

# No needles, no drugs in prison



Removing syringes is crucial to preventing disease, says JEREMY HANSON, in reply to last week's article 'The need for prison needles'

IN the best interests of Alexander Macchone Centre prisoners, correctional staff and the wider community, the Canberra Liberals oppose the push by ACT Labor and the Greens to introduce a needle exchange at the prison.

This push does not seriously attempt to address the fundamental problem: drugs getting into the prison in the first place.

With three quarters of ACT prisoners attributing their crimes to drugs, the objective must be to prevent drugs entering the prison, and to provide effective treatment and rehabilitation programs that will reduce the chance of hepatitis C transmission and continued drug dependence.

The recent Burnet Institute report into the ACT prison has shown that the policies to prevent drugs entering the prison, and the drug treatment programs are in disarray. Concerns raised include the flow of drugs entering the prison, the drug testing regime, searching practices, rehabilitation programs, access to health care, and staff pushing methadone on prisoners.

A needle exchange would detract from the effective implementation of these strategies. Providing syringes to drug-addicted prisoners would sim-

ply encourage them to maintain their drug habit. You cannot implement an effective drug-rehabilitation program in prison while, at the same time, supplying prisoners with drug-injecting equipment.

In fact, expert opinion has found that a needle exchange would lead to the "quasi-legalisation" of drugs:

"Stopping the spread of blood-borne disease would not, essentially, be difficult if it were not for the fact that it cannot happen without a quasi-legalisation of drug use within the correctional centre environment..." (Hamburger Report, 12.1).

Therefore, it cannot be credibly argued that a needle exchange is a "health" measure that could somehow be separate from custodial operations at the prison. Removing syringes is crucial to preventing disease. It is a fact that, under the current no syringe regime, there has been no transfer of hepatitis C or HIV recorded at the prison to date, and academic research shows that transfer of blood-borne disease is actually much higher outside of prisons amongst similar populations.

Prison staff also strongly oppose the introduction of a needle exchange and the overwhelming majority of



corrections officers have signed a petition to that effect.

As well as concerns about the negative impact of a needle exchange on drug programs, prison staff have expressed safety concerns about prisoners being armed with needles, which can be used as weapons against themselves and other prisoners.

Their argument is legitimate. A Canberra woman was jailed for nearly seven years recently for a series of robberies where she used blood filled syringes to threaten shop and security staff.

The Australian Nursing Federation has also stated publicly that the jail's nurses do not support a needle exchange at the jail. Nurses who would be at the front line of administering such a program are justifiably worried about a range of issues associated with such a proposal.

Prisoners also oppose a needle exchange. A submission provided by Chief Minister Katy Gallagher's inquiry into how to implement a needle exchange at the prison advised 100 per cent of prisoners interviewed rejected plans for a needle exchange.

ACT Labor and the Greens are instead driven by an ideological urge at the expense of good prison management, effective drug reduction, successful rehabilitation programs. No other State or Territory has a needle exchange, and for good reason. The welfare, health, safety, and human rights of prisoners, staff and broader community are best served by providing an environment with fewer drugs, and better access to effective rehabilitation programs at ACT prison, not a needle exchange.

*Jeremy Hanson is the Liberal spokesman for health and corrections.*

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By MICHA

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By EWA KRETOWICZ

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