



23 February 2009

The Hon. John Della Bosca MLC
Minister for Health
Governor Macquarie Tower
Level 30 Farrer Place
Sydney NSW 2000

Email: office@dellabosca.minister.nsw.gov.au

Subject: 'The Privatisation of Prisons and Prison-Related Services'

Dear Minister,

As I am sure you are aware the Mental Health Coordinating Council (MHCC) is the state peak body for non-government organisations (NGOs) working for mental health throughout NSW. We represent the views and interests of over 200 NGOs, and regularly respond to legislative and policy reform. We sit on numerous National, State (NSW) and State Government Department (NSW) committees and boards in order to affect systemic change. This representation includes the Justice Health Community and Consumer Committee and the Women's Advisory Council (DCS).

We acknowledge the fact that since the 1990's State Governments have endeavoured to find ways to contract out and competitively tender to reduce costs and increase efficiencies in areas of traditional responsibility, and that there is little chance that such a direction will be reversed in the foreseeable future.

Nevertheless, we wish to express the mental health community sector's concern regarding the growth in private contract management of goals at a time when the General Purpose Standing Committee No. 3 (NSW Legislative Council) is undertaking an Inquiry into: *The Privatisation of Prisons and Prison-Related Services*.

The Inquiry is investigating the issues broadly including matters relating to the:

1. The impact of privatisation on:
 - a) public safety and rates of escape
 - b) the incidence of assault on inmates and staff
 - c) disciplinary breaches
 - d) overcrowding
 - e) prisoner classification levels
 - f) rehabilitation programmes, mental health support services and recidivism rates

g) staffing levels and employee conditions

2. The comparative economic costs of operating public and private facilities and the impact of privatisation on publicly managed prisons
3. Accountability mechanisms available in private prisons
4. Future plans to privatise prisons or prison services in NSW, including the Court Escort Security Unit
5. The use and effectiveness of private security guards in perimeter security of prisons
6. The experience of privatisation of prisons and prison services in other Australian and overseas jurisdictions

Since all of the above matters are of concern to the mental health sector, we propose that it is an overly hasty decision to privatise Cessnock and Parklea as was announced in the NSW Government's mini budget in advance of the findings of the Senate Inquiry. This is particularly worrisome since the decision was based on the report recommendations of the NSW Parliament's Public Accounts Committee: *Value for Money from NSW Correctional Centre* (2005), which was extensively criticised from an economic perspective by many, including financial experts Andrew and Cahill (*Value for Money? Neo liberalism and New South Wales Prisons*. Wollongong University, 2008).

However, financial considerations aside, of primary interest to us is the matter of the higher rates of deaths and suicides identified in privately run facilities (Biles & Dalton, *Deaths in private prisons 1990–99: a comparative study: Australia*, 1999) and the system's responsibility to provide adequate opportunity for rehabilitation and support post-release.

Responsibility does not cease at the prison gates and it is unclear as to how these privately run goals will interface with community services, particularly those providing mental health services; substance abuse programs; employment, housing and living skills. Moreover, we are unaware of any assurances that Justice Health will maintain its position as health provider in these contexts.

MHCC propose that a move from a model of state judicial responsibility to a corporate model has led to a lack of transparency and accountability. Evidence has shown that privatisation has resulted in adverse outcomes for inmates and ex-inmates post-release (Nathan S, *Blind faith in private prisons*. 2008). Prison Privatisation Report International, UK Available at: www.psir.org)

Whilst there is no inherent association between mental illness and crime, there is a strong causal link between mental illness and incarceration. The fragmentation of mental health services together with inadequate access to a range of community-based services have led to the criminalisation of the mentally ill. As a consequence, unsurprisingly, goals and juvenile detention centres have become 'de facto' mental institutions.

The over-representation of people with mental illness in the criminal justice system highlights the need for legislative reform and the implementation of programs breaking the cycle of mental illness, poverty, unemployment and substance abuse across Australia (Henderson C. *Goals or de facto mental institutions? Why individuals with a mental illness are over-represented in the Criminal Justice System in New South Wales, Australia*, Mental Health Coordinating Council, 2006).

Unfortunately, often the only treatment available in the criminal justice system is medication. Effective treatment is one that emphasises recovery and appropriate support to facilitate integration back into the community. MHCC are concerned that the imperatives 'recovery' and 'rehabilitation' may be further compromised in privately run facilities where the principal driver for more efficient and cheaper prisons (Frieberg A, *Commercial confidentiality and public accountability for the provision of correctional services*. Current Issues in Criminal Justice. Vol: 11(2) 1999) is likely to equate to fewer rehabilitation orientated programs and interventions for people with mental health problems.

We urge the NSW Government to shelve the decision to expand privatisation further until the findings of the Standing Committee's Inquiry are made public, since it will prove to be very difficult to reverse such a decision if already in progress.

We thank you for your interest in this matter, and look forward to your comments.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'Jenna Bateman', with a large, stylized flourish at the end.

Jenna Bateman
Chief Executive Officer