Primary SDG | 3: GOOD HEALTH AND WELL-BEING
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Broad theme | Prisoners and smoking
Research | Helping ex-prisoners to not smoke cigarettes
Impact region | Indigenous Australia
Faculty | Medicine
School/Institute | National Drug & Alcohol Research Centre
Academic | Professor Kate Dolan
Project partners | Australian Department of Health ($880,000 in funding until 2018), NT Government
Related SDGs | 10: Reduced Inequalities

Elevator pitch
Kate is trialling an intervention to help Indigenous ex-prisoners to avoid smoking after they are released from prison, improving their health and wellbeing, and reducing their probability of experiencing tobacco-related illnesses.

The Challenge: On release prisoners resume smoking
Smoking levels among prisoners are much higher than the general population. In Australia, 74% of prisoners smoke cigarettes compared to around 15% for the general population. In 2013, the Northern Territory introduced smoking bans in its prisons. Other states have followed suit. Prisoners are not smoking when gaol, but shortly after being released, many resume smoking. This negatively affects their health and wellbeing, and the health and wellbeing of their family.

Indigenous smokers are not as addicted as non-Indigenous smokers, smoking intermittently rather than constantly. But when coupled with a poor diet and inadequate exercise, the average life of an Indigenous person in Australia is much less than a non-Indigenous person. Smokers are also a burden to the public health system, having long and sustained contact with the system before dying in their 60s.

UNSW’s solution: Provide intervention interviews and goal planning for ex prisoners
Calling on a similar treatment designed by The Royal Australian College of General Practitioners, Kate is trialling a 60 minute intervention (SNAP – Smoking, Nutrition, Alcohol and Physical activity) where prisoners about to be released and wanting to not smoke again are attended to by a therapist. During this meeting they assess risk behaviours and develop a strategy to quit, including goal setting, an action plan and locking in a follow-up meeting. In follow-up meetings a target group is breathalysed and compared to a control group.

The 550 prisoners trialled so far were daily smokers before incarceration and are mainly Indigenous men imprisoned in the NT. Early results indicate the SNAP intervention is having a positive impact. Around 97% of prisoners recommence smoking as soon as they are out. With the introduction of SNAP, this rate is more like 90%, with at least 10% of those trialled not smoking again in the three months after the intervention. The
project, which sees two interviewers travel around the NT to meet with subjects, finishes October 2018. With more funding, Kate would like to undertake a follow-up treatment for the target group, and provide a new round of treatment for the control group. Kate is also interested in undertaking a cost-benefit analysis that shows the cost savings to the public health care system, and in undertaking a similar trial targeting alcohol use.

In other work, Kate was contracted by Population Services International (NGO US) to review the prison medical service in Liberia. After visiting five of the 16 prisons in the country, she wrote up a standard operating procedure manual for the prison department to follow, and she ran two three-day training courses for 70 correctional and health staff around medical responses to HIV, TB, malaria and hepatitis. Kate has undertaken similar work in the Philippines. For the UN Kate and her student, Rebecca Bosworth, surveyed every country in the world about the state of disease (HIV, malaria, hepatitis a, b and c) in their prisons. She is also interested in HIV and TB prevention work in Asia Pacific.

The Impact: Stop smoking, improve health and wellbeing, limit cost to public health system

The immediate benefit of the trial is that it is stopping ex-prisoners from smoking. When people quit smoking it has immediate health benefits for them and their families. By not smoking, they are also reducing their likelihood of being a costly liability to the public health system when they get older. There are flow-on benefits too, such as increased confidence, and better diet, exercise and alcohol practices.

Researcher

Kate Dolan is Professor at the National Drug & Alcohol Research Centre (UNSW). She is a specialist in the transmission and prevention of infectious diseases in prison. In the past, she has worked with Professor Gerry Stimson on needle and syringe programs in the UK, and with Dr Alex Wodak at St Vincent’s Hospital (Sydney) on the prevention of HIV among drug users. Kate is passionate about helping people in prison access medical attention that everyone deserves.

Ben Falkenmire 21.05.18