing for the first time in decades.

Justice Reinvestment and the Alcohol and Other Drug Sector

The prison population in South Australia has increased by 50 per cent over the past decade, with the average cost per person, per day, amounting to $221. This figure increases to more than $652 per day, in juvenile corrections.

At a much lower cost of imprisoning someone, JR could provide access to mental health services, case workers, youth development programs, employment and training programs, or rehabilitation programs in local communities. Such approaches are particularly important when creating alternate pathways for young people who are at high risk of long term, repeat offending, drug and alcohol abuse and suicide.

In 2008, 75 per cent of prison entrants in South Australia had a substance misuse history. This was most prevalent in the younger population where 76 per cent of 18-24 year olds had such a history.[9] This suggests the patterns of misuse and “at risk” situations were a pre-existing condition in their communities. The distribution of misuse histories between males and females was similar, although 56 per cent of males and 76 per cent of females had a

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[8] Bode, Adam ‘What is Justice Reinvestment?’ *Of Substance,* Vol, 9 no.1 2011

[9] *‘Supply, demand, and harm reduction strategies in Australian Prisons: An Update’* Australian National Council on Drugs, November 2011p.59

history of high alcohol intake. Given what is known about the effects of alcohol on lowering impulse control, it is plausible to suggest there is a lack of engagement with prevention programs in the communities.

Below is a table that shows the pattern of drug use by inmates in SA prisons in 2009:[10]

Drug	Male	Female
Cannabis	52 %	56 %
Amphetamines	32 %	22 %
Heroin	10 %	44 %
Cocaine	7 %	11 %

Based on detection data, it would appear prisons do not offer water tight respite from drug use. Drugs and drug use paraphernalia have the second highest confiscation rate in SA prisons, with 2008-2009 figures showing 782 drug detection incidents in SA prisons. In the same reporting year of the 1146 Hepatitis C tests conducted, 219 proved positive. The relationship between, AOD misuse, offending and the subsequent demands on the health systems is a strong one.[11]

For the Alcohol and Other Drug Sector, a JR system could see money invested into a greater number of evidence based improved alcohol and drug treatment programs in the community, appropriate and affordable housing options and general community based alternatives for prevention and early intervention as well as cross sector capacity building to deal with comorbidity as a risk factor in offending.

The JR options applied will depend on the profile and characteristics of each community which should have some participation and say in determining the best approaches. For example in Texas money was spent on 800 new beds in substance abuse treatment for those on probation, 3000 more places in outpatient substance abuse treatment for people on probation, 300 new beds in half-way houses, 500 new beds for an in-prison treatment unit for drink driving offences, 1200 new places in intensive substance abuse treatment programs in prison. Each community is in the best position to inform such investment in terms of its trends, capacity and demand on existing service levels.

SANDAS is of the opinion that programs which specifically address the harms caused by substance abuse must form a core component of any JR model that is trialled in Australia.

[10] Ibid
[11] Ibid p.60